WASHINGTON STATE BOARD OF PHARMACY  
Review Form  
PHARMACY TECHNICIAN TRAINING PROGRAMS

Type of approval: New Program [x]  
Re-approval/Renewal: [ ]  
Date program expired:  

Program Type:  
On-the-Job (OJT): [x]  
Formal/Academic: [ ]  
Online: [ ]

Facility/Institution name: Sy Pharmacy and Wellness  
Credential # (if applicable):  

Location Address: 3828 S Graham St Unit B, Seattle WA 98118  

Mailing Address (if different):  

Name of Program Director: Phuong Sy  
Phone Number: 206-880-7768  

Email Address for Director: Mpts320@yahoo.com

Corporate/Institution Contact Information:  

Staff Recommendation: Approved

<table>
<thead>
<tr>
<th>Requirements for all program types:</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Multicultural health awareness and education effective July 1, 2008 - New requirement RCW 43.70.615</strong></td>
<td>x</td>
<td>See page 5 of this form for complete info.</td>
</tr>
<tr>
<td>1. The training program must adequately prepare the trainee to pass an approved national pharmacy technician certification examination, such that the trainee successfully passes prior to license application.</td>
<td>x</td>
<td>WAC 246-901-060 states proof of passing an NCCA-accredited national certification exam is required for licensure (effective 1/1/09).</td>
</tr>
<tr>
<td>2. Prior to starting an OJT training program in Washington, the trainee is required to show proof of high school graduation or a high school equivalency certificate, such as a GED.</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>3. Minimum of 8 hours of instruction is designated for review of relevant Washington state pharmacy law. This must include access to and use of the WA Pharmacy Commission’s website to obtain the most current information. This is in addition to a review of all other applicable state and federal laws.</td>
<td>x</td>
<td>Out-of-state applicants must submit a completed ‘Verification of Law’ form that is signed off by a pharmacist who is licensed in WA (but does not have to reside here &amp; can have licenses in more than one state).</td>
</tr>
<tr>
<td>4. Trainee is registered with the Pharmacy Commission as a pharmacy assistant prior to starting an OJT program or an externship through an academic program in Washington state.</td>
<td>x</td>
<td>This does not apply to trainees who are in or have completed out-of-state technician training programs that are not physically located in WA.</td>
</tr>
<tr>
<td>5. Director of the program is a registered pharmacist. For WA</td>
<td>x</td>
<td>Program directors of WA state</td>
</tr>
</tbody>
</table>

Page 1
state— the director must also be a licensed preceptor. WAC 246-901-050 states that the “director shall be a pharmacist.” Pharmacists directing or supervising the training of pharmacy technicians must meet the same requirements as those of pharmacy intern preceptors. The program direction or delegates must sign off on an applicant’s application verifying successful completion of the program.

6. Specify the names, license numbers, and training experience of the Director and all program instructors. Describe training responsibilities and functions.

7. Length of the program is 12 months or less for whatever is sufficient to meet the requirements in hours and/or credits for either OJT or academic programs. Note that there are 3 types of programs that are recognized: (1) OJT programs at licensed pharmacies; (2) academic programs; & (3) online programs. NOTE: Anyone who works in a pharmacy in WA must be licensed in WA. Trainees are licensed as pharmacy assistants and can only work as technicians.

8. The training and resource materials are current, relevant and are listed by title and publication date, with a description of how they will be used.

9. The minimum passing score for a final exam other than the PTCE or ExCPT is 75%. However, an option is to use proof of passing an NCCA-accredited national technician exam as your program’s final examination.

10. The Pharmacy Commission must be notified in writing or email prior to any significant changes to the program, including change in the Director, course content, and time frames.

11. All student-specific records must either be retained on-site and kept for a minimum of 2 years, as well as be made available within 72 hours upon request.

<table>
<thead>
<tr>
<th>Additional requirements for OJT programs:</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The program consists of 520 total hours of supervised work experience which includes: didactic instruction and 12 hours of individualized instruction provided when the trainer is not working ‘on-line’. All work experience within this time frame must be supervised by pharmacists and be part of the training program requirements.</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>2. The program must also include training on job functions that are unique to a particular practice setting (eg, preparing parenteral products; extemporaneous compounding; providing long term care services; etc.). These job functions must be documented on the ancillary utilization plans submitted for review.</td>
<td>x</td>
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</tr>
</tbody>
</table>

The Board must be notified immediately of any changes in program director or delegates and must have an updated list at all times.

Eg, 520 hours for OJT programs to include didactic training & supervised work experience training at the pharmacy. 30 credits for academic, vocational, technical, online, and similar types of programs.

