PHARMACY 543 – PHARMACY LAWS & ETHICS
MIDTERM EXAMINATION 2
November 17, 2000

Questions 1 - 30 are multiple-choice. Please record answers on Side 2 of a Standard Answer Sheet, Form 1158. Follow the instructions on Side 1. Carefully complete your name and student number (both characters and bubbles).

There are five short answer questions and one ethics essay. Please limit your answers to the space provided for each question.

Turn in only (1) the Standard Answer Form, (2) your answers to the short-answer questions (page 8-9), (3) the ethics essay (page 10), and other pages if necessary (see below). Please complete your name and student number on any sheet you turn in if you want credit for that work.

Grading: multiple choice questions are 1 point each (total 30 points); short essay questions are 2 points each (10 points total); ethics question is 10 points. Exam total is 50 points.

In answering multiple choice questions, select the “best” answer among the choices provided.

Asking questions: you will not be allowed to ask questions during the licensure examination, so none will be permitted during the midterm. However, if you believe that a question is technically flawed, please indicate your concern on the exam and turn it in with your answer sheets. Otherwise, please do not turn in pages for the multiple choice examination questions.

1. Which of the following statements are TRUE in reference to the patient counseling section of OBRA-90 (Omnibus Budget Reconciliation Act of 1990):
   a. The statute applies to patients receiving Medicaid benefits only
   b. The statute requires the pharmacist to provide written information with each new prescription
   c. The statute allows the pharmacist to exercise his/her professional discretion to determine what drug information should be provided to the patient
   d. All of the above
   e. a and c above

2. The old Washington patient counseling regulation (WAC 246-869-220) was rewritten in 2000 by the Washington Board of Pharmacy because the old regulation:
   a. Was difficult to enforce
   b. Did not provide a “checklist” format for pharmacists to use when counseling patients
   c. Did not require pharmacists to offer to counsel patients obtaining refills
   d. All of the above
   e. a and c above
3. The **new** Washington patient counseling regulation:
   a. Does not distinguish between new and refill prescriptions
   b. Allows the pharmacist to determine what amount of counseling is reasonable and necessary under the circumstances based on his or her own professional judgment
   c. Requires the pharmacist to offer to directly counsel patients who are receiving prescriptions outside the pharmacy via delivery
   d. All of the above
   e. a and c above

4. Which of the following statements are **TRUE** regarding the pharmacist’s “standard of care”:
   a. The model for the standard of care is the reasonable and prudent pharmacist
   b. The standard of care has evolved from a non-discretionary standard of technical accuracy to a discretionary standard which requires pharmacist to perform a variety of professional functions with due care
   c. The standard of care does not vary depending on the circumstances encountered by the individual pharmacist
   d. All of the above
   e. a and b above

5. You are the attorney for the defendant pharmacist. Which of the following factual circumstances would provide the basis for an effective defense to a lawsuit brought by a patient injured by a medication verified and dispensed by the defendant pharmacist:
   a. The patient continued taking the medication even though she suspected it was not the correct medication
   b. The defendant pharmacist had just attended the funeral of his brother the day before the medication was dispensed and was required to work a twelve hour shift the day the medication was dispensed
   c. The plaintiff filed her lawsuit in the state of Washington five years after the medication was dispensed and one year after she discovered the injury
   d. The defendant pharmacist dispensed the correct medication. The medication was dispensed the same day the manufacturer’s expiration date took effect.
   e. All of the above are effective defenses

6. Which of the following is **NOT** an example of economic damages:
   a. Medical expenses
   b. Lost wages
   c. Loss of companionship
   d. Loss of opportunity cost
   e. All of the above are economic damages
7. You realize once you return home from work that you may have dispensed the wrong strength of an antidepressant to an elderly patient. You contact the evening pharmacist, who pulls the original prescription and verifies that you did in fact dispense the wrong medication. What is the **BEST** thing for you to do next to protect yourself from liability?

   a. Call the prescriber and let him inform the patient  
   b. Obtain the patient's home phone number and contact him yourself  
   c. Let the evening pharmacist, who is your supervisor, contact the patient  
   d. Contact the patient first thing in the morning and make sure you provide a replacement medication free of charge  
   e. Contact the agent from the company that provides your malpractice insurance and let him handle the problem

