

January 2000



Louisiana Board of Pharmacy

Published to promote voluntary compliance of pharmacy and drug law.

5615 Corporate Blvd., Suite 8E, Baton Rouge, LA 70808

Happy New Year (00-01-63)

As we herald the arrival of a new century, the members and staff of the Louisiana Board of Pharmacy wish each of you a happy and prosperous new year. With all of the year 2000 (Y2K) preparations behind us, we look forward to working with you to frame the foundation of pharmacy practice in Louisiana for the new millennium.

Election of Officers (00-01-64)

The annual election of officers was conducted during the regular Board meeting held in Baton Rouge on Wednesday, November 17, 1999, and the following members were reelected:

- Carl W. Aron (Monroe) President
- Philip C. Aucoin (New Iberia) 1st Vice President
- Blake P. Pitre (Houma) 2nd Vice President
- B. Belaire Bourg (Baton Rouge) 3rd Vice President
- Reuben R. Dixon (New Orleans) Secretary

Board Meeting Dates for 2000 (00-01-65)

The Louisiana Board of Pharmacy will meet on the following dates this year:

- February 16-17 August 16-17
- April 19-20 November 15-16

The Board meetings will be held at the Board office in Baton Rouge pending completion of our expansion project. Violations hearings are planned in conjunction with the April and November Board meetings.

Pharmacy Technician Testing Dates (00-01-66)

During the regular Board meeting held in Baton Rouge on Wednesday, November 17, 1999, the Board approved a pharmacy technician examination vendor change. Following the administration of the already-scheduled January 8 pharmacy technician examination at the University of New Orleans, the only Board-approved pharmacy technician examination will be administered by the Pharmacy Technician Certification Board (PTCB). The testing dates and application deadlines for the PTCB examinations in 2000 have already been announced by PTCB:

Examination Date	Application Deadline
March 25, 2000	January 28, 2000
July 22, 2000	May 26, 2000
November 18, 2000	September 22, 2000

The Louisiana Board of Pharmacy does not have any PTCB examination applications. Pharmacy technician applicants must contact PTCB directly at:

Pharmacy Technician Certification Board

2215 Constitution Avenue, NW
Washington, DC 20037-2985
Telephone: 202/429-7576
Facsimile: 202/429-7596
www.ptcb.org

Members of the Louisiana Pharmacists Association (LPA) or the Louisiana Society of Health-System Pharmacists (LSHP) may contact those organizations, as they stock a limited number of application packets for their members.

Board Member Appointments (00-01-67)

Board member appointments are made in accordance with LRS 37:1175, which provides that whenever a vacancy occurs among the members representing one of the eight districts, the registered pharmacists who are bona fide residents of the district in which the vacancy occurs shall nominate, from among their number, a representative to the Board. When the vacancy will occur by reason of an expiring term, the nominations shall be made by mail ballot at least 60 days in advance.

The Board secretary is responsible for mailing a ballot, by US mail, to each pharmacist residing in the district in which the vacancy will occur at the last known address as indicated in the Board's records. The ballot, or another enclosed communication, will state the date, time, and place for counting ballots. At a gathering open to the public, the secretary and/or one or more persons designated by him will openly count the ballots. The secretary will then certify to the governor the names of the three nominees receiving the highest number of votes.

The terms of six current Board members will expire on July 28, 2000. The ballots with necessary information will be mailed to pharmacists in the respective districts during the week of April 17, 2000. The ballots will be opened and counted during the week of May 15, 2000. Information about the exact time and place will be included with the ballot.

Board member terms that will expire July 28, 2000, and their districts are:

1. **George L. Boudreaux, Covington, District 1** (composed of the parishes of Jefferson and St. Tammany).
2. **Blake P. Pitre, Houma, District 3** (composed of the parishes of Ascension, Assumption, Iberia, Lafourche, St. Charles, St. James, St. John Baptist, St. Martin, St. Mary, Terrebonne, and West Baton Rouge).
3. **Willie R. Seal, Shreveport, District 4** (composed of the parishes of Bienville, Bossier, Caddo, Claiborne, DeSoto, Natchitoches, Red River, Sabine, and Webster).

