



## Goodbye

As I approach the last few weeks of my service as the College's Registrar, I find myself reflecting on how I got here, what I've accomplished during my 36 years as a pharmacist and 25 years as a College employee, and what I'm going to do next.

### How I got here

When I immigrated to Canada in the late 60s, I was thrilled to learn I could be registered as a pharmacist in BC. My home state of Texas required pharmacists be US citizens, and I assumed the same would be true in Canada.

My first contact at the College office was the office manager, Win Lewis, who welcomed and guided me through the registration process. To this day, I remember how relieved I felt to know there was friendly help as I worked through all the College requirements.

This is why I place a high value on having an approachable, friendly staff team. I know those first impressions really count.

It's important to me to be able to create new approaches and systems to reflect my belief that people in general - and pharmacists in particular - really want to do the right thing. I believe the key to achieving exemplary performance is to lead by example and to foster innovation, appropriate risk-taking, creativity and accountability.

I learned many of these concepts from my heroes and mentors, some of who were pharmacists, some of who were family, friends and teachers, and some of who were brief acquaintances and even strangers.

One of my mentors was the late Juliette Dillon, pharmacy manager of the long-gone Woodwards store in downtown Vancouver. She showed me by example every day - how to keep a positive, optimistic, enthusiastic, can-do, will-do attitude. She gave me the confidence to develop leadership skills and to value my creative side.

Another employer, Clair Hamilton of Campbell River, offered his wisdom by demonstrating his commitment to our pharmacy

advocacy group and its guidelines - including honouring the group's compensation guidelines - an impressive gesture for me at the time. His influence helped me value professional collaboration and individual empowerment.

# Goodbye and Hello!

Once, a long time ago, a high school drama teacher told me, while applying my stage make-up for a play, that I had a pretty nose. It was the first time I had ever received a compliment of this type, and it really changed how I viewed myself - quite an achievement since I saw myself as a skinny, near-sighted, nerdy teenager.

I could give dozens of other examples, but the point I want to emphasize is that none of these people likely recognized the powerful influence they had during these day-to-day or fleeting encounters.

*continued on pg 2*



## Hello

I'm thrilled to be your new Registrar. This position offers me a great opportunity to contribute to better health outcomes for all the people of BC. I know BC pharmacy, having spent my career in the Okanagan, Lower Mainland, Kootenays and the north. Personally, this feels like a homecoming; I was born and raised in Langley and have many friends and colleagues in the Lower Mainland.

I want to thank Linda for bringing our profession to such a high standard. Back in 1995 when Linda became Registrar, I was Council President. I knew then that she would do great things, and I'm honoured now to take over from her as she retires.

Using my experience in community, long-term care and hospital pharmacy, as well as a master's degree in health care administration, I look forward to working with College Council, staff and you. Together we will create an environment where the efforts of pharmacists to improve the health of British Columbians are recognized.

Urge all of us to do our best to present ourselves as positive role models. We can never be sure when a colleague - especially younger ones, a patient, an intern, a child or an acquaintance is taking a cue from us. Every single one of us is a potential leader.

We can model and teach responsible risk-taking, a necessity if we're going to ensure optimal patient care, progress in our profession and



enhancement of our professional lives. Bending rules, sometimes breaking them and learning new ones are areas where mentors can share their experiences and shape pharmacy's future. The art of learning sometimes means the art of suspending judgment. We can help each other learn this skill.

### What I've accomplished

I've been fortunate to find a career niche that's been a perfect fit. Working with our Councillors over my 25 years with the College has offered a unique opportunity to provide leadership to our profession in a collaborative environment. I've been privileged to build on the legacy of former Registrars, including Norm Thomas, Leroy Fevang and Dr. Finlay Morrison.

When I was appointed to the Registrar position in 1995, the timing was right for a shift to an outcomes-based regulatory approach. My vision has been to help define the desired outcomes of professional practice and to allow pharmacists the freedom to achieve the outcomes in creative ways.



We've made good progress toward this goal, and I'm especially proud of our Quality Outcomes Program which provides support and recognition to pharmacists who we catch "doing the right thing."

I am incredibly proud of our staff team - pharmacists, other management staff, administrative assistants, and former staff members. Their loyalty and dedication to me personally and, more importantly, to the College, has made my time as Registrar a privilege and a pleasure.

As my favourite author and performer Garrison Keillor said about lasting for 30 years as the star of his radio show, "The secret of longevity is to surround yourself with people more talented than you." I have done this in spades, and I'm very proud of this accomplishment.

### What's next?

I greatly cherish all the friends and acquaintances I've made during my career, and I plan to keep in touch. I will miss working with our staff and Council members, and I will follow their future endeavours with keen interest and delight.

While my early retirement closes a long chapter of my professional life, I plan to remain active with home-based business plans, golfing, photography, horseracing, volunteering, arts and crafts, tai chi, concerts, movie matinees, plays, walks, family gatherings, travel, reading, and - if time permits - pharmacy consulting projects. If you'd like to keep in touch please email me at [apothecary@shaw.ca](mailto:apothecary@shaw.ca).

Thank you, friends and colleagues, for making my career such a memorable journey. I shall treasure all the memories and wish everyone continued success in making sure that "pharmacy matters."



It's easy to talk about your vision for an organization, especially when you're pitching for the top job. But it takes courage to put it in writing.

That's the risk Registrar Linda Lytle took when she applied for the position of College Registrar in 1995. She created a document called "Pharmacy Perspectives" and presented it to the Council of the day.



Here are a few of the issues she faced: fallout from a lengthy strike the previous year; growing demand for public

accountability; a government decision to appoint one-third of Council; and the launch of PharmaNet - a huge leap of technological faith.

None of this daunted her. She wrote, "Fortunately the timing of this challenge could not be better."

Here's a look back at Linda's vision from a decade ago and why she can retire on July 1, 2005, with a smile of accomplishment. In 1995 her ambitious goals included:

- Provide a staff pharmacist to answer practice questions
- Shift emphasis of pharmacy inspections from "sinks" to "standards"
- Make it easier for pharmacists to relocate from other provinces
- Expand scope of practice
- Develop certification for specialty practitioners

Sound familiar? Over the past decade Linda has worked with Council, staff and pharmacists from across BC to transform all of these dreams into reality.

- The College's OnCall pharmacist information phone line responds to more than 20 practice-related questions a day

## Realizing a Vision 1995 to 2005

- "Inspectors" are history, replaced by Quality Outcomes Specialists who focus on working with pharmacists to resolve practice issues
- The Mutual Recognition Agreement and a streamlined registration process make it easy for pharmacists to move to BC
- BC pharmacists were the first in Canada to prescribe the Emergency Contraception Pill (ECP)
- Advanced Practitioner Credentialing is ready to launch

But Linda was no starry-eyed optimist. "Pharmacists today are increasingly confronted with dilemmas related to ethical decisions," she wrote. So she encouraged Council to create an Ethics Committee, update our Code of Ethics and embed it in our standards and assessments.