The passing scores for the PTCE and ExCPT are each calculated in different ways and not by percentage.

Changes in director and/or other training personnel do not require resubmission of the entire program for approval.

These records must be readily retrievable.

The requirement for 12 hours of individualized instruction is specific for pharmacies licensed in WA.

Ancillary personnel utilization plans are required of all pharmacies licensed in WA. [RCWs - 18.54.011, 18.64A; & WACs – 246-863, -369, -901].

http://www.doh.wa.gov/hsqa/Professions/Pharmacy/default
3. The utilization plans for ancillary personnel are included, namely, pharmacy assistants and technicians. [See the web document on 'Developing a Pharmacy Technician Training Program' for resources.]

<table>
<thead>
<tr>
<th>Additional requirements for academic programs:</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The academic program consists of a minimum of 2 quarters equal to 30 quarter credits (or equivalent in semester hours) and includes a mandatory externship of a minimum of 160 hours.</td>
<td></td>
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<tr>
<td>7. The vocational program consists of a minimum of 800 hours of instruction and includes a mandatory externship of a minimum of 160 hours.</td>
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<tr>
<td>3. A comprehensive training manual is provided and includes the following: list of faculty (names, licenses, training experience, &amp; program responsibilities); institutional policies &amp; procedures; description of the Advisory Committee functions &amp; list of members; complete curriculum description &amp; goals; training and testing methods; description of facilities (eg, drug preparation labs, computer labs, etc.) &amp; equipment used; description of the quality assurance program; and anything else relevant to the program and its administration and operations.</td>
<td></td>
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<tr>
<td>4. The externship is described by practice site and number of hours spent at each site, as well as description of tasks, expectations and required outcomes. Students in externships are evaluated by their externship site supervisor and their academic program instructor (based on a midterm and final clinical evaluation form, as well as the student's work reports, attendance and performance). Students evaluate their externship experience and include a self-evaluation of each experience. The program's policy and procedure for dealing with negative evaluations of students and by students is included.</td>
<td></td>
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<tr>
<td>5. Program requirements and expectations are included with a description of what constitutes misconduct and how it is handled. One example would be the criteria for expulsion from the program.</td>
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<tr>
<td>6. If the vocational or academic institution is accredited by an accreditation organization and/or licensed in a state, provide this information.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Additional requirements for online programs:</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Online programs must meet the same requirements as academic programs.</td>
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<tr>
<td>2. Program staff must be available to students on a 24-hour basis daily, with a policy &amp; procedure in places for this.</td>
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</tbody>
</table>

These plans must describe the manner in which ancillary personnel will be utilized. This requirement only applies to pharmacies licensed in WA.
ADDITIONAL REQUIREMENTS

1. All programs are approved for a 5-year period and must be submitted for renewal before their expiration date. Typically programs that are submitted for renewal do not have to be presented at a board meeting for re-approval. However, if such a program is completely revamped, a determination will be made if formal board approval will be necessary, at which time your program would be notified.

2. For OJT programs offered through pharmacies that are licensed in Washington and for academic/vocational programs based in Washington, the documented director (or delegates) of a training program must sign the ‘Director’s Certification’. The director may designate delegates who can sign this section of the application on his or her behalf, but a letter must be submitted to the board by the director of the program stating who these delegates are and the effective dates. Any changes to this document must be submitted in writing. If either a director’s or delegate’s names are not on record with the board, this will cause delays in the processing of applications.

3. For pharmacies licensed in Washington, you must maintain an on-site file containing all documentation related to your approved technician training program, including your most current approved ancillary utilization plans. This documentation will be requested as part of the inspection process.

4. Anyone who works in a pharmacy in WA must be licensed in WA. Trainees must first be licensed as pharmacy assistants and can only work as technicians-in-training when they are being trained! Trainees cannot ‘fill in’ as technicians ‘as needed’. Their work experience must be part of the approved training program. And, since proof of passing one of the NCCA-accredited national certification exams is a requirement for licensure, trainees should be preparing for an exam while they’re in training. The training program should be preparing them to take an exam. The national exam should be taken sooner rather than later, meaning that your trainee can’t be a tech-in-training indefinitely, especially after they have completed the training program. At the latest, trainees should be ready to take a national exam when they have just completed a training program.

5. Always remember to access the Board of Pharmacy website for the most current pharmacy technician or assistant applications, as the applications are periodically updated. The same applies for the most current information on Board of Pharmacy laws, rules, policies, guidelines, and the like.

6. Training programs that are reviewed as part of a specific applicant’s application process will only be approved for that applicant. Out-of-state training programs that are interested in obtaining board approval must submit all the documentation requirements listed in the review form above.

