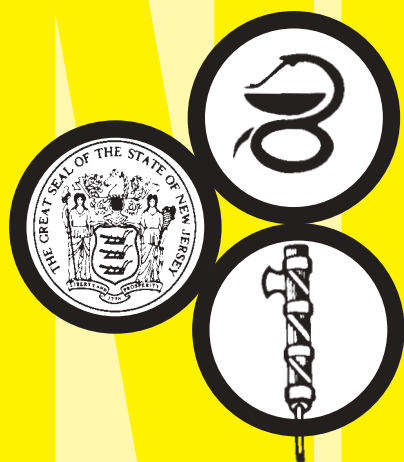


October 2003



# New Jersey Board of Pharmacy

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[www.state.nj.us/lps/ca/boards.htm](http://www.state.nj.us/lps/ca/boards.htm)

Published to promote voluntary compliance of pharmacy and drug law.

## ***New Executive Director Named***

Joanne Boyer, RPh, was appointed executive director of the New Jersey Board of Pharmacy effective September 2, 2003. Joanne is a graduate of the University of the Sciences with a bachelor's degree in pharmacy. Prior to joining the Board of Pharmacy, Joanne was associated with Aventis Pharmaceuticals in Bridgewater, NJ, as manager, clinical operation services. She has also worked for Coram Healthcare as director, pharmacy operations, and has had extensive experience in hospital pharmacy.

## ***DURC Eliminated, Formulary Still in Effect***

Pursuant to language in the 2004 budget signed by Governor James E. McGreevey, effective July 1, 2003, "no State funds are appropriated for a Drug Utilization Review Council [DURC] in the Department of Health and Senior Services and therefore the functions of the Council shall cease." The function of the DURC was to receive and review product applications for inclusion of new and additional manufacturers' products to the Formulary. This budget language does not repeal the statute N.J.S.A. 246E-6(b) or rescind the Formulary, which exists as N.J.A.C 8:71. The Formulary continues to be in effect until at least May 17, 2004.

The Department of Health is in the process of developing new rule making to address substitution going forward. Further information will be forthcoming as soon as it is available.

## ***Certified Midwife CDS Prescriptive Authority***

Effective May 19, 2003, the prescriptive authority of certified nurse midwives (CNMs) was augmented to include controlled dangerous substances (CDS). This expanded prescriptive authority necessitated that modifications be made to two of the existing State of New Jersey uniform Prescription Blank (NJPB) artwork designs. Specifically, the two formats requiring modification involved the CNM NJPB and the Healthcare Facility NJPB. The Healthcare Facility NJPB simply required the modification of a dialogue box that had previously prohibited the prescribing of CDS. The NJPB for CNMs required modification of the essential data regarding both the CNM and the collaborating physician.

CNMs able to prescribe CDS, and desirous of exercising said authority, are being issued Drug Enforcement Administration registration numbers, which must appear on newly designed CNM NJPBs whenever a CDS is prescribed. The new format CNM NJPB and slightly modified Healthcare Facility NJPB becomes mandatory on December 1, 2003.

## ***Continuing Education***

The new continuing education (CE) regulation that took effect March 17, 2003, was published in the July 2003 *Newsletter*. One of the changes in the new regulation requires licensees to obtain at least 10 CE credits through didactic instruction per biennial license renewal.

"Didactic instruction" means in-person instruction and may include telephonic or electronic instruction that is interactive, but shall not include videotaped instruction.

The Board believes that didactic instruction is an important part of the CE process for pharmacists. Live instruction gives the licensee an opportunity to raise questions and interact with other participants as well as the program lecturer. Active participation, the Board believes, will help ensure that a licensee's CE is as comprehensive as possible.

The following questions and answers will hopefully clarify the Board's position on "live" CE.

**Question:** How many "live" credits do I need?

**Answer:** You will be required to have 10 credits, which are didactic, prior to your next biennial licensure period (May 2005-April 2007).

**Question:** Are courses offered on the Internet considered "live"?

**Answer:** If the CE program allows you to interact with other participants and the presenter and to ask questions and receive responses in real time, then the program would qualify as a "live" program.

**Question:** If I am not sure whether or not a CE is "live," how can I find out?

**Answer:** American Council on Pharmaceutical Education-approved courses include an "L" in the last three spaces of the course number to distinguish them as live CE. For example, L02 would denote "live program, AIDS therapy-related topic." If you have further questions, please submit your written inquiry to the Board office to the attention of the CE Committee.

## ***Cyclosporine Prescriptions***

Pharmacists receiving prescription orders for "cyclosporine capsules" must contact the prescriber to determine the correct formulation intended for the patient. There are AB-rated generic versions for both Sandimmune® and Neoral® capsule formulations. However, Sandimmune is **not bioequivalent** to Neoral and should not be interchanged without the permission of the prescriber. The Neoral formulation is "cyclosporine modified" and is more bioavailable than the Sandimmune cyclosporine formulation.