And she had no illusions about pharmacists' opinion of competency assessment. "It is clear that many College members remain unconvinced of the need for a broad assessment program," she noted in wry understatement.

Thanks to her persistence and the dedication of Council, staff and hundreds of volunteers, BC pharmacists now benefit from the Framework of Professional Practice, a standards of practice document that's the envy of other professions. Half of BC's pharmacists have already taken part in the Professional Development and Assessment Program (PDAP), and more than 95 percent have met the standard.

**It's easy to talk about your vision. It's another thing to put it in writing.**



Linda's vision in 1995 encompassed everything from better meetings to more recognition for volunteers. And she always understood the need to raise public and government awareness of our profession.

Under Linda's watch, Council hosted the first ever presentation by a Deputy Minister of Health. Together with Deputy Registrar Brenda Osmond, Linda presented pharmacists' concerns to a series of Ministers of Health, government committees and caucus. Every MLA in the province now receives the College newsletter.

Back in 1995 Linda said, "Our profession has for too long been willing to stay in the background and out of the limelight. With the many complex challenges facing us... the time is right for a concerted effort to communicate our values, responsibilities and contributions to health care and our communities."

No longer are pharmacists the wallflowers of health care. The College now has a state-of-the-art website. Linda and Brenda are regulars on radio phone-in shows. Newspaper reporters from across BC keep the College number on speed dial. The College boasts its own portable display for public events, a booklet explaining the College's role to the public, and an outreach campaign spearheaded by Councillors.

One of Linda's most recent ambitions was to create a new program to recognize practice excellence. Although she'll no longer be Registrar when the first awards are announced at the annual meeting in November, we know she'll be there in spirit - cheering for the best in pharmacy.

# TRIBUTES to Linda

I met Linda in October 1971 when I started work as a pharmacy assistant at Woodward's in downtown Vancouver. I was a 4th year pharmacy student and she supervised me. I was intimidated by her because she was so efficient and I felt I could never measure up.

Over twenty years later I was elected to College of Pharmacists of BC Council and Linda's efficiency had advanced to the next level. She always juggled the demands of the Deputy Registrar with a smile on her face. In 1995 I was on the panel that hired Linda into her present job of Registrar. I had no doubt Linda would do well. Linda never had a hidden agenda and was always direct when asked for her opinion. She became a master of diplomacy, dealing with challenging people and situations. She exceeded all my expectations.

*Barb Thompson,  
Past President  
College of Pharmacists of BC*

Linda was our first manager at Evergreen Pharmacy, Campbell River back in the late 1970s. She was a delight. Her warm personality, efficiency and deep knowledge of pharmacy got the business up and running. We couldn't have had a better person.

*Clair Hamilton,  
Pharmacy owner (retired)  
Melvin Clark,  
Owner Evergreen Pharmacy*

I warmly welcome Linda to the family of ex-Registrars. She took over at a crucial time in our history and I congratulate her on doing a fantastic job. As an ex-Registrar I have some idea of the challenges she faced.

*Dr. Finlay Morrison, Past President,  
Past Registrar - College of Pharmacists of BC*

It takes a special person to engage the attention of thousands of pharmacists spread across BC, assemble and manage a staff of two dozen, attend to the myriad details of the profession's administration and always present a cheerful smile and a calm, unruffled demeanour. And that special kind of person is Linda.

All who have had the privilege of working with Linda remark on her unfailing good humour, her wise counsel, and her respect for others. Pharmacy in BC and beyond has benefited from her initiatives, many of which are reflected in areas of daily practice. We have been well served by Linda, an outstanding Registrar, and, above all, a great friend.

*Trevor Watson, Past President  
College of Pharmacists of BC*



Linda is an amazing boss. She believed in me from day one. She's always available and approachable, no matter how busy she is. Linda is a true mentor, always looking out for what is best for everyone, always there for guidance, so compassionate and so professional in the way she treats people. She's an incredible woman. The older she gets the younger she seems.

*Samantha Lam,  
Administrative Assistant - Registrar*

My first interaction with Linda was during the PharmaNet community pharmacy rollout in the summer of 1995. Linda has never failed to impress me with the way she deals with questions; always tactfully, patiently, knowledgeably, and respectfully. Truly grace under pressure.

*Nerys Hughes, Retired Director  
PharmaCare Operations & Systems*

As Registrar Linda has contributed most by pursuing her goal of "catching pharmacists doing things right." Her leadership changed the entire focus of the College. She simplified, or eliminated, so many rules. Under her guidance the College has become a leader in pharmacy innovation.

I enjoyed my three presidential years as Linda's travelling companion. In Halifax we sailed on the tall ship, the Bluenose Schooner. The wind was so strong we had to hang on tight or we'd have ended up in the Atlantic Ocean, along with the lobsters we ate later that night. On a snowy Mother's Day in Winnipeg we ate the biggest and best steaks ever.

And then there's Linda's soft spot, her love of cats. When she noticed a stray cat near her place that was obviously ill, and then disappeared, she looked for it for days. When she finally found it she took it to the vet, paid the bills and nursed it back to health.

*Erica Gregory, Past President  
College of Pharmacists of BC*

At the District 5 meeting in Prince George, May 7, 2001, I had a conversation with Linda that gave me the incentive to get involved with the College. Linda's enthusiasm and passion for the profession along with her congenial manner gave me what I needed to plunge into "College life." Thank you for that push, Linda. Enjoy your much deserved retirement.....hoping to see you in Puerto!

*Rita Thomson, Council President*

# Read•Links

## Online Edition

**With  
Expanded  
Content**



May/June 2005 Vol 1 No 2  
OnLine Edition



## Council welcomes new Registrar

Starting on July 1, 2005, the College has a new Registrar, Marshall Moleschi, B.Sc. (Pharm.). Marshall boasts an impressive 30-year career in pharmacy and health care, most recently as Northern Health's Director of Pharmacy and Prince George's Health Services Administrator.

As a former president of both the College and the British Columbia Pharmacy Association, Marshall is well known amongst pharmacists for his leadership, experience and innovation. While he was Member Services Director with the Health Association of BC, he helped develop two other provincial health organizations, the Health Care Leaders' Association of BC and

the Western Healthcare Improvement Network.

"Pharmacists are our community's most accessible health care professionals, and we are delighted that someone with Marshall's extensive hands-on experience will be our new Registrar," says President Rita Thomson. "We look forward to welcoming him personally.

"We are at the beginning of a new era," says Rita. "Marshall is excited about working with Council and is looking forward to the challenges ahead. Marshall's vision is shared by all of us and we should be able to build on our outgoing Registrar Linda Lytle's legacy."



