



Kentucky Board of Pharmacy

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Board Meeting Dates for 2001

The Kentucky Board of Pharmacy has set the following meeting dates for 2001. All meetings, except examinations, are held at the Board office and begin at 9 AM. However, one meeting is planned at the University of Kentucky College of Pharmacy. Pharmacists and the public are invited to attend. Should you wish to have a matter considered by the Board, kindly provide seven copies of the information to the Board office not less than 14 days before the meeting date.

January 10 July 11

January 27-28, Board Exams July 21-22, Board Exams

March 7, University of Kentucky
April 11

June 13

September 12

October 10

December 12

Continuing Education Reminder

Pharmacist license renewal for 2001 is fast approaching, and successful completion of the continuing education (CE) requirements is critical to this process. Pharmacists must complete 1.5 continuing edu-

cation units (CEUs) each year. Of this 1.5 CEU requirement, no less than 0.1 CEU must be earned through a Kentucky Cabinet for Health Services (CHS) approved HIV/AIDS course. All remaining courses may be Board or American Council on Pharmaceutical Education (ACPE) approved. Pharmacists must have in their possession proof of successful completion of CE by December 31, 2000.

If you attend a live CE program, the completion date and the credit date for the program is the day that you were in attendance. If you participated in a home study program, these programs are not considered complete until you are awarded a certificate of completion from the provider with a dated certifying signature. Credit for the home study program is awarded on the date specified on the certificate, not the date you completed the CE and submitted it for grading.

Please note that many ACPE approved courses for HIV/AIDS are not CHS-approved. In fact, it is highly unlikely a nationally promoted program will have been submitted to CHS. Pharmacists should question the program provider to determine if proper submission has been made and approval granted. Providers of CHS-approved courses are required to place the CHS Series Number on all certificates of participation. The CHS Series Number is a seven- or eight-digit number with the first four numbers identifying the expiration date of the course, followed by the letter "M" or "S." "M" courses are "multidisciplinary" and acceptable for all health professions, including pharmacists. "S" courses are usually specific to individual professions, and pharmacists should find out if the program is acceptable for pharmacists before completing it. Pharmacists may credit up to 0.3 CEUs of a non-ACPE course that is a CHS-approved HIV/AIDS program toward the 1.5 CEU requirement. A pharmacist wishing to inquire whether a course has been approved by CHS should contact the Kentucky AIDS Education Program at 502/564-6539.

Acetaminophen Toxicity

Although the literature is clear that acute acetaminophen toxicity can occur if a dose of 7.5 to 10 grams is taken, pharmacists need to be more aware of acetaminophen toxicity occurring through the chronic use of acetaminophen.

Various sources report that doses more than four grams per day over three months can lead to potential hepatotoxicity. Doses of five to eight grams per day in two to three weeks have also been reported to lead to liver failure. These facts are important to pharmacists due to the acetaminophen content found in common narcotic analgesics used for chronic pain.

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Drugs such as Darvocet N-100, Lortab, Lorcet, Vicodin, and Percocet contain 325 mg to 750 mg of acetaminophen per tablet. This means that as few as six tablets per day, if used over several months, could lead to liver failure.

Acetaminophen toxicity is insidious and often unsuspected because there is no typical presentation of signs or symptoms. Although nausea and vomiting may occur, these signs are usually overlooked by the chronic narcotic analgesic user. Several days may pass before liver tenderness or jaundice presents itself, and at that point may be too extensive. Acetaminophen-induced liver failure is the second most common cause of hepatic failure necessitating liver transplant in the US.

During recent inspections in several pharmacies in Kentucky, the inspectors have found multiple examples where pharmacists have been dispensing quantities of narcotic analgesics that would indicate that the patient is taking six to seven grams of acetaminophen per day. It is advised that anytime you dispense large quantities of acetaminophen containing drugs you should review the patient profile for chronic use and doses that would indicate use of more than four grams per day. Professional judgment must be used in these cases. Counseling the patient and contacting the physician may be in order in these cases. It is recommended that you document your analysis and communications.

Several options are available to you. If a patient is being treated for chronic pain, perhaps a chronic pain analgesic without acetaminophen should be considered. It has also been noted that several new products have been introduced with a larger narcotic component with only 325 mg of acetaminophen per tablet instead of the common 650 to 750 mg per tablet. Dispensing toxic levels of any drug is not advised by any reasonable standard. Acetaminophen is no exception, and the Board strongly advises all pharmacists to review their dispensing practices when chronic use of narcotic analgesics containing acetaminophen are prescribed. (Submitted by Philip C. Losch, Pharmacy and Drug Inspector)

What is the Impaired Pharmacists Committee?

Impaired Pharmacists Committee (IPC) is a group of pharmacists appointed by former Board President Rodney C. Stacey at the October 27, 1999, Board meeting. The committee was authorized pursuant to KRS 315.126 and first met in January 2000. The meetings are generally scheduled the day before the regularly scheduled Board of Pharmacy meeting.

The IPC consists of ten (10) members from all over the Common-wealth and from various practice areas. The committee reviews license reinstatement petitions for those pharmacists who had their licenses suspended while they received treatment for their chemical dependency problems. The committee makes a recommendation to the Board about whether to reinstate their licenses to practice and what restrictions are to be placed on the pharmacists.

Kentucky Pharmacists Recovery Network (KyPRN) is an informal group of pharmacists who may be in recovery from the disease of chemical dependency or pharmacists who are not so afflicted but who may be in some way affected by this disease. Members of this group help one another to work their way through various problems, whether they are health, work, or law related. Brian Fingerson serves as the coordinator of this group.

If you need help for a chemical use or abuse problem, will the Board be notified? The answer to this question is not black or white. If you are continuing to practice and use them, you must stop or the Board will be notified. If you can get into treatment successfully, and you enter into an agreement with KyPRN to follow certain guidelines, and you maintain a clean and sober lifestyle, the Board of Pharmacy may never need to know you sought help.

Whom do you contact with questions about substance abuse and chemical dependency? Brian Fingerson can be reached via digital pager at 1-888/392-4621. (Submitted by Brian Fingerson)

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