Continued on page 4



Internet Prescribing Site Studies Identify Concerns

Two recent studies, one published in the October 28, 1999 issue of *The New England Journal of Medicine*, and the other published in the December 7, 1999 issue of the *Annals of Internal Medicine*, raise concerns about the quality of care provided by Internet physicians and the potential for serious abuse by purchasers of prescription drug products.

In the *New England Journal of Medicine* study, Katrina Armstrong, MD, J. Sanford Schwartz, MD, of the University of Pennsylvania School of Medicine, and David A. Asch, MD, of the Philadelphia Veterans Affairs Medical Center, set out to evaluate the availability of Viagra® (sildenafil) on the Internet.

In mid-April 1999, these investigators identified 86 sites that offered to provide Viagra to patients without a physician's visit. They evaluated only 77 sites, since nine sites ceased operations during the 10-day interval between the identification of sites and their evaluation.

Of the 77 sites evaluated, 71 percent (51 sites) were located in the United States, 14 percent (11 sites) in the United Kingdom, four percent (three sites) in Germany, three percent (two sites) in New Zealand, and eight percent (six sites) in "other" locations.

Fifty-five percent of sites (42 sites) required the patient to complete an online medical evaluation (questionnaire). Five percent (four sites) offered an online evaluation, but did not require it, while 40 percent (31 site) did not offer one. Thirty-five percent (27 sites) assured consumers that the online evaluation would be reviewed by a physician, but none provided any specific information regarding physicians' qualifications.

Regarding the information requested about patients' medical history, 57 percent (44 sites) asked about the use of nitrates, 52 percent (40 sites) inquired as to whether the patient had been diagnosed with angina or coronary heart disease, 49 percent (38 sites) asked about the presence of erectile dysfunction, 45 percent (35 sites) asked about prior evaluations for impotence, and 43 percent (33 sites) inquired about symptoms of heart disease.

Regarding the types of information provided to Viagra consumers about the drug, 55 percent (42 sites) provided information on contraindications (i.e., concomitant use of nitrates), 47 percent (36 sites) discussed efficacy, 45 percent (35 sites) referred to the product's indications, 44 percent (34 sites) mentioned "other risk factors," and 42 percent (32 sites) gave instructions for product use.

On the issue of liability, sixty-eight percent of the sites (52 sites) required patients to consent to release the site from any

liability, and 16 percent (12 sites) required patients to specifically agree to waive the need for a physical exam.

"Our findings document that sildenafil is readily obtainable over the Internet without the need for a visit to a physician or review by a pharmacist," the investigators concluded. They maintained that the wide availability of Viagra "highlights the need for effective regulation of Internet prescribing in the public interest," and that "state licensing boards for physicians and pharmacists should move quickly to establish and enforce guidelines for the involvement of US clinicians in prescribing drugs over the Internet." They further concluded that "effective strategies to address sites outside the United States may require cooperative efforts of customs authorities, the pharmaceutical industry, and national and international regulatory agencies."

In the *Annals of Internal Medicine* study, researchers Bernard S. Bloom, PhD, and Ronald C. Iannacone, BS, from the University of Pennsylvania School of Medicine, set out to describe the Internet availability and cost of prescription drugs to the public. They collected data on the sites' requirements for obtaining a medication, prescription and shipping costs, availability and cost of the Internet physician consultation, the geographic location of the company and its consulting physicians, and the medications available through the site.

Researchers identified 46 Web sites that provided prescription drugs via the Internet. Of these 46 sites, 80.4 percent, or 37 sites (33 US-based and four internationally-based), required a prescription from a personal physician or from an Internet physician consultation, while nine (all internationally-based) did not require a prescription or physician consultation.

Those that offered Internet consultations focused on general and diagnosis-specific medical histories and medication use. Consultations were said to be with a physician, although disclaimers stated that the physician may not reside in the same country as the patient or the online pharmacy, and no information was available regarding physician name, specialty, location, or qualifications. Online consultations also included a waiver stating that the patient agreed not to hold the company liable for adverse outcomes.

Each company notified the patient by e-mail of the results of the consultation, and confirmed whether the desired medication could be purchased. Prescriptions received from US-based sites could be used to purchase medications from the Web site or from a pharmacy of the patient's choice, and allowed for two refills, after which another physician consultation was required. All sites waived the consultation fee if the patient was denied a prescription for the requested medication.

Compliance News



li. News to a particular state or jurisdiction should not be
g the law of such state or jurisdiction.)

