

Exercising professional control

Anri Gagiano



A true story

I walked into a pharmacy one Sunday about two weeks ago, looking for nausea tablets for my mom as she and my dad were flying out to England to go and visit my sister.

I knew what I was looking for as I walked in. Going to the over-the-counter-medication counter, I encountered two pharmacist's assistants – at least I hope they were pharmacist's assistants! The two ladies standing behind the counter could have been the tea lady in my office for all they knew about medication!! I asked for three different tablets – all Schedule 2 medicines, all anti-emetics.

Firstly, neither lady recognised what I was talking about. I had to point to the box on the shelf to show them what I wanted. Secondly, they didn't even ask why I wanted three different medicines falling into the same class – they didn't know that I was a pharmacist and I knew what I was buying.

Then one lady just gave me the medication and didn't ask any details or give me any advice! I thought, "Okay. Maybe they will take my details at the till – I know some computer programmes allow you to do that." Though this defeats the whole point about the recording of schedule 2 sales, but at least it means that they are trying to keep it legal. But no. Nothing at the till. Just scan the barcode, give me the price and say goodbye. The unspoken message I got was "We hope you know what you are doing because we don't!"

Does this sound familiar to you? Did I walk into *your* pharmacy and did *you* perhaps serve me? I hope not.

The legal requirements – record keeping

General Regulation 11 of the Medicines and Related Substances Act, Act 101 of 1965, states the following requirements for record keeping of schedule 2 medication sales:

- the name of the medication of scheduled substance
- the date on which the prescription was dispensed, or the medicine was sold
- the dosage form and quantity of the medicine or scheduled substance
- the name and address of the patient to whom the medication was sold
- where applicable, i.e. if the medicine was dispensed on prescription, the name of the medical practitioner, dentist, veterinarian or other authorised person who issued the prescription
- prescription reference number

With regards to schedule 1 medication sold without a prescription, Regulation 11 states that the following shall be recorded:

- the name of the person to whom it was sold
- its name and quantity
- the name of the pharmacist or intern pharmacist or pharmacist's assistant who sold it

If you sell schedule 2 medication without proper record keeping, you are actually breaking the law!! Did you ever think about it like that?

The legal requirements – counselling and advice

And what about counselling and advice to the person buying the medicine? The regulations to the Pharmacy Act, Act 53 of 1974, take this seriously. Ethical rule 1 requires all persons registered with the Pharmacy Council to give every person receiving medicine advice and information for the safe and effective use of any medicine supplied. I didn't receive any advice or information. For all they knew, I might have intended taking all three medicines at once, which could have had serious interactions. Or I might have been pregnant, and it could have been wrong to take one or more of the medicines.

The legal requirements – scope of practice

Another important part of this case is the pharmacist's assistants' scope of practice.

For this we go to the Regulations relating to the practice of pharmacy, published in terms of the Pharmacy Act.

A pharmacist's assistant (basic) may sell schedule 1 medicines or scheduled substances under the direct personal supervision of a pharmacist, as may a learner basic pharmacist's assistant.

Post-basic and learner post-basic pharmacist's assistants are allowed to sell schedule 1 and 2, again under the direct personal supervision of a pharmacist.

I really hope the two ladies who helped me were post-basic pharmacist's assistants. If they were not, they were not allowed to sell even schedule 1 without direct supervision of a pharmacist, let alone schedule 2. Make no mistake – it wasn't only the fault of the assistants. There was more than one pharmacist in the dispensary, but they didn't even bother to look at the two "assistants" helping me.

So what?

You may think "But why is this important? It's just a hassle and a waste of time." The point of this is that you should actually take a look at the person's medicine profile when you dispense a new prescription, or sell any medicine over the counter.

Think about it. If the patient bought 100 headache tablets containing codeine, caffeine and other ingredients last week, who sold them to her? Was it legal for her to buy that amount at once? Why would she want to buy more again two weeks later? This should set alarms bells ringing in your head.

Or with allergy season coming up, if a patient keeps on buying anti-histamines continuously, maybe you should refer the patient to the pharmacist or even a doctor because he might have more than just seasonal allergies and may be in need of a corticosteroid nasal spray or further investigation.

There are two sides to this story. Yes, it is the pharmacist's responsibility to check your work, but more importantly from your point of view, it is your own responsibility to stay within your scope of practice as a pharmacist's assistant. Take responsibility for your actions and practise in a professional and ethical manner. You know the theory – now apply it.