Note: ‘Formal’ academic programs include the following settings: universities; community colleges; technical colleges; technical/community colleges; vocational/technical schools. These are institutional-based programs, whereas OJT programs are employer-based.
NEW REQUIREMENT FOR ALL TRAINING PROGRAMS APPROVED in WASHINGTON

Cultural Competency Resources

The legislature finds that it shall be a priority for the state to develop the knowledge, attitudes, and practice skills of health professionals and those working with diverse populations to achieve a greater understanding of the relationship between culture and health and gender and health. By July 1, 2003, each program with a curriculum to train health professionals for employment in a profession credentialed by a disciplining authority under chapter 18.130 RCW shall integrate into the curriculum instruction in multicultural health as part of its basic education preparation curriculum.

The Washington State Department of Health (department) is pleased to announce a new resource to help health care providers serving diverse populations of patients. A law passed in 2006 requiring all health care providers licensed by the department to receive multicultural health awareness education and training. The Cultural Competency in Health Services and Care – A Guide for Health Care Providers is a tool in that effort. The law did not mandate anything more specific than this. There are no requirements for how the training is conducted, what resources should be used, and number of contact hours or credits. There are many resources for this. A sampling of resources is listed on the review form.

This guide is intended to increase the knowledge, understanding, and skills of those who provide health care in cross-cultural situations. The guide is available on our Web page. We hope it will broaden your awareness of health disparities, provide a better understanding of why cultural competency is important, and illustrate some of the resources available to you. There are several online resources that offer continuing education credits. There are also resources with important information and statistics on the populations you serve.
**Pharmacy Technician Education and Training Program Approval Form**

The complete program of study including resource materials, content of instruction, and detailed program administration must accompany this application as well as a description of the criteria for admission or selection into the training program, and details on how the program will measure the student’s proficiency.

**Application Type**
- [ ] Original
- [ ] Renewal

**Check One**
- [ ] Association
- [ ] Corporation
- [ ] Federal Government Agency
- [X] Limited Liability Company
- [ ] Limited Liability Partnership
- [ ] Municipality (City)
- [ ] Municipality (County)
- [ ] Non-Profit Corporation
- [ ] Partnership
- [ ] Public Hospital District
- [ ] Sole Proprietor
- [ ] State Government Agency
- [ ] Tribal Government Agency
- [ ] Trust

### 1. Demographic Information

<table>
<thead>
<tr>
<th>UBI #</th>
<th>Federal Tax ID (FEIN) #</th>
</tr>
</thead>
<tbody>
<tr>
<td>604-282-799</td>
<td>83-0619192</td>
</tr>
</tbody>
</table>

**Legal Owner/Operator Name**

PHUONG T. SY

**Mailing Address**

9330 57th Ave. S

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seattle</td>
<td>WA</td>
<td>98118</td>
<td>king</td>
</tr>
</tbody>
</table>

**Phone (enter 10 digit #)**

206-880-7768

**Cell (enter 10 digit #)**

206-228-8854

**Fax (enter 10 digit #)**

206-880-7767

**Legal Name of Institution or Employer-based Program**

SY Pharmacy & Wellness (PSJH PLLC)

**Physical Address**

3828 S. Graham St.

<table>
<thead>
<tr>
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<td>king</td>
</tr>
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</table>

**Facility Phone (enter 10 digit #)**

206-880-7768

**Cell (enter 10 digit #)**

206-228-8854

**Fax (enter 10 digit #)**

206-880-7767

**Mailing Address**

9330 57th Ave. S

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<td>king</td>
</tr>
</tbody>
</table>

**Email address**

mpts320@yahoo.com

**Web Address**

Sypharmacywellness.com
2. Type of Program

Please check which type of pharmacy technician education and training program or school.

☐ Formal/Academic Training  ☑ On-the-job Training at a licensed pharmacy  ☐ Vocational Training

☐ Military Training  ☐ Other, explain 

3. Contact Information

Name of Contact Person  Phuong Sy

Title  Owner/pharmacy director

Physical Address  3828 S. Graham St. Unit B

City  Seattle

State  WA

Zip Code  98118

County  King

Email Address  mpts320@yahoo.com

Phone (enter 10 digit #)  206-228-8854

4. Program Director Information

Attached additional pages if the training program uses multiple directors.

Name of Program Director  Phuong Sy

Title  Owner/pharmacy director/pic

Pharmacist Credential Number  PH60096478

Preceptor Certification Number  PH60801249

Physical Address  3828 S. Graham St. Unit B

City  Seattle

State  WA

Zip Code  98118

County  King

Email Address  mpts320@yahoo.com

Phone (enter 10 digit #)  206-228-8854

5. Additional Pharmacies and Program Directors

List all pharmacies associated with this training program.