Marshall Moleschi



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## Nurse practitioners start prescribing

A new category of health providers, known as Nurse Practitioners, start providing health care and prescribing drugs in mid-2005. These Nurses Practitioners are registered nurses with extensive additional experience and specialized training, usually acquired through graduate nursing education and lengthy practice experience.

"Nurse Practitioners are a new category of nurse who have prescribing authority," says Deputy Registrar Brenda Osmond. "Their training prepares them to act as independent health professionals

when treating a patient who has not previously talked to a health professional.

"The Nurse Practitioner curriculum specifically prepares them to perform advanced, comprehensive and holistic health assessment, including a complete physical examination. They can assess, diagnose and prescribe medication. If a pharmacist is not available, a Nurse Practitioner can also dispense medication."

The newly created College of Registered Nurses of BC plans to start registering Nurse Practitioners in mid-2005. The College's goal is "to improve client health outcomes by increasing

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### COLLEGE MISSION

To ensure British Columbia pharmacists provide safe and effective pharmacy care to help people achieve better health.

## PDAP evaluation underway



Doreen Leong

a thousand pharmacists have completed the Knowledge Assessment (KA) exam or a Learning & Practice Portfolio (LPP).

"Now it's time for us to review PDAP, and find out what worked well and what we can improve," says Doreen Leong, Assessment Programs Director. "Everyone who took part in PDAP receives an evaluation form which they can complete on paper or via the College website.

"We encourage all participants to complete the form and let us know what they experienced," says Doreen. "This is a unique opportunity to provide input to the program. Feedback is confidential, and we're also looking for anyone who's interested in taking part in an in-depth interview about either the KA or the LPP. Please contact Doreen Leong if you're interested, email: doreen.leong@bcpharmacists.org.



[www.bcpharmacists.org](http://www.bcpharmacists.org)>PDAP Evaluation Form

Since the fall of 2003 when pharmacists first learned about the Professional Development and Assessment Program (PDAP), more than

## Two hands up

When you do something for the first time you're never sure how it's going to work out. So when Doreen Leong, Assessment Programs Director, put together a team of 20 pharmacists to assess 591 segments of 197 Learning & Practice Portfolios in one week, she was a bit apprehensive.

"During the first two days of intense training, these pharmacists learned how to systematically assess portfolios," says

Doreen. "They were trained on how to use criteria to make consistent assessment decisions, how to

interview and how to prepare feedback." The assessors also took part in a series of "benchmarking" exercises to make sure they applied criteria consistently and to develop feedback statements.

Following their training, the assessors moved onto reviewing each Learning & Practice Portfolio. Many portfolios were assessed by two pharmacists working independently. If an assessor had questions, or felt a portfolio needed more information, he or she interviewed the participant to obtain more details.

"At the end of the week, we asked the assessors how many felt they learned something from the session. Everyone raised at least one hand - some two. It was a great moment," says Doreen, "not only from the viewpoint of the many outstanding LPPs submitted, but also the dedication and care with which the assessors carried out the assessment process."

# PDAP

## Nurse Practitioners

continued from pg 1

accessibility to health care services and filling gaps that presently exist in health care delivery.”

Nurse Practitioners have core competencies in four areas:

- Assessment and diagnosis of client health/illness status
- Health care management, pharmacotherapeutics and therapeutic interventions
- Health promotion and illness/injury prevention
- Professional responsibilities and accountabilities



[www.nabc.bc.ca/publicandmedia/issues\\_background/nurse\\_practitioner/nurse\\_practitioners.html](http://www.nabc.bc.ca/publicandmedia/issues_background/nurse_practitioner/nurse_practitioners.html)

## New Quality Outcomes Specialist joins College

The College welcomes George Budd as the new Quality Outcomes Specialist for Vancouver and the Fraser Valley. George received his Bachelor of Science degree in pharmacy from Cairo University in 1992 and then worked with the pharmaceutical industry in Egypt.

Since moving to Canada in 1996, he has worked as a pharmacy technician, staff pharmacist, and most recently as a community pharmacy manager in Surrey, BC. George is a former member of the College's Inquiry Committee, and he has been an assessor for the Pharmacy Examining Board of Canada (PEBC).



George Budd

### How will I know which nurses can prescribe?

Each Nurse Practitioner with prescribing authority will be registered on PharmaNet as a practitioner.

### How will I know what a Nurse Practitioner can prescribe?

NursePractitionersare responsible for prescribing within their scope of practice. The College of Registered Nurses of BC is responsible for monitoring Nurse Practitioners for appropriate practice.

### How does this change affect pharmacists?

The pharmacist's responsibility is the same as when dealing with a prescription written by a physician. The pharmacist needs to identify, solve and prevent drug-related problems. That means determining if the medication that has been ordered is the best medication for the patient, if the dose is suitable, that the patient knows how to use the medication, knows when it is working, when it isn't, and what to do if the patient experiences side effects.

## DRUG UPDATES AND ADVISORIES

For full details please check the National Association of Pharmacy Regulatory Authorities (NAPRA) website, [www.napra.ca](http://www.napra.ca). You can also find drug information on the College website, [www.bcpharmacists.org](http://www.bcpharmacists.org).

### Avandamet®, Avandia®, Coreg®, Paxil®, Paxil CR™ and Relafen®

Safety information about manufacturing issues for these products at GlaxoSmithKline's Cidra, Puerto Rico facility [www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/gsk-puerto\\_rico\\_hpc\\_e.html](http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/gsk-puerto_rico_hpc_e.html)

### Bextra® (valdecoxib) tablets

Pfizer Canada Inc.'s suspension of the sale and marketing of Bextra® tablets, and advice to pharmacists not to dispense further prescriptions of Bextra® [www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/bextra3\\_hpc\\_e.html](http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/bextra3_hpc_e.html)

### Crestor® (rosuvastatin)

Changes to the Crestor® product monograph [www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/crestor2\\_hpc\\_e.html](http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/crestor2_hpc_e.html)

### Ratio-Paroxetine tablets

Safety information about potential stray carvedilol tablets in bottles of ratio-Paroxetine tablets [www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/ratio-paroxetine\\_hpc\\_e.html](http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/ratio-paroxetine_hpc_e.html)

### Reminyl® (galantamine hydrobromide)

Warning about use of Reminyl® for patients with mild cognitive impairment [www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/reminyl\\_hpc\\_e.html](http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/reminyl_hpc_e.html)

### Transdermal drug patches

Association of transdermal drug patches with thermal burns during magnetic resonance imaging procedures [www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/mri\\_patches\\_nth\\_e.html](http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/mri_patches_nth_e.html)

### Trileptal (oxcarbazepine)

Association of Trileptal with life-threatening dermatological reactions and multi-organ sensitivity [www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/trileptal\\_hpc\\_e.html](http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/trileptal_hpc_e.html)

### Xigris® (drotrecogin alfa activated)

Association of Xigris® with intracranial hemorrhage in pediatric patients [www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/xigris\\_hpc\\_e.html](http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/xigris_hpc_e.html)

## SPEEDY PHARMANET ACCESS AUDITS

In response to complaints from pharmacy managers about how long it takes to deal with PharmaNet access audits, the College recently streamlined the process.