8. Which of the following is **NOT** an appropriate thing to do if an error is discovered? Assume the patient discovered the error on her own by comparing her new tablets to tablets dispensed on the previous fill. She is now pretty upset and standing at the prescription drop off window.

   a. Ask the patient if she actually took the incorrect medication  
   b. Have the window technician tell the patient to come back later when your supervisor is available  
   c. Apologize to the patient and acknowledge the error  
   d. Contact the prescriber so the patient can obtain medical attention if necessary  
   e. All of the above are appropriate

9. Which of the following is a component or type of pharmacist prescribing?

   a. patient referral to a physician  
   b. modification of drug therapy  
   c. clarification of a prescription  
   d. all of the above  
   e. none of the above

10. Washington Administrative Code (WAC) requires that to participate in collaborative drug therapy pharmacists meet all the following requirements **EXCEPT:**

    a. submit a signed agreement with an independent prescriber to the Board of Pharmacy  
    b. include in the agreement methods of documentation  
    c. include in the agreement guidelines for drug decision-making  
    d. include in the agreement pharmacist training and education  
    e. include in the agreement the specific pharmacist prescribing activities

11. Which of the following measures are **NOT** commonly used to assess the outcome of collaborative drug therapy management in Washington State.

    a. access to care  
    b. cost-effectiveness studies  
    c. clinical measures (e.g. decreased bleeds)  
    d. satisfaction  
    e. adverse events
For questions 12 through 17, **TRUE** = A and **FALSE** = B.

12. When initiating a collaborative drug therapy program, a pharmacist is **NOT** required to submit a protocol signed by an authorized prescriber to the Board of Pharmacy in Washington State.

13. The prescription authority protocols, or collaborative drug therapy agreements, are mostly utilized in hospitals.

14. Pharmacists in Washington State have the most experience with collaborative drug therapy in the U.S.

15. In a survey of physicians and pharmacists using protocols, pharmacists were much more satisfied than physicians.

16. In collaborative drug therapy, pharmacists are independent prescribers.

17. Pharmacists have demonstrated an increased quality of care in prescribing anticoagulant therapy.

18. Which of the following are **NOT** required for pharmacist licensure in Washington State.
   a. graduate of an accredited pharmacy program
   b. pass the NAPLEX and Multistate Pharmacy Jurisprudence Exam (the law exam)
   c. complete internship
   d. satisfy AIDS continuing education requirement
   e. complete Basic Life Support training

19. The Drug Enforcement Administration placed anabolic steroids in a controlled substance schedule on February 13, 1991. On what day should a pharmacy have inventoried its stock of these drugs?
   a. February 13, 1991
   b. February 20, 1991
   c. February 28, 1991
   d. March 13, 1991
   e. March 31, 1991

20. When may a pharmacist legally make recommendations to a patient regarding acquisition and use of marijuana?
   a. pharmacist must recommend and document that he/she has informed the patient of the risks and benefits of marijuana use
   b. when the patient has a qualifying diagnosis
   c. as a component of a collaborative drug therapy agreement
   d. a and c
   e. none of above
21. For which diseases may marijuana be recommended in Washington State?
   a. glaucoma
   b. nausea and vomiting related to diabetic gastroparesis (gastrointestinal dismotility observed in advanced diabetes)
   c. AIDS wasting
   d. a and c
   e. all of the above

22. Which law contains the most comprehensive list of practitioners who are allowed to prescribe drugs in the State of Washington?
   a. The Legend Drug Act
   b. The Controlled Substances Act
   c. The Pharmacy Practice Act
   d. The Health Care Information Act
   e. The Food, Drug and Cosmetic Act

23. Which of the following items may a practitioner licensed to prescribe legend drugs in Washington State omit when s/he directly dispenses a prescription drug to a patient?
   a. The name of the drug
   b. The name of the patient
   c. The name of the prescriber
   d. The date of dispensing
   e. The directions for use

24. Which of the following drugs may be used by registered animal control agencies for the euthanasia of animals?
   a. Arsenic
   b. Strychnine
   c. Ketamine
   d. Pentobarbital
   e. Potassium Cyanide

25. Which of the following formats represents the method by which Washington prescribers inform pharmacists about their wishes concerning drug product substitution?
   a. Two signature lines with Dispense as Written on the left and Substitution Permitted on the right.
   b. Two signature lines with Dispense as Written on the right and Substitution Permitted on the left.
   c. A check box stating, “Substitution OK unless checked here”
   d. A statement that says, “Always Dispense Generic Drugs”
   e. A statement that says, “Always Dispense Brand Name Drugs”
26. How many hours of pharmacy continuing education (C.E.) is a pharmacist required to have for license renewal each year?
   a. 5 hours
   b. 10 hours
   c. 15 hours
   d. 20 hours
   e. 24 hours