<table>
<thead>
<tr>
<th>Pharmacy Name and Address</th>
<th>Pharmacy License #</th>
<th>Program Director</th>
<th>Pharmacist’s License #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sy Pharmacy &amp; Wellness</td>
<td>CF60877555</td>
<td>Phuong Sy</td>
<td>PH60096478</td>
</tr>
<tr>
<td>3828 S. Graham St. Unit B</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seattle, WA 98118</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DOH 690-279 May 2014
6. Signature

I certify that I have received, read, understood, and agree to comply with state laws and rules regulating education and training programs. I also certify that the information herein submitted is true to the best of my knowledge and belief.

[Signature]

Program Director/Authorized representative

Date

9/5/2019

Print Name

Phuong Sy

Owner/Pharmacy Director

Print Title

Additional Forms and Resources

Pharmacy Webpage

Guidelines to Implementation

RECEIVED

SEP 25 2019

DOH/HSQA/OCS
Technician Training Program Inclusion Criteria

Prior to entry into the Sy Pharmacy & Wellness technician training program, the candidate must meet all of the following requirements.

1. Must have a current pharmacy assistant license and be in good standing with the Washington State Pharmacy Commission/DOH
2. Must be a high school graduate or equivalent GED.
3. Must have mutual consent between the candidate and a pharmacy preceptor in good standing with the Washington State Pharmacy Commission to participate in the technician training program.
4. The basic program area shall not be less than 520 hours with not less than 12 hours of individual discussion. Each training program is not to last more than 12 months.
5. The candidate must complete 8 hours of law study to be directed by the pharmacy preceptor at this or her discretion. The study will include a minimum of 2 hours of 1:1 instruction or discussion on laws pertinent to the field of practice.
6. Upon entry into the technician training program the student will inform the pharmacy commission of his/her intent to train.

Addendum:

Any changes to the Technician Training Program will require notification to the Washington State Pharmacy Commission. Records will be maintained for a period of 5 years in the pharmacy.
Technician Training Demographic Information:

Program Director/PIC/Lead Instructor:

Phuong T Sy
License number: PH60096478
Preceptor License: PH60801249

All instruction will take place at:
Sy Pharmacy & Wellness
3828 S Graham St Unit B
Seattle, WA 98118
License Number: PHAR.CF.60877555

At the conclusion of the training program, students will have a passing score of 85% or better. The program will train no more than 2 students during the same time period and no more than 1 student on any given day. Student rosters will be updated to the Commission should there be any changes.

RECEIVED
SEP 25 2019
DOH/HSQA/OCS
Sy Pharmacy & Wellness Law Review

Sy Pharmacy & Wellness assistant and technician training program students are required to complete 8 hours of Washington State Pharmacy and Law study.

Law review will follow the Washington State College of Pharmacy Law Review program. The student will be required to complete the practice exam questions and discuss the answers with their preceptor.
I believe the following table covers two types of questions regarding the laws and regulations governing pharmacy in most states. Some cover the general structure for regulating practice in the state, but most deal with practical issues facing pharmacists. If a pharmacist or student can find the answer to most of these questions as it pertains to the law of a state in which he or she wishes to be licensed, then he or she should be prepared for a large percentage of the questions that are typically found on state pharmacy law examinations. This is not a complete list of possible questions, however. Also, some of these questions or situations are not specifically addressed by pharmacy regulations in some states.

If you have suggestions for additional questions I should add to the following list, please e-mail me at fassett@wsu.edu.

Dr. Fassett's recommendations for preparing for a state law exam

- Read completely whatever material the Board of Pharmacy provides to all applicants.
- Review a text or other material on federal law, and pay particular attention to regulations dealing with controlled substances.
- Attend, if desired, an update or review session covering recent changes in the state law.
- Attempt to find answers to at least each of the following questions as they apply to the state you are attempting to become registered in. If you find specific questions that don't seem to be covered in your state law material, check with a pharmacist from your state to see if they can tell you what the practice would be. You may also find that the state board will respond to a limited number of questions about specific situations.
In my experience, states emphasize ambulatory or community practice in their examinations, so this list does not include much concerning institutional, long-term care, home IV, nuclear pharmacy, or other specialized practices. If your state has extensive regulations for any or all of these settings, be sure to learn how the regulations differ in each setting. It may be helpful to create a comparison chart concerning at least the following areas: labeling of containers dispensed or administered to patients; controlled substance record keeping; rules for access to the pharmacy if a pharmacist is not present; special requirements to practice or supervise the practice site; type of license binding; rules for use of technicians; and special policies or procedures that must be developed.