Instead of sending written reasons for each PharmaNet access to the College, pharmacy managers now use a Confirmation of PharmaNet Access Audit Completion form.

This makes it easy for pharmacy managers to show whether they're satisfied that each PharmaNet access was appropriate - or not. In the latter case, pharmacy managers need to contact the College immediately.

Every time a pharmacist checks a PharmaNet patient record without dispensing or reversing a prescription PharmaNet creates an access log. This is an important privacy protection feature built into the system.

Many people worry about the confidentiality of their medical records, particularly on a province-wide system like PharmaNet. So, as part of its responsibility for protecting the public, the College conducts random audits. Periodically the College sends a pharmacy manager a list of PharmaNet accesses made in his or her pharmacy during a two-week period that are unrelated to dispensing or reversing prescriptions.

The pharmacy manager reviews each access to make sure it follows practice standards. It's OK to check a PharmaNet patient record for:

- Dispensing
- Counselling
- Evaluating a patient's drug use
- Claims adjudication and payment

If you have any questions please contact Cory Cyr, PharmaNet Coordinator, at the College or by email: [cory.cyr@bcpharmacists.org](mailto:cory.cyr@bcpharmacists.org).



## Encouraging pharmacists to 'choose BC'

A new College publication encourages pharmacists to 'choose BC' when they're deciding where to practise. *Guide to Becoming a Pharmacist in British Columbia* collects together in one place everything an applicant needs to know to become registered to practise in BC.

"We're competing for talent in a global market," says Registrar Linda Lytle. "Whether we're talking to fourth-year UBC students or internationally trained professionals, we want them to know their skills are welcome in BC.

"We need to build a relationship with every potential pharmacist, from the first phone call to the College or the first click on our website. We want to let them know BC is one of the best places in the world to practise pharmacy and we'll support them all the way through the registration process."

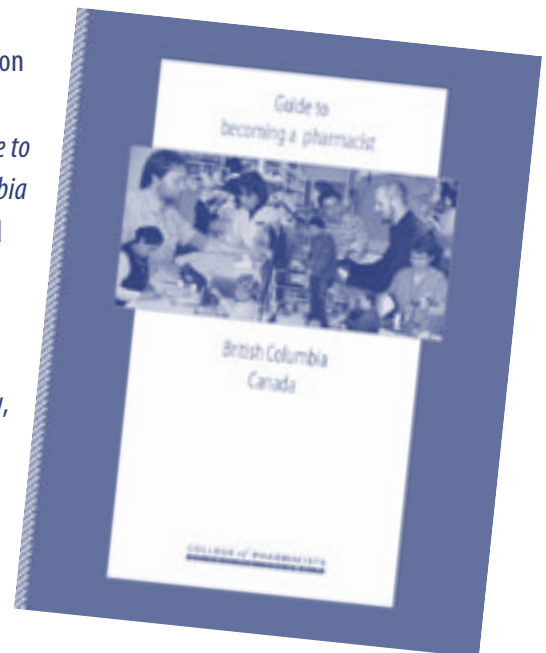
Planned for release in the fall, *Guide to Becoming a Pharmacist in British Columbia* is the first College publication designed primarily for the internet. "Electronic communication opens a whole world of possibilities," says Linda. "College information becomes available globally, instantly. If registration requirements change we can update information in minutes." E-publishing also saves thousands of dollars in printing and mailing costs.

*Guide to Becoming a Pharmacist in British Columbia* is only one part of the College's commitment to encouraging

pharmacists to choose BC. Working with other provincial colleges, the College has simplified English language and internship requirements, making it easier for pharmacists to relocate within Canada and to move to BC from the United States.

"In addition to harmonizing our requirements with other provinces, we also reviewed our entire registration process," says Linda. "From the first letter an applicant receives to the moment they hang their diploma on the pharmacy wall, our goal is to make the process open and easy to understand."

For more information about the registration process please contact Administrative Assistant Neetika Bains, email: [neetika.bains@bcpharmacists.org](mailto:neetika.bains@bcpharmacists.org).





# what went Wrong

Dear College:

Yesterday I took a prescription for Zithromax® to the pharmacy. When I picked it up, the medication was in a paper bag with my name on it. The pharmacist charged me for the medication but didn't provide any information. I wasn't concerned because my doctor told me it was an antibiotic and I needed to take two tablets immediately and then one tablet daily for four days.

As soon as I got home, I opened the paper bag. I pulled out the box of medication. The pharmacy label completely covered one side of the box. I flipped it over and noticed the manufacturer labelled the drug as Viagra®! I was shocked. I flipped it over again and looked closely at the pharmacy label – it identified the drug as Zithromax®.

Why did the pharmacy dispense my prescription for Zithromax® with Viagra®? Viagra® is used for the treatment of erectile dysfunction. I am a woman with pneumonia and need an antibiotic! Although I didn't take any of the Viagra®, I shudder at the thought of the potential consequences. I hope this never happens to anyone!

*Upset about Viagra®*

## Here's what happened:

**The pharmacist involved reports that when she received the prescription, she processed it correctly for Zithromax®. The pharmacy was busy so a pharmacy technician took the medication from the shelf and labelled it for the pharmacist to check.**

**When performing the final check, the pharmacist didn't notice that the medication labelled by the pharmacy technician was Viagra®. Both the pharmacy technician and pharmacist believe this happened because Viagra® and Zithromax® boxes look similar and were near each other on the pharmacy shelf.**

**What can be done to prevent this type of dispensing error?**

- 1. Store drugs alphabetically by generic or trade name. This reduces the likelihood of mixing up look- alike drugs from the same manufacturer.**
- 2. When putting inventory away, make sure drugs are placed in the right location. Look-alike**

**drugs in the wrong place can contribute to a similar error.**

- 3. Both pharmacists and pharmacy technicians should use a checking system to compare the DIN on the inventory with the DIN on the computer-generated label.**
- 4. When labelling boxes, make sure the DIN, drug name, and strength are clearly visible. This makes it easier for the checking pharmacist and counselling pharmacist to confirm the right drug is dispensed.**
- 5. When appropriate, use clear plastic bags for storing prescriptions awaiting pick up. If you use a paper bag, remove the contents at pick up time to confirm the patient is getting the correct medication.**
- 6. Provide patient counselling in all instances. A final visual check at the time of counselling and a discussion about the medication could have caught this error before the patient left the dispensary.**

## LOYALTY PROGRAMS RAISE ETHICAL ISSUES

Customer loyalty programs have long been a concern for some community pharmacists. When a major pharmacy chain recently targeted incentive program “bonus points” at prescription drugs, this raised ethical issues which Council reviewed at its April meeting.

