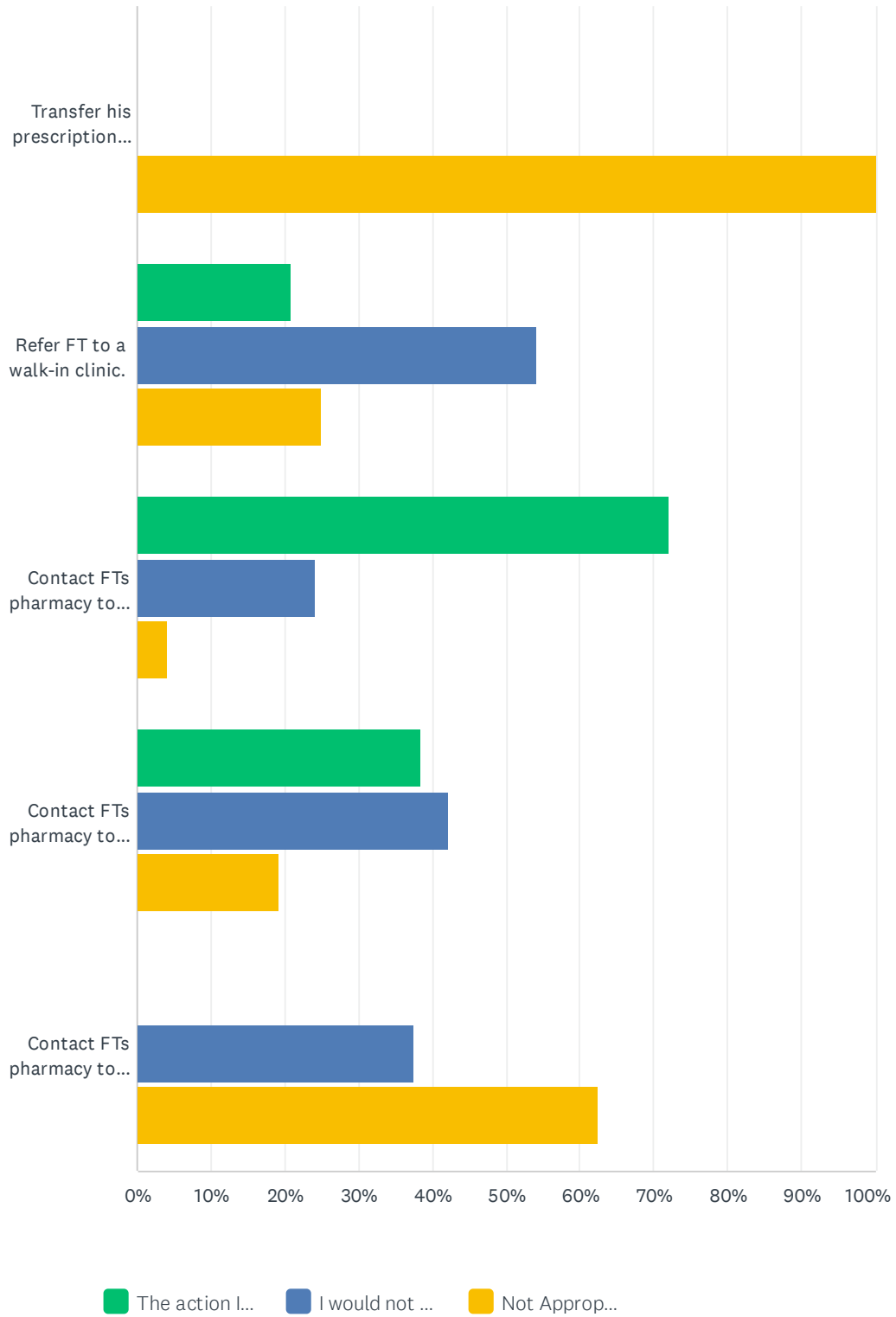


Q1 (YOUR SUBMISSION) FT is a 42 yo male visiting from North Carolina. He states he takes ramipril, atorvastatin and metformin but he forgot it back home. He says he has refills on his prescriptions and would like to transfer them here. He will be staying in NS for another 2 weeks.
How should a pharmacist respond?