- Talk with other pharmacists who have taken the state law examination recently and determine any areas they remember that surprised them or that they were unprepared for.

- Get a good night’s sleep prior to the exam.

My students in recent years have had above a 90% pass rate on their first attempt at law exams. If you have done well in your rotations, and have taken time to review for the law exam, you should expect to pass. So relax, and prepare to enjoy your future as a licensed pharmacist.

College of Pharmacy | Washington State University | Contact Us
P.O. Box 1495, Spókane, WA 99210-1495
<table>
<thead>
<tr>
<th>No.</th>
<th>Questions</th>
<th>Your Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>How many members serve on the Board of Pharmacy? How many are public members?</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Which of the following can prescribe legend drugs: O.D., Nurse Practitioner, Clinical Nurse Specialist, Physician's Assistant, Midwife, Nurse Midwife, Chiropractor, Naturopath, Clinical Psychologist, Physical Therapist, Respiratory Therapist, Pharmacist? May any of them purchase legend drugs for use in their practice?</td>
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<tr>
<td>3.</td>
<td>Which of the following can prescribe CSA drugs (and which classes): O.D., Nurse Practitioner, Clinical Nurse Specialist, Physician's Assistant, Midwife, Nurse Midwife, Chiropractor, Naturopath, Clinical Psychologist, Physical Therapist, Pharmacist?</td>
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<tr>
<td>4.</td>
<td>How long are prescriptions for legend drugs valid from the date issued?</td>
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<td>5.</td>
<td>Is there a maximum number of refills allowed for legend drugs? What is it?</td>
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<tr>
<td>6.</td>
<td>How long are prescriptions for each of the following valid: C-2s, C-3s, C-4s, C-5s?</td>
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<tr>
<td>7.</td>
<td>Is there a maximum number of refills allowed for C-5s? What is it? Are the number of refills for C-3s and C-4s the same as federal or less?</td>
<td></td>
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<tr>
<td>8.</td>
<td>Which of the following must be on the label of an outpatient prescription: Pt. address, Quantity, Expiration Date, Lot number, Name of drug, RPh initials, Technician initials, Pharmacy telephone number? Other items?</td>
<td></td>
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<tr>
<td>9.</td>
<td>Can the prescribed brand name be placed on the label when a generic is dispensed? If so, what wording is required?</td>
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<td>10.</td>
<td>How does a pharmacist determine whether a particular generic drug is suitable as a substitute for a brand name drug?</td>
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<td></td>
<td>Question</td>
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<tr>
<td>11</td>
<td>Must generic savings be passed on to patients? If so, what proportion, and how determined?</td>
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<tr>
<td>12</td>
<td>How can a prescriber indicate that substitution is or is not permitted?</td>
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<tr>
<td>13</td>
<td>Do patients have the option of demanding the brand name when substitution is permitted? How about patients whose prescriptions are paid for by public funds?</td>
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<tr>
<td>14</td>
<td>What documentation is required of the pharmacist when product interchange is performed?</td>
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<tr>
<td>15</td>
<td>Under what conditions, if any, is therapeutic substitution allowed?</td>
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<tr>
<td>16</td>
<td>What minimum sets of references, products, or equipment are required in all community pharmacies?</td>
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<tr>
<td>17</td>
<td>Do pharmacy hours have to be posted? Where?</td>
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<tr>
<td>18</td>
<td>Can the store be open but the pharmacy department closed? Under what requirements?</td>
<td></td>
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<tr>
<td>19</td>
<td>Do pharmacist licenses have to be on display? The original or official copy? Is a photocopy ok? Can you obscure your address on the copy displayed to the public?</td>
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</tr>
<tr>
<td>20</td>
<td>Are there any required notices that must be displayed to the public?</td>
<td></td>
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<tr>
<td>20a</td>
<td>Is a separate patient counseling area required?</td>
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</tr>
<tr>
<td>21</td>
<td>Is OBRA counseling required for Medicaid only or all patients?</td>
<td></td>
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<tr>
<td>22</td>
<td>How must the offer to counsel be made?</td>
<td></td>
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<tr>
<td>23</td>
<td>Does the offer to counsel need to be documented? Does the refusal of the offer need to be documented? How?</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Is counseling required on new prescriptions, refills, or both?</td>
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<tr>
<td>25</td>
<td>Can printed materials satisfy the counseling requirement? Under what circumstances?</td>
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<tr>
<td>26</td>
<td>What about prescriptions that are delivered or</td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Answer</td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
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<tr>
<td>27. Are there any special requirements for mail order pharmacies?</td>
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<tr>
<td>28. