Case 1

RS just went to his physician and was given a prescription for a certain drug product. Pharmacist GR has the same drug product on his shelf unopened and brand new. The drug product is quite expensive and is going to expire in about a month. GR was planning on returning the unopened bottle to the manufacturer for credit after it was expired. The drug is very expensive and GR rarely gets prescriptions for it. RS walks in the door and presents GR with a prescription for the very drug he was expecting to return to the manufacturer at the end of the month. RS only needs a few tablets but the manufacturer will not take the bottle back if it has been opened in any way. GR is faced with the ethical dilemma of filling this man's prescription or sending him away to another pharmacy so that he may get money back for his unopened product. GR is not financially burdened in any way and can adequately afford the medication just as well as his surrounding competitors. [Source 3543-8511528]

Case 2

Beware the counterpunch: what happens when a prescription offends a pharmacist's beliefs? (patient is outraged when her prescription is not filled because of moral reasons). Elaine Lafferty. Time v149.n17 (April 28, 1997): pp66(1).

Full Text :COPYRIGHT 1997 Time, Inc.

Michelle Crider, 28, was speechless. The pharmacist had just said, "No." The married mother of a two-year-old daughter, Crider was concerned that she might become pregnant after having intercourse with her husband. She called her doctor, who prescribed a so-called morning-after formula: four birth-control pills to prevent implantation of a fertilized egg, a use consistent with recent regulations from the Food and Drug Administration. Then the doctor called Crider back: the pharmacy manager at Longs Drug Store in Temecula, California, had refused to fill the order, citing his moral beliefs.

The pharmacist, John Boling, had support. The 6,000-member California Pharmacists Association last year adopted a policy allowing pharmacists to refuse to fill prescriptions based on "ethical, moral or religious grounds," says Carlo Michelotti, the group's interim chief. "We supported this pharmacist's action. A pharmacist has a right to his moral beliefs. Did he do anything to interfere with a patient's care? In this case, relatively, no."

Crider's doctor eventually had the prescription filled at a Vons pharmacy. Still, Crider was enraged. "I'm no activist," says the former health-clinic employee. "But this was outrageous. I've had difficult pregnancies, and I wasn't ready to get
pregnant again. This was a legitimate, legal prescription. Imagine if a woman who was raped had this experience. Is a pharmacist supposed to preach religion?"

**Case 3**

A young woman in her twenties comes to the pharmacy counter asking for advice on choosing a pain-reliever for her son who is in the car waiting with his father. She said that her son had received a serious bruise from playing soccer and is now very swollen. The pharmacist gives his recommendation to the woman who purchases the product and then leaves the pharmacy. Two weeks later she returns to the pharmacy looking somewhat disheveled, asking for more drugs for her son who had come along with her this time, sporting a black eye and an unsightly bruise covering his cheek. This time, the story told to the pharmacist was that he got into a fight with his cousin. He was acting shy and hiding behind his mother most of the visit. He looked very young, probably no more than three or four years of age. The dilemma developing in the pharmacist’s mind, which was not apparent on the woman’s first visit to the pharmacy, but is now on her second visit, was that this child is being abused. The pharmacist decided not to probe the issue so as not to offend the lady, but instead strongly and carefully recommends she take her son to see a doctor in the morning, and to continue to give her son the OTC medication that he had recommended previously. [Source 3543-3831524]

**Case 4**

While preparing Procaine in DMSO, a compounded medication for neural pain relief, an intern questioned the use of procainamide. Upon review the compounding pharmacist concluded that the formula from the computer database had been unknowingly altered. Upon further review it was found that procainamide instead of procaine had been used for the last two months.

Procaine in this situation was intended to be the active ingredient to a topical anesthetic with DMSO as the vehicle. Procainamide is very similar to procaine in that both are sodium channel blockers. Procainamide, however, works very specifically on cardiac tissue and is generally used to treat cardiac arrhythmias. As a topical anesthetic, procainamide would provide very little pain relief when compared to procaine.

The pharmacist contacted the doctor and told him about the mistake, how it happened and what means were being taken to prevent it from happening again. The doctor was told that patients would be contacted to inform them about the situation and offer to pay for the medications they’ve received over the last couple of months. [source: 4543-4607-2]
Case 5

JS, a 62 year old diabetic patient taking several medications entered his pharmacy to have his prescriptions refilled. He fills his prescriptions exclusively at the retail pharmacy in his small home town. He is well-known and liked by the pharmacist and other employees at this pharmacy. The pharmacist plays basketball with JS's son on weekends.

Mr. S was a good candidate for a flu shot based on his medical profile and asked about an appointment. Due to the flu vaccine shortage, he was told to come to the pharmacy during the designated first-come, first-serve vaccine clinic. He arrived at the pharmacy parking lot at 6:00 a.m. and waited in the rain for his turn. Unfortunately, before receiving his shot, he experienced a myocardial infarction while waiting outside the pharmacy. Fortunately, the pharmacist had recently obtained CPR certification in order to provide immunizations. As he assessed the unconscious Mr. S., the pharmacist noticed a 'Do not resuscitate' bracelet. Though he did not want to violate Mr. S's wishes, the pharmacist was not certain that this bracelet referred to events outside of a hospital. The pharmacist took it upon himself to administer CPR until the emergency response team arrived and then returned to his duties inside the pharmacy. [source: 4543-4607-3]