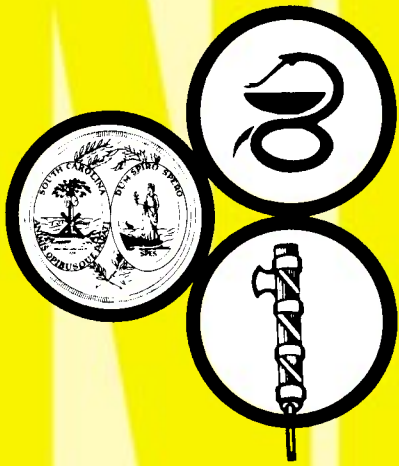


November 2001



SC Department of Labor, Licensing & Regulation – Board of Pharmacy

Published to promote voluntary compliance of pharmacy and drug law.

Synergy Business Park, 110 Centerview Drive
PO Box 11927, Columbia, SC 29211

Board Appointment

Governor Jim Hodges has appointed a new member to the South Carolina Board of Pharmacy. Representing the Fifth Congressional District is Marvin A. Hyatt, Sr, of Rock Hill. Hyatt replaces Ronnie W. Cromer. He attended the University of South Carolina, where he received a degree in pharmacy in 1959. Hyatt began his pharmacy career in the hospital setting. Since 1965, he has practiced pharmacy and been the owner of Good Pharmacy in Rock Hill. Hyatt also provides nursing home provider and consultant services at Good Pharmacy. His appointment began July 1, 2001, and extends through June 30, 2007.

Next Board Vacancy

The next Board of Pharmacy member term begins July 1, 2002, and ends June 30, 2008. Any pharmacist interested in running as a candidate must:

- reside in the Fourth Congressional District;
 - be licensed and actively practicing pharmacy in South Carolina; and
 - before December 1, 2001, submit to the Board office a biography and petition bearing the signatures of at least 15 pharmacists practicing in the Fourth District.
- After receiving biographies and petitions, the Board administrator will:
- prepare and mail ballots by January 15, 2002, to all pharmacists licensed and residing in the Fourth Congressional District and who certified on their last renewal application that they reside in the Fourth Congressional District; and
 - certify as true and valid all ballots postmarked before February 15, 2002, and received by the Board office before February 25, 2002.

Before March 1, 2002, the Board will certify in writing to the governor the names of the three candidates receiving the most votes in the election along with the name of the person whom the nominee replaces on the Board. The new member, when appointed by the governor, will take office on July 1 of that year.

If you are interested in becoming a candidate for this position or have any questions, please contact the Board office.

South Carolina Recovering Professional Program (RPP)

The Pharmacy Profession's Resource to Impaired Pharmacists; Indicators of Addiction among Pharmacists

Comments from Jack White, Director of RPP

We welcome the request from the South Carolina Board of Pharmacy staff for an article that addresses the issue of "Indicators of Addiction." This topic has significant interest for managers, supervisors, and colleagues. All of the above can take advantage of the Recovering Professional Program (RPP) when they feel that a pharmacist's behavior suggest a problem with some form of addiction. They may discuss this condition and their options with an RPP Addiction Specialist by calling 1-877/349-2094. There may be benefits in:

- Calling RPP for consultation regarding the questioned pharmacist,
- Early intervention by your administrative and professional staff, and
- Early referral to the Recovering Professional Program for the impaired pharmacist.

Some general information covering any personnel at risk includes:

- Narcissism – increasingly focused on self and self needs.
- A cigarette user – even now, especially when professionals are aware of the risks, the impaired professionals may be using cigarettes.
- Psychological indicators include passivity, self-doubt, and pessimism. Such individuals may become increasingly passive in relation to their position and with their supervisors. They may begin to express personal doubt about their abilities either on or off the job and may demonstrate increasing pessimism in all areas of their work and life. (Vaillant 1992)
- Regular use of alcohol is part of a pattern of addiction. It may be the only drug of choice or it may be part of a poly-drug use pattern.

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- A family history of substance dependency or mental illness is frequently an indicator of a professional with the propensity for impairment.
- Self-medication occurs with many medical professionals, including pharmacists. This may result from their knowledge of controlled substances and the long hours pharmacists spend on the job.
- Pharmacists have access to drugs, and this can lead to diversion of drugs. Indications of diversion in a pharmacy could include offering to work extra shifts, inordinate number of telephone prescriptions, and audits finding discrepancies. Recordkeeping can be either exceptionally well maintained or very sloppy.
- Physical indicators can include slurred speech and excessive sweating.
- Some try drugs simply for thrill-seeking, and their past behavior may suggest this tendency.
- Personal, marital, job, financial, or other stressors may be precursors to drug use.
- Having a history of using illicit drugs should be considered as well as childhood abuse.

The work environments of pharmacists are known to include stress. There is currently a shortage of pharmacists; pharmacists work long hours (12-14 hour days) with negative consequences for physical well-being; they work in environments with minimal assistance; they experience a number of distractions including numerous telephone calls, drive-in windows, and excessive paperwork and reports. They, unfortunately, are the focal point for complaints (from doctors, the general public, and insurance companies to satisfy regulations). Often they take stress home that takes a toll on them and their family.

If you believe any of these conditions exist and desire professional consultation, contact RPP:

Address: 3600 Forest Drive, Suite 205, Columbia, SC 29204

Telephone: 877/349-2094 (toll-free, 24 hours a day, seven days a week, 365 days a year!)

Web site: www.scrpp.org

Board Policy on Oxygen

An order, whether oral or written, for oxygen therapy provided by a facility, over which the Board of Pharmacy has jurisdiction, should be maintained in a readily retrievable manner on the site permitted. The order should contain at minimum

- 1) full name and address of the patient,
- 2) date of issuance,
- 3) name, address, telephone number, and degree classification of the prescriber, and
- 4) person issuing order and order contents, duration of use, duration and method of administration.

A current order, which reflects the patient's therapy, should be maintained in a readily retrievable manner on the site permitted until such time as the prescriber discontinues the therapy.

In addition, facilities should maintain records that account for contents, lot numbers, and name of patients to whom oxygen is dispensed as directed by the Food and Drug Administration.

Controlled Substance Prescription with No Date

Comments from Wilbur Harling, Department of Health and Environmental Control-Director, Bureau of Drug Control

If an authorized practitioner fails to write the date of issue on a prescription, and the prescription is subsequently presented to a pharmacist, then the pharmacist **must** contact the prescribing practitioner to obtain the date of issue **prior** to dispensing the controlled substance. The issue date should be **noted on the prescription** as well as the **communication** between the pharmacist and the prescribing practitioner. If all other requirements of a prescription have been met, then this prescription is considered valid.

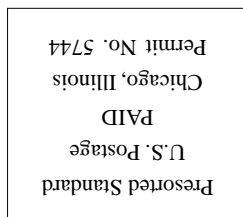
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