“We heard stories of pharmacists encouraging patients to put off buying medication until a date when they could earn more ‘points’ and anecdotes about patients opting to delay getting their prescription for the same reason,” says President Rita Thomson. “We also heard that many customers appreciate loyalty programs, especially the elderly and those on limited income.”

Following a lively debate, Council agreed it is clearly unethical for a pharmacist to encourage a patient to delay filling a prescription in order to gain ‘points.’ Pharmacists are responsible for working with patients to make sure they don’t compromise their health to benefit from a loyalty program.

Council also agreed that it is inappropriate for a pharmacist to provide an emergency supply of medication so a patient can wait to gain extra ‘points.’



### Would you like \$100?

You could win a fresh new \$100 bill for activating your “E-Link - email for Canada’s pharmacists” account. If you take a few minutes to set up your free webmail account, you’re automatically entered to win. Watch out for this poster at pharmacy events and you could increase your odds of winning \$100.

Only new E-Link users are eligible for these special draws, which take place once every two months. The College will also hold a draw for pharmacists who have already signed on to E-Link.

In today’s fast-paced world where patients are quick to find medication information (and misinformation) on the internet, pharmacists need access to email and the internet. As society’s most accessible health care professionals, it’s up to us to make sure our patients benefit from the best health care technology available.

For more information about E-Link email and other online services call the College toll-free, 800-377-8129.

It’s easy to activate your E-Link account.

1. Use any internet-connected computer to access the College website at [www.bcpharmacists.org](http://www.bcpharmacists.org) and click on the E-Link icon
2. Key in your username: `diploma number@cpbc.napra.ca`
3. Key in the password: `happy123`
4. To change your password, click on “options” and follow the prompts
5. Fill in the email address you want your E-Link email forwarded to

And you’re done.

Almost half of BC pharmacists are already registered to use E-Link, email for Canada’s pharmacists. We hope you’ll choose to join them. E-Link is only one of the many online pharmacy support services available to BC pharmacists.

- [www.bcpharmacists.org](http://www.bcpharmacists.org), the College website, offers you instant access to information you need during your daily practice
- *Read•Links* Online keeps you up-to-date on College events and information
- *eServices* enables you to upgrade registration information and pay annual fees online – no postage, no delays
- E-scripts are coming soon. 85% of BC pharmacists support moving toward e-scripts

Check out the latest  
**E-Link winner**

on the College website & in *Read•Links*,  
the College’s bi-monthly newsletter

## Integrating the internet into practice

The digital generation is growing up around us. If you're a young person diagnosed with a serious illness you head straight to the internet to learn about treatment options and drugs.

Yet many pharmacists have yet to integrate the internet into daily practice. The recent Policy Input, which asked pharmacists for opinions about email and internet in the pharmacy, generated heated responses:

- "It is not the job of a business to provide private email to employees nor pay for their time to read up."

*Pharmacy Owner*

- "You guys & ladies are too much regulatory crazy! Where is the option not to do what you think is beneficial. There are many ways of getting drug information. I love the internet, but don't mandate it! STOP!"

*Community/hospital pharmacist*

Although 70 percent of BC pharmacists use the internet at home, only 57 percent access it at work, usually due to lack of a terminal or high speed access. "In a few years we'll look back and we won't be able to imagine how we practised without it," says Deputy Registrar Brenda Osmond.

"In the meantime, it's the College's job to support pharmacists during the transition to electronic communication." An e-communication focus group will identify barriers to internet access in the pharmacy and develop ways to resolve the varying concerns of employers and employees.

For more information about the e-communication focus group please contact Deputy Registrar Brenda Osmond, email: [brenda.osmond@bcpharmacists.org](mailto:brenda.osmond@bcpharmacists.org).

This column prints questions and answers from the OnCall Information Line  
Toll free 800.663.1940

**OnCall**

PHARMACIST INFORMATION LINE

## Questions & Answers

**Q** Our pharmacy technicians regularly reverse prescriptions from PharmaNet when they are not collected within 30 days, as required, but occasionally we miss a few. How can I reverse prescriptions processed more than 120 days ago?

**A** The College does this for you. Fax us a copy of the official receipt for each prescription processed more than 120 days ago that has not been picked-up. Be sure to provide the patient's name, PHN, pharmacy contact information, and reason for reversal. For example, "Reversals needed for prescription(s) processed greater than 120 days ago, but not picked up." For further information, please contact Cory Cyr at the College office, 604-676-4238.

**Q** I am the pharmacy manager of a high volume community pharmacy. Can I transfer storage of hard-copy prescriptions to an off-site bonded storage facility?

**A** No, at the moment, all records must be retained on the pharmacy premises.

**Q** What schedule is Carnitor® (levocarnitine)?

**A** Levocarnitine falls under Schedule I and, therefore, requires a prescription for sale. Carnitine, a naturally occurring substance, is required for energy metabolism. Some patients with end-stage kidney disease undergoing dialysis take levocarnitine to treat or prevent carnitine deficiency.

**Q** Is Cesamet® (nabilone) classified as a narcotic?

**A** Nabilone is a synthetic cannabinoid. Some patients use nabilone to prevent nausea and vomiting that can occur after cancer chemotherapy. Nabilone is classified as a narcotic so you can accept only a written or faxed prescription. It does not require a Controlled Prescription Program form (formerly known as Triplicate/ Duplicate Prescription form).

Read-Links Online offers you everything you find in the printed Read-Links newsletter plus much more. Click on Resources on the homepage of the College website, [www.bcpharmacists.org](http://www.bcpharmacists.org), to find Read-Links Online and back issues of newsletters.

**Read-Links Online Edition**

### In the May/June Read-Links Online Edition

- **New regulations for Ketamine** - learn more about the popular party drug
- **June 17, 2005 Council Highlights** - get the latest news on Council decisions
- **Resource Source** - learn more about new HIV alternative therapies
- **People News** - find out who's the new Councillor for District 3 Vancouver Island/Coastal District
- **EventLink** - read the latest news on events for pharmacists

## Health & Yourself keeps going and going...

Since September 2004, Councillors and pharmacists have volunteered their time to promote the BC HealthGuide program through Health & Yourself Seminars to more than 400 people at 20 events in Prince George, Fruitvale, Rossland, Victoria, Smithers, Castlegar and the Lower Mainland.

If you know of a community group that would like to receive a Health & Yourself presentation, along with free BC HealthGuides, please contact your district Council member.