The researchers concluded that although the Internet offers improved access to health care, it comes at a significant cost. Patients obtaining Propecia through a physician consultation pay 40 percent more (before shipping costs) than those using traditional methods. Of particular concern was the potential for patients to provide false or incorrect information to obtain a prescription. Researchers noted that although giving incorrect or false information was not encouraged, it was indirectly facilitated through the use of preselected click-off choices. "For example," they said, "a medical history question asking whether the patient had had a complete physical examination and blood tests in the past year would already have a preselected answer of 'yes.'"

Also of concern was the quality of Internet consulting physicians and the appropriateness of medical services provided. Researchers noted that although no information is provided to patients about consulting physicians, 21.4 percent of the sites (10 sites) offered detailed information on how physicians could become consultants. Bloom and Iannacone also emphasized the dangers of international freelance sites that "were willing to sell any medication, no matter how dangerous or potentially open to abuse by purchasers, without a physician consultation or prescription." They emphasized that such sites "may inadvertently put the patient in jeopardy of contravening US or another country's laws in addition to putting their health at risk."

In a related editorial published in the same *Annals of Internal Medicine* issue, Food and Drug Administration (FDA) representatives, Jane E. Henney, MD, Jeffrey E. Shuren, MD, JD, Stuart L. Nightingale, MD, and Thomas J. McGinnis, RPh, reiterated the dangers of obtaining prescription medications via the Internet. "Before buying a prescription drug over the Internet," they recommended, "patients should check with the National Association of Boards of Pharmacy (NABP) to see if the pharmacy has a valid license and has met state practice standards." They also encouraged practitioners and patients to report potentially illegal Web sites to the FDA or NABP.

Appropriate Disposal of Rx Containers and Confidential Information

State boards of pharmacy are taking a closer look at the appropriate disposal of prescription containers and handling of confidential patient information. The issue received national attention when Fox News' "The Fox Files" aired a segment featuring program investigators digging through pharmacy dumpsters and finding patient information in the trash. The

investigators used some of the scavenged patient information to determine if they could obtain refills and informed some of the affected patients that their confidential information had been found in the trash.

Pharmacies often discard empty prescription medication vials, unused labels, faxed and telephoned messages, notes, and receipts containing confidential patient information in unsecured dumpsters. If accessed by unauthorized individuals, this practice may violate patient confidentiality. In addition, prescription drug abusers may use such sensitive information as a label or receipt showing that refills are available for a controlled substance to obtain controlled substances.

If prescription drug abusers find a prescriber's Drug Enforcement Administration (DEA) number in the garbage, they could use that number to impersonate a doctor and order prescription drugs to sell on the street.

Many boards of pharmacy are alerting the pharmacists in their jurisdictions of the disposal problem, and are recommending the following procedures developed by NABP's Task Force on Recycling Safety Closure Prescription Containers:

- ◆ Shred all paper documents and black out information on prescription container labels prior to disposal;
- ◆ Give empty prescription containers back to patients;
- ◆ Implement a system whereby pharmacy garbage is held in a secure area until transferred to a disposal firm for destruction.

NABP hopes that through awareness, pharmacists and pharmacies will change their procedures to prevent the release of confidential information when the intention is to dispose of it.

NABP Seeking DSM Item Writers

Pharmacy practitioners, educators, and regulators interested in becoming involved with the test item writing process for NABP's disease state management (DSM) examinations in anticoagulation, asthma, diabetes, and dyslipidemia, should mail, fax, or e-mail a letter of interest and a current resume or curriculum vitae to NABP Executive Director/Secretary Carmen A. Catizone at 700 Busse Highway, Park Ridge, IL 60068; fax to 847/698-0124; e-mail to ceo@nabp.net.

If selected, item writers will receive training materials describing the skills necessary to write items for the examinations, and may be asked to attend a workshop. Applicable expenses will be paid by NABP. Once trained, item writers will receive periodic requests to develop new test items that will be considered for inclusion in the DSM exams.

Continued from page 1

4. **T. Morris Rabb, Monroe, District 5** (composed of the parishes of Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison, Morehouse, Ouachita, Richland, Tensas, Union, West Carroll, and Winn).

5. **Charles D. Trahan, Jennings, District 7** (composed of the parishes of Acadia, Calcasieu, Cameron, Jefferson Davis, Lafayette, and Vermilion).