27. Which reference does the Board of Pharmacy use to show which drugs are considered to be “legend drugs” in the State of Washington?
   a. The Blue Book
   b. The Red Book
   c. The Green Book
   d. The Orange Book
   e. The Black Book

28. Experience has shown that by sheer volume, most diversion of legitimately manufactured drugs is committed by:
   a. patient abusers
   b. pharmacists
   c. physicians
   d. nurses
   e. delivery personnel

29. Generally, which of the following statements is TRUE regarding drug diversion?
   a. obtaining prescriptions for controlled substances from prescribers is difficult.
   b. licit drugs, alone or in combination, do not mimic the effects produced by illicit substances such as heroin.
   c. intense scrutiny in the workplace has lead to a decrease in drug diversion by pharmacists in recent years.
   d. Schedule II controlled substances tend to be diverted more often than Schedule III substances because of less stringent record keeping requirements.
   e. licensed health care practitioners that divert controlled substances are most often motivated by impairment.
30. Which of the following situations should cause a prudent pharmacist to suspect drug diversion?

a. the issuance of a legend drug prescription by a physician for an immediate family member
b. Hospitalized patients that complain of no relief when injectable narcotics are administered for pain.
c. Discovery of DEA 222 order forms misfiled with other controlled substance records.
d. A dentist who usually prescribes Vicodin (hydrocodone) instead of Tylenol #3 (codeine) for pain.\(^a\)
e. Changes made to a written prescription by the prescriber.

\(^a\) HYDROCODONE is a narcotic analgesic related to CODEINE, but more potent and more addicting by weight.
31. Pharmacists have a duty to identify and prevent drug diversion. More than a dozen different ways to implement this responsibility were discussed in class. Cite two and briefly discuss their relevance. (For credit, your responses must be among those discussed in class).

32. List two reasons supporting pharmacist prescribing that were discussed in class.

33. Name two states that do NOT reciprocate pharmacist licenses.

34. Describe a circumstance where it would be generally held to be appropriate to withhold life support, fluid and nutrition?
35. Consider the hypothetical case of Ms. Creamcheese (the 17 year old cheerleader-homecoming queen, etc.) under treatment for a sexually transmitted disease. Describe a circumstance where you could legally provide information regarding her STD treatment to her parents.
Ethics Question. Consider the following, heavily abstracted from Grace-Marie Mowery. 
COMMENT: A PATIENT'S RIGHT OF PRIVACY IN COMPUTERIZED PHARMACY RECORDS. 
University of Cincinnati Law Review 1998;66:697

New computer software is being offered to pharmacists that can assist them in their clerical, managerial, and professional duties. By creating a database of information collected from patients, the new software allows pharmacists to document services, bill for services, keep detailed patient files, determine which patients are in need of specific pharmacy services, and track patient progress...

However, to enable a computer to perform many of these functions, the pharmacist must enter personal information about the patient such as the patient's date of birth, gender, drug allergies, and any disease being treated. One company has made software available that allows pharmacists to record even more information about patients, including lifestyle notes on alcohol, caffeine and tobacco use, pregnancy, and exercise. The goal is to "give the pharmacist the ability to print out a total history of the patient to share with other health care providers."

However, in exchange for this new technology, pharmacists have become part of a new market for the information in their databases. The personal health-care information that pharmacists are collecting is of great commercial value. Pharmaceutical companies want to use the patient information in marketing their products to customers and health care providers. A number of private companies have begun to collect prescription records from pharmacies to distribute to pharmaceutical companies. ... data-collection companies gather information on individuals from the pharmacist in order to process insurance claims. After performing the claim "switch" between the pharmacist and the insurance company, the data collectors will then turn around and sell the prescription records they have acquired to pharmaceutical companies.

What must be true about the healthcare information described above for this process to be legal in Washington State? (1 point; can be answered in a few words)

Evaluate the ethical principals and theories of providing information as described, assuming that there are no violations of law. Please underline each principle/theory so I can find them, and be sure to explain each principle/theory in the context of the case. (9 points)