### Read-Links Published by:

College of Pharmacists of British Columbia  
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Managing Editor: Linda Lytle, Registrar

The Read-Links newsletter provides important College and pharmacy practice information. All pharmacists are expected to be aware of these matters. Licensed pharmacies must have the last three years of Read-Links / Bulletin issues on file as per reference library requirements.

*Your questions and comments about this newsletter are welcome and may be forwarded to the Registrar.*

## A Day in the Life of

**Alan Samuelson**



Alan Samuelson

Most people think about taking it easy when they hit 65. Not Alan Samuelson. When mandatory retirement threatened to ease him out of his job as Pharmacy Manager at Ridge Meadows Hospital Pharmacy, he heard the College was looking for a hospital pharmacy consultant.

"As soon as I sat down for my interview, I told Linda Lytle how old I was," he remembers. "She said it was my skills the College was interested in – not my age." With 40 years experience ranging from an 11-bed hospital to one with 1,200, including a medium security prison hospital, plus stints in cancer, psychiatry, pediatrics and surgical care, you might think he'd be happy to sit in an office dispensing wisdom.

Not Alan. Since he joined the College as a Quality Outcomes Specialist in March 2003, he's toured almost every hospital in BC – he's got two to go. "Linda asked me to conduct a baseline review of all the hospital pharmacies in the province," says Alan. "She gave me two years. I nearly made it."

He spends the spring and summer on the road meeting pharmacy managers and talking to over-worked pharmacists. During the ugly travel months of winter you'll find him in his office taking calls and emails, answering 'how-to' questions and helping pharmacists problem-solve tricky practice situations.

Although he's originally from Vancouver, Alan spent 21 years at the Red Deer Regional Hospital in Alberta where he met his wife Jean. She teaches grade six and "She's as passionate about teaching as I am about pharmacy." The other passion in their life is hockey. With four children and 11 grandchildren – including two step-grandchildren and four foster-grandchildren – they devote their weekends to standing by the ice, cheering.

By now Alan probably knows more about hospital pharmacy practice than anyone else in BC. He sees a profession that's stressed to the max by staff shortages and a workload that never lets up. "Pharmacists hate to say no, so they push to the limit of what they can take on," he says.

He believes that one possible solution is better use of pharmacy technicians. "I talk to a lot of tremendously competent techs who could take on a greater role," says Alan. "I'm a great believer in developing people to their fullest potential." Having met every single BC hospital pharmacy manager, he's now consulting with stakeholders, gathering feedback and giving presentations on what he's learned. He hopes to identify ways to shift the focus of hospital pharmacy practice from distribution to pharmaceutical care.

He plans to finalize his report by the fall. In the meantime he's taken on the role of Mentorship Coordinator. Doesn't he ever need a break? Not Alan. "The most refreshing thing is to be in a position where you can help people," he says. "It can't be done" doesn't come into my thinking."

## Updated HIV alternative therapy guide

If you have patients who are living with HIV and are interested in alternative therapies, you can refer them to the Canadian AIDS Treatment Information Exchange (CATIE). An updated edition of *A Practical Guide to Complementary Therapies for People Living with HIV* explains complementary therapies, helps patients choose a therapist and provides advice on researching therapies.

*A Practical Guide to Complementary Therapies for People Living with HIV* also provides information on a range of alternative therapies including:

- Natural health products
- Ayurvedic medicine
- Homeopathy
- North American aboriginal healing traditions
- Naturopathy
- Traditional Chinese medicine and acupuncture
- Aromatherapy
- Colour therapy
- Flower essences and other essence therapies
- Herbal therapy
- Iridology
- Juicing
- Massage and manipulation techniques
- Mind-body medicine
- Touch therapies

For more information about the Canadian AIDS Treatment Information Exchange, call 1-800-263-1638 or email [info@catie.ca](mailto:info@catie.ca).



Download your copy of *A Practical Guide to Complementary Therapies for People Living with HIV* from the Canadian AIDS Treatment Information Exchange website:

[www.catie.ca](http://www.catie.ca)>Publications and News>Practical Guides

## OnCall service popular with pharmacists

The College's OnCall pharmacists have logged more than 2,500 calls from pharmacists since September 2004, an average of more than 20 calls a day. OnCall pharmacists are ready to answer your practice-related questions at any time during regular College business hours.

Call toll-free 800-663-1940

## SmartSample prescription program

This program enhances patient safety by making it possible for a doctor to send a patient to a pharmacy where he or she can pick up a free drug sample from a pharmacist. Once completed by a doctor, a SmartSample becomes a prescription for the indicated product.

This program enables a patient to receive pharmacist counselling when trying a trial sample of a medication and makes sure his or her medication record is comprehensive. For more information call 1-877-790-1991.



[www.samplingtechnologies.ca](http://www.samplingtechnologies.ca)  
[www.smartsample.ca](http://www.smartsample.ca)

## Adverse reaction online database launched

For the first time Canadians can now access a searchable online database that offers immediate access to 40 years of data about adverse reactions to health products. Updated quarterly, Health Canada's Canadian Adverse Drug Reaction Monitoring Program (CADRMP) provides publicly reported adverse reactions to pharmaceuticals, biologics (including blood products and therapeutic and diagnostic vaccines), natural health products, and radiopharmaceuticals. The website also offers links to adverse reaction fact sheets, guidelines and reporting procedures.



[www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/cadrm-pcseim/index\\_e.html](http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/cadrm-pcseim/index_e.html)

## US Pharmacopeia online

The United States Pharmacopeia (USP) is the official public standard-setting authority for drugs in the US. As an independent public health organization, USP establishes public safety standards. Its website offers online resources such as:

- CAPSLink patient safety news bulletins
- USP Quality Review recommendations based on medication error reports
- Practitioner's Reporting News medication error summaries on specific topics

Please note that since this is a US website, some drug names do not apply in Canada.



[www.usp.org](http://www.usp.org)

## Be prepared

An influenza pandemic could hit at any time. According to a recent study, Pandemic Influenza Preparedness, all the prerequisites for a pandemic already exist except one – efficient human-to-human transmission. Experts believe the next pandemic will spread quickly across Canada and could result in millions of people needing care. The best way to prepare for the next pandemic is to make the most of prevention and control measures and get involved in local planning activities.



### Pandemic Influenza Preparedness

BC Centre for Disease Control's preparedness plan outlines the role of pharmacists pre-pandemic, during the pandemic and post-pandemic: [www.bccdc.org/content.php?item=150](http://www.bccdc.org/content.php?item=150)

Find information on flu tracking:  
[www.hc-sc.gc.ca/pphb-dgpsp/fluwatch/](http://www.hc-sc.gc.ca/pphb-dgpsp/fluwatch/)  
[www.who.int/health\\_topics/influenza/en/](http://www.who.int/health_topics/influenza/en/)

Canadian Pandemic Influenza Plan:  
[www.hc-sc.gc.ca/pphb-dgpsp/cpip-pclcpi/](http://www.hc-sc.gc.ca/pphb-dgpsp/cpip-pclcpi/)

## Learn online

A new series of online accredited, interactive case study programs is now available.