6. **Lee C. Foster, Jonesville, District 8** (composed of the parishes of Allen, Avoyelles, Beauregard, Catahoula, Concordia, Evangeline, Grant, LaSalle, Point Coupee, Rapides, St. Landry, and Vernon).

The Board does not furnish lists of pharmacists for commercial or advertising purposes. However, should any pharmacist need a list of pharmacists in their own district for purposes related to this nomination election, the Board office will supply one (1) list upon written request by the pharmacist.

Violations Hearing (00-01-68)

The Louisiana Board of Pharmacy held a violations hearing in the First Circuit Court of Appeals, 1600 N. Third Street, Baton Rouge, on Thursday, November 18, 1999. Proper notices and subpoenas were mailed to all necessary parties. The meeting was held in accordance with the Administrative Procedure Act, the Open Meetings Law, and other applicable laws and regulations of the Board of Pharmacy.

Board President Carl Aron was the presiding officer, Carlos Finalet was the legal counsel for the Board, Celia Cangelosi was the prosecuting attorney for the Board, and members of the Board comprised the jury. Members of the Violations Committee and other members with prior knowledge excused themselves from the relevant cases. Marlene Cashen was the official court reporter, and the complete text of the meeting is available at the Board office for public record.

Although every effort is made to ensure the following disciplinary action information is correct, you should check with the Board (225/925-6496) to verify the accuracy of the listing before making any decision based on this information.

Brandon Brown, Technician Certificate No. 3656, Voluntary Consent Agreement: Certificate revoked. *Charges:* Conduct endangering the public health or safety, violating pharmacy laws, and dispensing controlled substances without a legitimate prescription.

Wayne J. Browning, License No. 8632: Request for reinstatement denied, and case remanded to Violations Committee.

Children's Hospital Pharmacy, Permit No. 1258, Voluntary Consent Agreement: Permit owner assessed \$3,000. *Charges:* Unprofessional conduct or conduct endangering public health or safety, violating pharmacy laws, and failure to maintain an accurate record of all drugs received, sold, or dispensed.

Jason C. Dove, License No. 15811: License suspended for five years. *Charges:* Unprofessional conduct, violating pharmacy laws, violation of probation by failure to respond to random drug screens.

Mark J. Lescale, License No. 13551, Voluntary Consent Agreement: License assessed \$1,000. *Charges:* Unprofessional conduct, violating pharmacy laws, and failure to maintain adequate records of all drugs received, sold, or dispensed.

Leonard J. Sullivan, License No. 9488, Voluntary Consent Agreement: License assessed \$900. *Charges:* Violating pharmacy laws or regulations, and practicing pharmacy with an expired license.

Cynthia M. Willis, License No. 14177, Voluntary Consent Agreement: License suspended for one year, then placed on probation for four years, terminating September 2, 2003, and assessed \$5,000. Respondent not to violate any pharmacy laws or regulations. *Charges:* Unprofessional conduct, violating pharmacy laws, and unauthorized dispensing or distributing of controlled substances.

All cases involving impaired pharmacists, technicians, and interns were held in Executive Session. The Board approved the requests for reinstatement from two pharmacists and one intern.

Special Note (00-01-69)

The *Louisiana Board of Pharmacy News* is considered an official method of notification to pharmacists and certified pharmacy technicians licensed by the Louisiana Board of Pharmacy. **These newsletters will be used in hearings as proof of notification.** Please read them carefully, and keep them for future reference.

Page 4 – January 2000

The *Louisiana Board of Pharmacy News* is published by the Louisiana Board of Pharmacy and the National Association of Boards of Pharmacy Foundation, Inc., to promote voluntary compliance of pharmacy and drug law. The opinions and views expressed in this publication do not necessarily reflect the official views, opinions, or policies of the Foundation or the Board unless expressly so stated.

Malcolm J. Broussard, RPh - State News Editor

Carmen A. Catizone, MS, RPh - National News Editor & Executive Editor

Mark Paulson - Editorial Manager

Bulk Rate
U.S. Postage
PAID
Chicago, Illinois
Permit No. 5744

National Association of Boards of Pharmacy Foundation, Inc.
700 Busse Highway
Park Ridge, Illinois 60068
LOUISIANA BOARD OF PHARMACY