Newfoundland and Labrador Pharmacy Board

The Apothecary

Fall 2016

The Apothecary is the newsletter of the Newfoundland & Labrador Pharmacy Board.
It contains information on a wide variety of topics intended to enhance the practice of all pharmacists in the province of Newfoundland & Labrador.
All registrants are responsible for reviewing any and all information contained within including documents which are made available on the NLPB website via links throughout the newsletter.
The Apothecary is now circulated electronically and is available in hard copy format only upon specific request.

Clinical Decision Making in Times of Change

Due to recent expansion in the pharmacist's scope of practice, more than ever pharmacists are using professional judgement to make tough, clinical, patient-centered decisions.

Historically, pharmacy has been a rule-bound and rule-enforcing profession; however "the rules" are changing and pharmacists are being challenged to make decisions in the "grey" areas of practice.

Here are four key factors that can be used in guiding your decisions:

Taking actions in the patient's best interest

Actions and decisions must always be made from the perspective of what is in the best interest of the patient. Ask yourself "What does the patient need to optimize their health outcome?"

Applying knowledge and expertise

Apply the range of knowledge and experience gained through clinical practice to the information gathered from your assessment and dialogue with the patient to guide your decision-making.

Reasonable and acceptable

Decisions are often required immediately with no time for consultation with a colleague. To help validate if your decision is reasonable and acceptable, ask yourself "Would a peer make a similar decision, given the same circumstances?"

Documenting the rationale and actions

Documenting decision-making is critical. When considering how much detail to include ask yourself "What information would a colleague need to know in order to clearly understand what I did and why?"

The **Code of Ethics** and **Standards of Practice** are two of your most important tools to guide your professional judgement and clinical decision-making. But, it is important to also consider situational and patient-specific factors. Remember, not make a decision is still a decision that can affect patient outcomes.

Exempted Codeine Products

Revised Standards of Practice Approved

During the Board meeting held on September 9, 2016, the Board reviewed and approved revised *Standards of Practice for The Sale of Exempted Codeine Products in Community Pharmacies*.

Although exempted-codeine products (ECPs) are widely used, there are ongoing concerns about the risks associated with their use. Risk of opioid dependence is a primary concern; especially when used by adolescents as evidence indicates that early use may put this age group at an increased risk of developing other forms of substance dependence. Furthermore, a Health Canada review recommends that codeine not be used in patients under 12 years of age due to cases of serious side effects and death that have been attributed to codeine. Regardless of age, preparations that include acetaminophen are associated with acetaminophen toxicity in individuals who consume large quantities and/or are consuming other acetaminophen products concurrently.

The Narcotic Control Regulations state that: "No pharmacist shall sell or provide" an ECP "if the pharmacist has reasonable grounds to believe that the preparation is to be used for purposes other than recognized medical or dental purposes."

Practice site assessments and questions received at NLPB office have raised concerns that some pharmacists may not be performing a patient assessment when receiving requests for ECPs, or are assessing repeat requests for ECPs based on the date of the last fill.

The updated Standards of Practice emphasize pharmacists' responsibility to assess patient requests for ECP's based on appropriate indications for ECP use, as well as the importance of pharmacist-patient consultation.

Summarized below are some of the key points from the revised Standards.

Patient Assessment

- Only a pharmacist may authorize the sale of an ECP, and prior to authorizing the sale, the pharmacist must personally consult with the patient to determine the appropriateness of the request.
- When considering whether or not the sale of an ECP is appropriate, pharmacists are expected to take into account:
  - the patient's age;
  - pregnancy and lactation status (if applicable);
  - relevant allergies and/or sensitivities;
  - other medical conditions and medications;
  - signs and symptoms of the condition to be treated;
  - length and severity of present symptoms; and
  - patient history with ECP usage for the current or other conditions.
- Pharmacists are expected to make reasonable attempts to ensure the patient has not received additional ECPs or similar prescription/non-prescription medications within an unreasonable time period that would put the patient at risk of additive toxicity. This is accomplished by consulting with the patient as well as checking the patient's Pharmacy Network profile.

(Continued on page 3)

- The onus is on the pharmacist to refuse to provide the ECP and refer the patient to another health care provider if it is determined that:
  - the condition or symptom(s) are chronic or serious in nature;
  - the ECP will inadequately treat the medical or dental reason for use; or
  - continued use of ECPs is not in the best interest of the patient.

Package Size Restriction & Documentation

As with the previous version, the revised Standard includes restrictions on how many tablets and millilitres of liquid may be provided to a patient at one time.

Additionally, the Standards still require each sale of an ECP to be documented in the patient's medication profile and be appropriately labelled in accordance with the Standards of Pharmacy Operation-Community Pharmacy.

One of the resources referenced in the document is a sample *Documentation of Pharmacist-Authorized Exempted Codeine Requests* (posted on the **Pharmacy Practice Resources** page of the website). This template may be useful for pharmacists to document patient assessment and consultation activities associated with ECP requests.

Pharmacist-Patient Consultation

- While section 3.8 of the *Standards of Pharmacy Operation-Community Pharmacy* requires pharmacists to provide education and counselling to patients only on the original filling of a prescription, due to the issues associated with the inappropriate use of ECPs, pharmacists are expected to consult with the patient regarding each and every sale of an ECP.
- In addition to the information outlined in section 3.8 of the *Standards of Pharmacy Operation-Community Pharmacy*, the counselling provided should include warnings concerning the over-use of codeine as well as acetaminophen or ASA.
- In addition to verbal counselling, the pharmacist should provide the patient with supplementary written information on codeine use. The Standards also include a sample Patient Information leaflet as one of the referenced resources.

The full revised Standards can be found on the **Standards, Guidelines and Policies** page of the website.

Other Recent Revisions to Standards, Guidelines and Policies

Due to many recent changes to pharmacy practice, the Board has had a very busy year approving new Standards, Guidelines and Policies and making revisions to existing documents. Please see the website for the latest versions of the following:

⇒ Guidelines for Participating in Medical Assistance in Dying - approved Sept 2016

⇒ Guidelines Regarding the Sale of Naloxone Injection in Community Pharmacies - approved Sept 2016

⇒ Licensing Policy - Centralized Prescription Processing (Central Fill) - approved Sept 2016

⇒ Standards - Prescribing by Pharmacists - revised Feb 2016

⇒ Standards for the Safe and Effective Provision of Medication for the Treatment of Opioid Dependence - revised Aug 2016

⇒ Standards for Pharmacy Compounding of Non-Hazardous Sterile Preparations - approved Feb 2016

The Pharmacy Network – What's it like to connect?

2016 has been a busy year for the NL Centre for Health Information's Pharmacy Network. Already this year, more pharmacies than ever before have connected, with a total of 133 pharmacies connected to the Pharmacy Network as of September 30. The Pharmacy Network is busier than ever – from May to July, there were more than 1 million successful transactions each month, and the processing time is the best it's ever been.

For pharmacies that haven't yet connected, you may wonder what it's like to connect. To assist with connection, the Pharmacy Network team offers onsite support to ensure connection and operation is as smooth as possible, and return visits are rarely required. The Pharmacy Network team will check in regularly just to ensure all questions are answered.

Here's what Patrick Ryan, Staff Pharmacist at the newly connected pharmacy Brookfield Pharmachoice, had to say about the Pharmacy Network and how it is working for Brookfield Pharmachoice.

> *"On June 21, 2016 my pharmacy joined the Pharmacy Network and there really was nothing to it. Unfortunately, there are a number of misconceptions about the Pharmacy Network that developed over the last couple of years.*
>
> *I was told to add two-three hours to our wait times; I was told we were going to lose business; I was told the Pharmacy Network would slow us down and when it went down, it was a nightmare; I was told we would need extra staff and equipment and that compounds and OTC's were difficult to process.*
>
> *With compliments to the hardworking staff at the Centre for Health Information, I have to say none of this was true.*
>
> *Now when I am talking to friends that work at other pharmacies, I tell them there is really nothing to the Pharmacy Network and that the benefits far outweigh any negatives that may be associated with the Pharmacy Network. With respect to the benefits associated with the Pharmacy Network, they are obvious. Hospitals and other healthcare facilities will have access to patient profiles, which means less phone calls and faxes, and our patient profiles will be available after hours.*
>
> *The Pharmacy Network helped us update our patient profiles and we were able to use patient MCP's for pharmacy duties such as medication management. We have also used the Pharmacy Network to update our doctor and dentist files.*
>
> *The Pharmacy Network makes transfer of large patient profiles easier. We have used the Pharmacy Network to identify patients who double doctor and use multiple pharmacies for such things as codeine products.*
> *Once all pharmacies are on the Pharmacy Network, it will be great having our patients' complete profiles.*
> *Thank you to the staff at NLCHI for their patience and support and good luck with the rest of the roll out."*

The Pharmacy Network team is available to help you get your pharmacy up and running. To make a connection appointment please call 1-877-752-6006 or email service@nlchi.nl.ca.

Submitted by: The Newfoundland and Labrador Centre for Health Information

Online Drug Information Resources

Finding Reliable Drug Information When You Need It

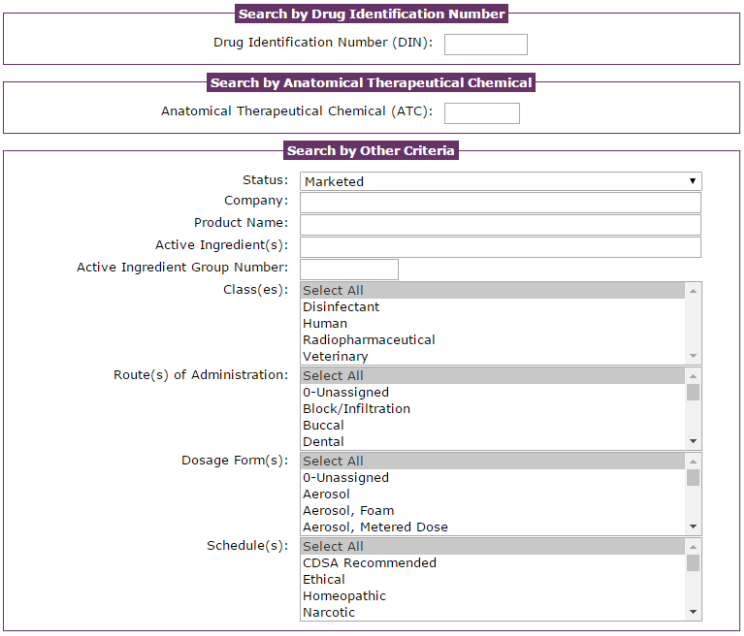
In a busy pharmacy practice, it is not always easy to take the time to find answers to drug information questions. This may be in part due to the fact that you do not always know where to look, and when you do find helpful information it is hard to assess the source's reliability. To help make this a little easier, the Memorial University Provincial Drug Information Centre will be sharing a series of articles that highlight some of the great, reliable, and freely accessible drug information resources. This first article will focus on the Health Canada-Drug Product Database.

Health Canada - Drug Product Database Health Canada Santé Canada

Have you ever tried to determine if a product is available in Canada? Perhaps you needed to know if a particular dosage form existed? You may have looked to the CPS, but unfortunately this resource does not always provide definitive answers. Monograph submission to the CPS is voluntary and therefore incomplete and information on generic products is very limited.

The Drug Product Database (DPD) may be able to help answer those questions that the CPS cannot. The DPD is a user-friendly searchable database that contains entries for all of the products approved for sale in Canada (including products that are not yet marketed and those that have been removed from the market!). The DPD is not limited to human pharmaceuticals but also includes biological agents, veterinary drugs, radiopharmaceutical drugs and disinfectant products.

Below is an image of the **DPD's main search page**. As you can see, you can search for products in a variety of ways depending on the information you have. You can get product specific information by searching by DIN, ATC code, or the brand or generic name of the product. If you suspect your search will return many results you can refine your search based on the class of the agent, route of administration, dosage form or schedule.



The search will default to only identify products that are currently marketed in Canada, but you can change that using a drop-down menu to identify products that are approved and not yet marketed or products that have been withdrawn from the market.

Once you run your search, you will get a table listing all of the products matching your criteria. The table will list the DIN, manufacturer, product brand name, class, schedule, active ingredient name and drug strength. A simple search for the active ingredient "ethinyl estradiol", as shown below, returned 77 products that are marketed in Canada containing that ingredient.