The latest program, Vaginal Atrophy: Treatment Options and Patient Counselling Tools, helps you counsel your patients on the pros and cons of treatment options.



[www.rxbriefcase.com](http://www.rxbriefcase.com)

## BC HealthGuide new edition

A new edition of the BC HealthGuide is now available from the provincial Ministry of Health Services. A pamphlet on patient safety from the BC HealthGuide program is also available for pharmacists to bulk order for their pharmacies.

Council and local pharmacists continue to actively support the BC HealthGuide program through Health & Yourself Seminars. If you know of a community group that would like to receive a Health & Yourself presentation, along with free BC HealthGuides, please contact your district Councillor.



### BC HealthGuide patient safety pamphlet

Get a pamphlet order form through BC HealthGuide OnLine at:

[www.bchealthguide.org](http://www.bchealthguide.org)  
or call toll-free 800-465-4911

## Council Highlights

### Close vote on ECP

In its closest vote in years, Council decided to leave Emergency Contraception Pill (ECP) scheduling unchanged in BC. This means both Plan B and Ovral (when used for emergency contraception) continue to be Schedule 4 drugs, available by prescription from ECP-certified pharmacists.

During a lively debate Councillors reviewed Health Canada's April 2005 decision to deregulate levonorgestrel, also known as Plan B, making it a non-prescription drug when used for emergency contraception. This could greatly increase access and awareness of Plan B.

However, Health Canada did not include Ovral, a common alternative to Plan B, in the shift to non-prescription status. This could result in some patients having to pay for Plan B, but not Ovral. Plan B currently costs from \$25 to \$50 depending on the pharmacy. Councillors expressed concern patients might base their drug choice on price rather than the best treatment for their individual situation.

Council also discussed the impact of provincial regulation on Health Canada's decision. Currently, in BC, all federal scheduling changes have to be approved by the College and the provincial government before taking effect. This process often takes up to a year.

By that time the provincial government may approve 'scheduling by reference', a process already in place in five provinces. 'Scheduling by reference' means that when Health Canada deregulates a drug, it automatically shifts to the category listed in the national drug schedules (Schedule 2 in the case of levonorgestrel).

### President-elect selected

Council unanimously chose longtime Council member, John Hope, as President-elect. John, elected by pharmacists from District 6 - urban hospitals, takes over as President from Rita Thomson at the end of the November 26 annual meeting.

### Recognizing excellent pharmacists

Council reviewed 35 nominations for the College's new awards program: 16 for Five-star Pharmacist, 11 for Award of Excellence in Community Pharmacy, six for Award of Excellence in Hospital Pharmacy and two for Award of Excellence in Long-term Care Pharmacy.

Due to the large number of nominations, Council created a nominations review

*continued on pg 11*

# People News

*In this issue of Read-Links we recognize a few of the thousands of people who contribute to our profession and to the College.*

### New Councillor for District 3

On Thursday May 19, 2005, pharmacists in District 3: Vancouver Island/Coastal elected *Barry Wilson* to represent the public on Council. Two other Councillors were re-elected by acclamation - *Rita Thomson* for District 5: Northern BC and *Carol Gee*, District 7: Community Hospitals. Councillors' two-year terms start immediately after the annual meeting on November 26.

Council has issued a second call for nominations for District 1- Metropolitan Vancouver.

### College names new QOS

On June 13, 2005, *Mary McClelland* became the College's newest Quality Outcomes Specialist (QOS). Mary has more than 30 years experience in pharmacy event organization and administration and has been the College's methadone program coordinator since the fall of 2004.

Mary is expanding her methadone outreach activities and increasing her work with pharmacies, clinics, prescribers and community officials. Although she continues to respond to telephone calls from patients, doctors and pharmacists, she's not involved in direct patient care issues, which are referred to staff pharmacists.

### Scholarship winner

The University of British Columbia has selected *Sau Chung Chow* to receive a College of Pharmacists of British Columbia scholarship worth \$750. This scholarship recognizes the student who achieves the highest standing in third-year pharmaceutical sciences examinations and is continuing on to fourth year.

### Future leader practising in BC

UBC graduate *Leanne Kwan*, who is currently completing her residency at St. Paul's Hospital in Vancouver, has been named a 2005 Canadian Pharmacists Association-Apotex Future Leader. Leanne also won the 2003 Apotex BC Future Leader Award.

### CPhA Centennial Award

UBC student *Anthony Tung* has received the Canadian Pharmacists Association Centennial Award in recognition of his work in promoting the profession and achieving good academic standing.

### Pharmacist of the year

The Canadian Pharmacists Association recently named *Dr. Ross Tsuyuki* as Pharmacist of the Year. Ross, who is registered as a pharmacist in BC, is also Associate Professor of Medicine, Division of Cardiology at the University of Alberta and is a national leader in clinical trials and health outcomes studies.

### BC pharmacist named Canadian Institute of Health Research Fellow

BC pharmacist *Elaine Chong* is the first pharmacist ever to be accepted as a Canadian Institute of Health Research (CIHR) Strategic Training Fellow in Primary Health Care. CIHR is Canada's leading federal funding agency for health research.

Elaine will complete her fellowship during 2005/2006. Currently Elaine is Clinical Services Manager with Network Healthcare Inc. in Richmond, BC, where she's responsible for daily operations of the Pharmacist Network which provides support for the BC NurseLine.

Since she graduated from UBC in 2000, Elaine has completed a pediatric residency at the Hospital for Sick Children in Toronto, and published 10 full-length manuscripts and six abstracts in peer-reviewed pharmacy and medical journals. The Canadian Pharmacy Association recently honoured Elaine with its "New Practitioner Award."

### BC Diabetes educator honoured

The Canadian Pharmacists Association recently selected certified diabetes educator *Elaine Cooke* for the CPhA Pharmacist Diabetes Educator Award. In addition to counselling patients as a pharmacy manager in Richmond, BC, Elaine trains technicians on monitoring devices, makes presentations to nurses and pharmacists, writes articles on diabetes, and has been a clinical instructor at UBC.

## More People News

### Pharmacy Examining Board chooses BC for VP

*Kathy McInnes*, a drug information pharmacist and poison information specialist at Vancouver's BC Drug & Poison Information Centre (DPIC) is the new Vice President of the Pharmacy Examining Board of Canada (PEBC), Canada's national pharmacy certification body.

"I think it's important to represent our views nationally, to keep abreast of current issues and to fulfill our mandate to the National Association of Pharmacy Regulatory Authorities and the Mutual Recognition Agreement," says Kathy. "It's an honour for me to represent the College at PEBC."