Answered: 27 Skipped: 0

Panel of Peers Survey - February 11, 2022



Panel of Peers Survey - February 11, 2022

	THE ACTION I WOULD TAKE	I WOULD NOT DO THIS, BUT IT IS OKAY IF ANOTHER PHARMACIST DID	NOT APPROPRIATE	TOTAL
Transfer his prescription as requested.	0.00% 0	0.00% 0	100.00% 24	24
Refer FT to a walk-in clinic.	20.83% 5	54.17% 13	25.00% 6	24
Contact FTs pharmacy to confirm his medication, provide a renewal prescription for 1 month and charge him for the service.	72.00% 18	24.00% 6	4.00% 1	25
Contact FTs pharmacy to confirm his medication, provide a renewal prescription for his usual quantity if appropriate and charge him for the service.	38.46% 10	42.31% 11	19.23% 5	26
Contact FTs pharmacy to confirm his medication, provide a renewal prescription for 1 month and do not charge him for the service.	0.00% 0	37.50% 9	62.50% 15	24



Panel of Peers – Reflections From Select Panel Members Feb 11, 2022



Question 1

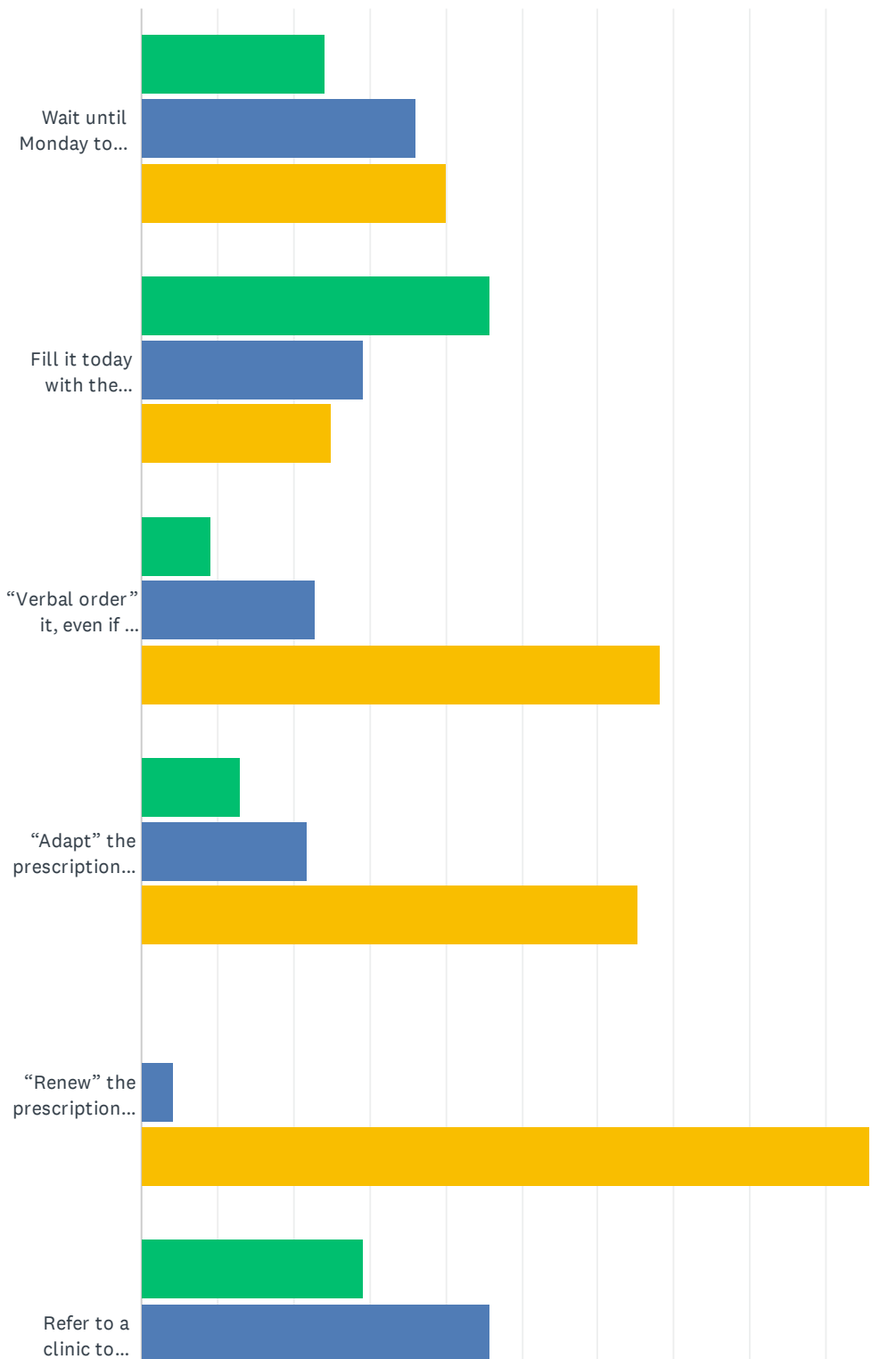
- Fairly overwhelming majority would renew for 1-month and charge for the service:
 - Transfer prescriptions – 0% - Action I would take
 - Refer to a walk-in clinic – 21% - Action I would take, 25% - Not appropriate
 - Fill for 1 month and charge for the service – 72% Action I would take
 - Fill for usual quantity and charge for the service – 38% - Action I would take
 - Fill for 1 month and do not charge for the service – 0% - Action I would take