Search Results

77 **results found,** 1 to 25 **are displayed**
Next Results

List of Returned Drug Products

Status	DIN	Company	Product	Class	PM [1]	Schedule	# [2]	A.I. Name [3]	Strength
Marketed	02236974	PFIZER CANADA INC	ALESSE 21	Human	Yes	Prescription	2	ETHINYL ESTRADIOL	20 MCG
Marketed	02236975	PFIZER CANADA INC	ALESSE 28	Human	Yes	Prescription	2	ETHINYL ESTRADIOL	20 MCG
Marketed	02387875	APOTEX INC	ALYSENA 21	Human	Yes	Prescription	2	ETHINYL ESTRADIOL	20 MCG
Marketed	02387883	APOTEX INC	ALYSENA 28	Human	Yes	Prescription	2	ETHINYL ESTRADIOL	20 MCG
Marketed	02317192	TEVA CANADA LIMITED	APRI 21	Human	Yes	Prescription	2	DESOGESTREL	0.15 MG
Marketed	02317206	TEVA CANADA LIMITED	APRI 28	Human	Yes	Prescription	2	DESOGESTREL	0.15 MG
Marketed	02298538	TEVA CANADA LIMITED	AVIANE 21	Human	Yes	Prescription	2	ETHINYL ESTRADIOL	20 MCG
Marketed	02298546	TEVA CANADA LIMITED	AVIANE 28	Human	Yes	Prescription	2	ETHINYL ESTRADIOL	20 MCG
Marketed	02187086	PFIZER CANADA INC	BREVICON 0.5/35 TABLETS (21-DAY PACK)	Human	Yes	Prescription	2	ETHINYL ESTRADIOL	0.035 MG
Marketed	02187094	PFIZER CANADA INC	BREVICON 0.5/35 TABLETS (28-DAY PACK)	Human	Yes	Prescription	2	ETHINYL ESTRADIOL	.035 MG
Marketed	02189054	PFIZER CANADA INC	BREVICON 1/35 TABLETS (21-DAY PACK)	Human	Yes	Prescription	2	ETHINYL ESTRADIOL	0.035 MG

You can then click on any of the DINs to obtain further information on specific products, including date the product was first marketed, dosage form, route of administration, AHFS code, and a complete list of active ingredients with their strength. Many product-specific pages will also contain a link to the official product monograph.

Current Status: **Marketed**

Current Status Date: 2015-05-20

Original Market Date: [1] 2007-11-05

Product Name: AVIANE 21

Help on accessing alternative formats, such as Portable Document Format (PDF), Microsoft Word and PowerPoint (PPT) files, can be obtained in the alternate format help section .

DIN: 02298538 Product Monograph (PDF Version ~ 175K)

Company: TEVA CANADA LIMITED
30 Novopharm Court
Toronto
Ontario
Canada M1B 2K9

Class: Human

Dosage Form(s): Tablet

Route(s) of Administration: Oral

Number of Active Ingredient(s): 2

Schedule(s): Prescription

American Hospital Formulary Service (AHFS): [2] 68:12.00 CONTRACEPTIVES

Anatomical Therapeutical Chemical (ATC): [3] G03AA PROGESTOGENS AND ESTROGENS, FIXED COMBINATIONS

Active Ingredient Group (AIG) Number: [4] 0220415005

List of Active Ingredient(s)

Active Ingredient(s)	Strength
ETHINYL ESTRADIOL	20 MCG
LEVONORGESTREL	100 MCG

The Drug Product Database is a simple and reliable Canadian tool for gathering drug product specific information. If you are looking for more information on resources or have a request for the drug information pharmacist, please contact the Drug Information Centre with the contact information below.

In the next newsletter, look for an article on dose conversion tools for opioids, with a special look at the online calculator available from the Hopkins Opioid Program.

Submitted by: Jennifer Donnan, Memorial University Drug Information Centre
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Postscript Recap

Since the last issue of The Apothecary, the Board has posted several issues of The Postscript. A summary of some key articles is provided below. Please visit the **NLPB Newsletters page** of the NLPB website to view past issues in their entirety.

June 2016

- NLPB Practical Training Program
- NLPB Symposium Success!
- Armed Robberies and Workplace Violence Information Session

July 2016

- Medical Assistance in Dying
- Destruction of Expired or Unusable Narcotics and Controlled Drugs
- Pharmacy Technician Bridging Update
- MUN School of Pharmacy - Interim Dean Appointed

August 2016

- NLPB Eliminating Fax Communications
- Destruction of Narcotics
- Documenting Service as a Preceptor in Your Online Portfolio

September 2016

- New Practice Guidelines Posted to the Website
- Opioid Dependence Treatment Standards of Practice Revised
- Sound Alike, Look Alike Drug Names
- Scope of Practice of a Pharmacy Student

Looking for a Receipt?

Did you know you can view and print your invoices and receipts at any time? Under **My Profile**, click **Renewal/Other Invoices** to see a list of invoices. Click the invoice number you want to view. You can print it right from your browser by clicking on the printer icon.

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