## ***Buprenorphine Treatment and Product Information***

Two formulations, **Subutex**® (buprenorphine HCL sublingual tablet) and **Suboxone**® (buprenorphine HCL/naloxone HCL dihydrate sublingual tablet), were approved in October 2002, and are now available for office-based treatment of opioid dependence.

Pharmacists can verify which physicians are eligible to prescribe buprenorphine in an office-based treatment setting in two ways:

- ◆ Online Physician Locator: [www.buprenorphine.samhsa.gov](http://www.buprenorphine.samhsa.gov). (Note: The Physician Locator does not list every physician with a waiver, only those who have agreed to be listed on the site.)
- ◆ Phone directly 1-866/287-2728 or 301/443-0457.

Only physicians who have met special training criteria and have obtained waivers can prescribe buprenorphine for opioid addiction and that practice is limited to 30 patients at any given time. Nurse practitioners,

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physician assistants, or anyone in a collaborative practice, for that matter, is **not** eligible to be a part of this program.

Physicians should include their waiver identification number on all opioid addiction treatment medications. The waiver number begins with an "X" rather than an "A" (ie, XB1234569).

There are two products in this program:

1. **Subutex**, which is a Schedule III controlled substance available in two strengths: 2 mg and 8 mg buprenorphine.
2. **Suboxone**, which is available in 2 mg buprenorphine with 0.5 mg naloxone and 8 mg tablet with 2 mg of naloxone.

For information on distribution of product, call 1-866/282-2107.

### **Pharmacist Licenses**

Every registered pharmacist is required to conspicuously display his/her original wall license and biennial renewal certificate in his/her principal place of employment. If a pharmacist practices in more than one location, he/she must be able to immediately produce his/her wallet-sized license upon request. Any failure to comply is prima facie evidence that such person is not a registered pharmacist. Please note that it is illegal to reprint, photograph, photostat, duplicate, or reproduce any of these documents in whole or in part (N.J.S.A. 45:14-10 and N.J.A.C. 13:39-3.6).

### **Schedule II Controlled Substances: Faxed Prescriptions, Partial Filling, and Special Exceptions for Management of Pain**

Pharmacists may fill Schedule II controlled substance prescriptions transmitted by practitioners via facsimile if the prescriptions are for:

- 1) narcotic substances that are to be compounded for the direct administration to a patient by parenteral, intravenous, intramuscular, subcutaneous, or intraspinal infusion;
  - 2) Schedule II substances for a resident of a long-term care facility (LTCF); or
  - 3) narcotic substances for a patient enrolled in a hospice program.
- In each of these cases, the facsimile serves as the original written prescription (C.F.R. 1306.11(d),(e),(f) and (g) and N.J.S.A. 45:14-14).

Pharmacists may fill Schedule II controlled substance prescriptions in partial quantities for a patient in a LTCF or for a patient with a medical diagnosis documenting a terminal illness. The pharmacist shall contact the practitioner prior to partially filling the prescription if there is any question as to whether or not the patient may be classified as having a terminal illness. The pharmacist shall record on the prescription whether the patient is "terminally ill" or a "LTCF" patient. For each partial filling, the dispensing pharmacist shall record the date of the partial filling, quantity dispensed, remaining quantity authorized to be dispensed, and the identifica-

tion of the dispensing pharmacist. The total quantity dispensed must not exceed the total quantity prescribed. The prescription shall be valid and may be filled for a period not to exceed 60 days from the issue date (N.J.A.C. 8:65-7.10(d)).

Pharmacists may fill a Schedule II controlled substance prescription that exceeds 120 dosage units for patients who are on a treatment plan by the practitioner and who are suffering from pain from cancer, intractable pain, or terminal illness. A Schedule II prescription may not exceed a 30-day supply (N.J.A.C. 13:35-7.6(c)).

### **Board Elects New Officers**

At the June 11, 2003 meeting, the Board elected Edward G. McGinley, RPh, of Lumberton, NJ, president, and Edith Tortora Micale, RPh, of North Bergen, NJ, treasurer, for the coming year, 2003-2004.

Mr McGinley, who served as treasurer of the Board, is currently director of Pharmacy Business Development with Pathmark Stores, Inc. He was appointed to the Board in March 2000 and has served on several committees of the Board, including the Rules and Regulations Committee. Mr McGinley has worked diligently and effectively as a board member. His leadership ability, attention to detail, as well as his consensus building will serve the Board well.

Mr McGinley has had the distinction of being honored by the New Jersey Council of Chain Drug Stores as Pharmacist of the Year in 2002.

Mrs Micale was appointed to the Board in February 1989. She served as president of the Board from 1992 to 1994, has served on numerous committees of the Board, and currently serves as chairperson of the Continuing Education Committee as well as the Intern/Extern Committee. Mrs Micale has been affiliated with Englewood Hospital and Medical Center in Englewood, NJ. Her dedication to the profession of pharmacy was recognized by the New Jersey Pharmacists Association as a recipient of the Wyeth Pharmaceuticals' Bowl of Hygeia Award.

The Board also recognized outgoing President Anthony Alexander. He was commended by his fellow board members for the excellent leadership he provided to the Board during his term of office.

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