

**1) What do I need to do when there is a change in Pharmacist-in-Charge?**

**Resigning PIC**

Send a copy of your letter of resignation as PIC to the Board Office  
Take a controlled substance inventory within 72 hours of your last day of work

**New PIC**

Application completed, including notarized signatures of PIC and the owner/agent  
Technician List  
Copy of the DEA registration  
Copy of the corporate officers or other documentation  
Check or money order for \$140  
PIC Exam after Board office is in receipt of completed application  
Take a controlled substance inventory within 72 hours of beginning employment

**2) With a change in PIC, when must the new PIC be in place?**

The new registration and PIC must be in place within 30 days of resigning PIC's last day.

**3) Can my technician open the retail store to sweep the floors, turn on the computer, and begin inputting prescription numbers needed for refills BEFORE I arrive at the pharmacy?**

NO. K.S.A. 65-1637...when a pharmacist is not in attendance at a pharmacy, the premises shall be enclosed and secured.

**4) Can my hospital technician do paperwork and pull outdates when I'm not there?**

When a pharmacist is on the premises but not in the pharmacy, a pharmacy technician may be in the pharmacy, however they shall not distribute any drug out of the pharmacy. When a pharmacist is not on the premises, no one shall be permitted in the pharmacy except the designated registered professional nurse or nurses. K.S.A. 65-1637, 65-1648(a) and K.A.R. 68-7-11.

**5) Can I get all 30 hours of CE in one year or do I have to obtain 15 hours per year?**

K.A.R. 68-1-1b(b)... Three C.E.U.s shall be required for renewal during each licensure period. The law does not specify how many per year, only that 30 hours are needed for each licensure period.

**6) Can a registered nurse enter a hospital pharmacy, when the pharmacist is not on the premises, and transfer the doses necessary for immediate and future administration?**

NO. K.A.R. 68-7-11 (e)(3)...A nurse shall not transfer medication from one container to another for future use, but may transfer a single dose from a stock container for immediate administration to the ultimate user.

**7) Who can prepackage medication?**

K.A.R. 68-7-15(a) Packaging in advance of immediate need shall be done by a pharmacist or under his or her direct supervision. Direct supervision is defined in K.S.A. 65-1626(g).

**8) Is Ephedrine a controlled substance?**

YES. As a schedule V. K.S.A. 65-4113(e) Unless specifically exempted or unless listed in another schedule any product containing as its single ingredient the substance Ephedrine.

**9) Can we honor out of state prescriptions from an ARNP or PA?**

YES. But the prescription has to meet to requirements of a Kansas prescription including the name, address and telephone number of a responsible physician.

**10) Can I dispense more than a thirty day supply of Ritalin?**

YES. The law does not limit the quantity dispensed for any controlled substances except drugs used as diet aid or amount dispensed of C II if it is an emergency prescription.

**11) Can I fill an out-of-state prescription for a controlled substance?**

YES. K.A.R. 6820-19(a)(4)(A)(iii) If the prescribing practitioner is not known to the pharmacist, the pharmacist shall make a reasonable effort to determine that the authorization came from the prescribing practitioner, which may include a call back to the practitioner.

**12) Can I refill an out-of-state diet pill prescription if refills are indicated?**

NO. K.A.R. 100-23-1(d) The treating physician shall not dispense or prescribe more than a 30-day supply of controlled substances to treat obesity for a patient at one time. Therefore, no refills are permitted.

**13) Can a psychiatrist treat pain?**

YES. The Board of Healing Arts does not license specialties or practices. It does license doctors and if the doctor has a DEA number the doctor can write for pain medications.

**14) Does a clerk count against ratio of pharmacist / tech?**

NO. K.A.R. 68-5-15

### **15) Can I leave Rx's at another location to be picked up?**

NO. K.A.R. 68-2-16 No pharmacy shall have a branch, connection, or affiliation whereby prescriptions are solicited, accepted, collected, or picked up, from or at any location other than a licensed pharmacy.

### **16) What changes may a pharmacist make to a prescription written for a controlled substance in schedule II?**

**Kansas Policy:** Four (4) items on a Schedule II prescription **may not be changed**. They are the name of the patient, name of the drug (except for generic substitution), name of the prescriber, and the date of the prescription. The Kansas Board has determined that it is in the best interest of the patient to allow a pharmacist to add the patient's address, the prescriber's DEA number, and to select a dosage form if not indicated. These items must be on the front of the prescription. The following additions or changes may be made after oral consultation from the prescriber: add a date if not indicated on the prescription, change the drug strength, drug quantity, and the directions for use. The pharmacist should always document with his or her initials the time and date that the prescriber or the prescriber's agent was contacted and remind the prescriber to document the changes in the patient's chart. All Schedule II prescriptions shall be manually signed by the prescriber. Nothing else on the prescription is required to be in the prescriber's own handwriting. We apologize for any confusion this issue may have created. We appreciate the physicians' and pharmacists' patience as we worked with DEA to come to an agreeable solution.

### **17) What is the best way customers should dispose of unused or expired medications?**

There is not an easy answer to this question. In the past the advice was to flush the medication down the toilet, but this is no longer recommended because of the potential for environmental damage. At this time, the best option is to direct the customer to a local hazardous waste facility, however some waste facilities do not take medications, so there should be additional options for disposal of medications. If there is a Pharmacy take-back program in your area, you could refer a customer to that program. The last option is to throw the drugs in the trash. If you advise a customer to throw the drugs in the garbage, steps should be followed to lessen the potential for abuse of the drugs, to handle privacy issues, and to improve safety.

- Keep the medication in the original container with the childproof lid attached.
- Remove the patients' names if they are present on the container.
- Add a small amount of water to the solid drug or an absorbent material such as kitty litter, sawdust, or flour to liquid drugs before recapping.
- Adding a nontoxic spice such as cayenne pepper is another idea to make the drugs unpalatable.
- Double enclose the contained drugs in a bag or any other waste container, such as a brown paper bag, to prevent immediate identification of a drug container.

- Place medication in the trash at a time that is as close to the time of the garbage pickup as possible.

**18) How can I report a pharmacist to the Committee on Impaired Provider Practice?**

If you or a pharmacist you care about is suffering from chemical dependency, there is a solution. CIPP is readily available for help. Pharmacists in Kansas, employers, friends, or family may call the CIPP Help Line at 1-785-217-7091. CIPP is supported by a grant from the Kansas Board of Pharmacy and by donated time and services of pharmacists and pharmacy intern volunteers. All calls are confidential and are not known to the Board of Pharmacy.