Comments

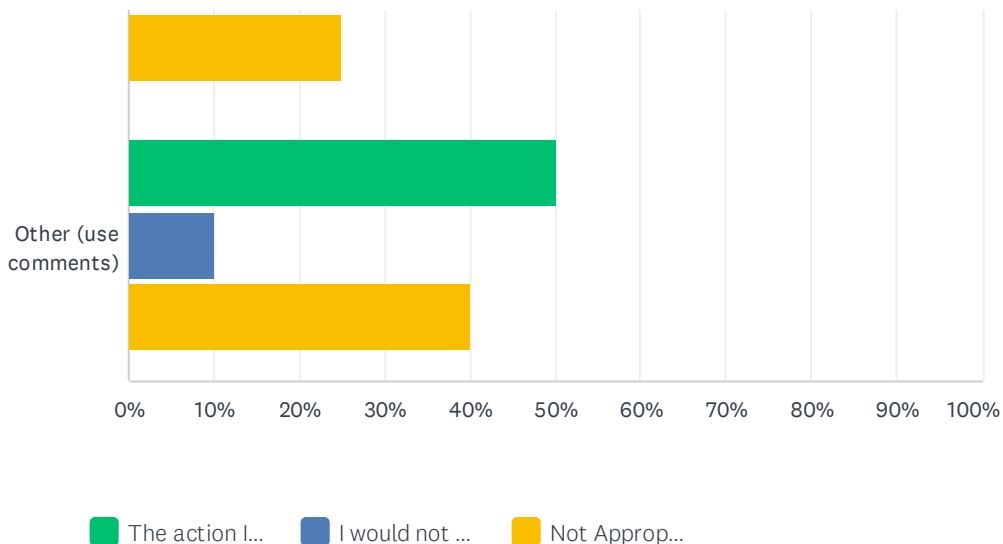
- Assumes all therapies were appropriate and continue to be indicated.
- Can't transfer the prescription. Doctor must be licensed in Canada. No reason to waive the fees.
- Even if you were the owner instead of an employee, we should charge for the service. If we don't value it, we cannot expect government to fund services. The patient would pay if they went to the ER/walk-in.
- We prescribe like this all the time. Saves people from expensive and resource consuming ER visits.
- Whether or not I charge is secondary. I want to ensure continuity of care if at all possible ethically/legally.

Q2 RA is a 28 yo female discharged from mental health on Friday evening with prescription for Suboxone®. The prescription is not signed and the doctor is not available until Monday. RA was not previously taking Suboxone. How should a pharmacist respond?

Answered: 27 Skipped: 0



Panel of Peers Survey - February 11, 2022



	THE ACTION I WOULD TAKE	I WOULD NOT DO THIS, BUT IT IS OKAY IF ANOTHER PHARMACIST DID	NOT APPROPRIATE	TOTAL
Wait until Monday to verify with the physician.	24.00% 6	36.00% 9	40.00% 10	25
Fill it today with the physician's name and verify on Monday.	45.83% 11	29.17% 7	25.00% 6	24
"Verbal order" it, even if you don't speak to the doctor.	9.09% 2	22.73% 5	68.18% 15	22
"Adapt" the prescription and sign for it even though you do not change anything.	13.04% 3	21.74% 5	65.22% 15	23
"Renew" the prescription and sign for it, even though the patient did not have it before.	0.00% 0	4.35% 1	95.65% 22	23
Refer to a clinic to reissue the prescription.	29.17% 7	45.83% 11	25.00% 6	24
Other (use comments)	50.00% 5	10.00% 1	40.00% 4	10



Panel of Peers – Reflections From Select Panel Members Feb 11, 2022



Question 2

- Answers were all over the place for question 2.:
 - Wait until Monday – 24% Action I would take, 40% - Not appropriate
 - Fill it with the physician's name and verify Monday – 46% Action I would take, 25% - Not appropriate.
 - Verbal order it – 9% Action I would take, 68% - Not appropriate
 - Adapt even though you don't change and sign it – 13% Action I would take, 65% Not Appropriate
 - Renew it – 95% Not appropriate
 - Refer to a clinic to reissue the prescription – 29% Action I would take, 6% Not appropriate.

Comments

- Even if I couldn't reach the doctor I would confirm with the clinic that the patient was under the doctor's care.
- I'd call the doctor on his cell phone or have him paged.
- Call care area or hospital pharmacy where pt was discharged from . Confirm date of discharge name of prescriber and if available when was suboxone started and dose at discharge. Fax back for prescribers signature on monday or day next available
- Give enough until Monday and then confirm.
- Have another doctor access the patient chart and get a verbal order
- Would want to verify more information. Was the prescription initiated in hospital. first. If initiation was done in hospital I would contact the hospital pharmacy which would have access to these records. Given that information I would be comfortable providing the prescription if it made sense. In reality I would likely fill as written and follow up with the MD Monday