This achievement caps nearly two decades of volunteering to support our profession. From 1987 - 2000 Kathy took part in the College's Panel Assessment Committee which assessed pharmacists hoping to be licensed to practise in BC. Since 1996 she's been a member of the Board of Examiners and was Chief Examiner for the PEBC Vancouver Objective Structured Clinical Examination (OSCE) from 2001-2004. In 2001, Kathy became PEBC's BC representative and became a member of the Executive Committee in 2003.

"It's been exciting to see the examination process develop over the past 18 years from enhancements to the Panel Assessment Examination to a national certification program," says Kathy. "At times it's been a lot of hard work and long hours, but the results have been rewarding. The people I've worked with have been dedicated to the process. I certainly have met wonderful, talented pharmacists over the years."

A non-profit organization, PEBC boasts more than 40 years of experience assessing pharmacists' qualifications and competence. "PEBC's rigorous certification process ensures the quality of pharmacists entering practice and is a vital component in the delivery of safe and effective health care to Canadians," says Kathy who is also Assistant Coordinator of the BC Regional Adverse Reaction Program.

### NAPRA chooses new President

On April 24, 2005, *Burke Suidan* was acclaimed as the new President of the National Association of Pharmacy Regulatory Authorities (NAPRA). Burke graduated in 1997 from the University of Saskatchewan, where he was involved with student government and voted class valedictorian. During university he received the College Spirit Award twice and upon graduation received the Class of '56 Memorial Scholarship for leadership.

For the last seven years Burke has worked at the Medicine Hat Regional Hospital in dispensary supervision, clinical treatment evaluation, and patient-focused care. He has been a Councillor with the Alberta College of Pharmacists since May 1999 and served as the President in 2002/2003. Burke has represented the Alberta College of Pharmacists on the NAPRA board for the last three years.

Councillor and past President *Erica Gregory* is now the BC representative on the board of the National Association of Pharmacy Regulatory Authorities, along with the College Registrar.

## Party and date rape drug now controlled

The popular party drug, ketamine is now a controlled substance. A non-barbiturate anaesthetic, ketamine is popular because it creates the illusion of an out of body experience. Ketamine is also used as a date rape drug.

Ketamine is now listed in Schedule 1 of the Controlled Substances Act. It was formerly listed under Schedule F of the Food and Drug regulations.

You can no longer accept verbal prescriptions for ketamine. All pharmacists must comply with the Narcotic Control Regulations with regard to any product containing ketamine.



**Ketamine Now Controlled Drug**

## More Council Highlights

committee consisting of incoming Registrar Marshall Moleschi and government appointee Mike MacDougall. Marshall and Mike will take a look at all the nominations and bring forward a short list to Council.

Council will finalize selection of award winners at the September 23 Council meeting. President Rita Thomson will present the awards at the November 26 annual meeting.

### UBC takes over interns

Council supported shifting administration of the College's internship program to UBC's Structured Practice Education Program (SPEP). This change affects about 50 applicants each year and makes sure both Canadian and internationally trained applicants receive the same standard of high quality internship.

During this transition the College is giving SPEP a one-time grant of \$5,000 to enhance software, forms and monitoring systems. Council also approved a fee of \$500 per intern. This covers the amount SPEP charges the College for administering the program.

### Health & Yourself Seminars

As a result of several more Health & Yourself seminars held in rural communities, Council is now half way to its community outreach goal of "1000 by 2005."

President Rita Thomson and her daughter, hospital pharmacist Kirsten Thomson, recently presented the program to three classes of Prince George high school students, while District 4 Councillor Erica Gregory talked to two Rotary groups in the Kootenays. Rita and District 7 Councillor Carol Gee also conducted the seminar for a group of Prince George hospital pharmacists and technicians.

If you know of a community group that would like to receive a Health & Yourself presentation, along with free BC HealthGuides, please contact your district Councillor.



[www.bchealthguide.org](http://www.bchealthguide.org)

### Hospital pharmacist joins Examiners

Council unanimously approved the appointment of hospital pharmacist Raymond Jang to the Board of Examiners. This brings the number of hospital pharmacists on the Board up to three, reflecting the ratio of hospital and community pharmacists across BC.

# EventLink

## attend

### INTERNATIONAL CONFERENCE ON PATIENT SELF-MANAGEMENT

Learn about new perspectives in patient self-management from the world's leading experts. Find out what the future holds in the rapidly growing field of patient self-

management. Hear provincial, national and international leaders describe the latest research on how to develop and maintain self-management.

Date: September 12 - 14, 2005  
Location: Victoria Conference Centre, Victoria, BC  
Click: [www.newperspectivesconf.com](http://www.newperspectivesconf.com)

## attend

### COLLEGE COUNCIL MEETINGS

Councillors welcome all BC pharmacists and the public to attend Council meetings of the College of Pharmacists of BC.

Date: Fridays: September 23, 2005  
November 25, 2005  
January 29, 2006  
Contact: Samantha Lam, 866-676-4220 toll-free direct  
Location: College office, Vancouver, BC

## experience

### CONCUSSION ROAD SHOW

Specialists in brain injury, sports medicine and physical therapy present a free concussion education program.

Information & Registration: 604-512-2991, [vcsregistration@soragroup.com](mailto:vcsregistration@soragroup.com)

Date: Saturday, September 24, 2005 8:30 - 11:30am  
Location: Imax Theatre, Science World, 1445 Quebec St., Vancouver, BC  
Click: Program brochure

## learn

### NATIONAL ONCOLOGY PHARMACY SYMPOSIUM

Experience cancer treatment from the patient's point of view at the National Oncology Pharmacy Symposium coming to Vancouver this fall. Presented by the Canadian Association of Pharmacy in Oncology (CAPHO), the conference theme is "From the patient's perspective."

Date: October 28 - 30, 2005  
Location: Sheraton Wall Centre, Vancouver, BC  
Contact: Sarah Lewis, Conference Manager [sarah@seatoskymetings.com](mailto:sarah@seatoskymetings.com)  
Click: [www.capho.ca](http://www.capho.ca)

## explore

### DISTANCE EDUCATION PROGRAM 2005

Learn at home with UBC Continuing Pharmacy Professional Development's home study program. Check out the Spring 2005 calendar to access new courses on Anticoagulation, Basics of immunization,

Current and future issues in viral diseases and non-HIV antiviral drugs, Applying pharmacoeconomic principles in every day practice, and Patient assessment. Send your comments to UBC-CPPD at: [infocpe@interchange.ubc.ca](mailto:infocpe@interchange.ubc.ca).

Click: [www.pharmacy.ubc.ca/cppd/index/html](http://www.pharmacy.ubc.ca/cppd/index/html)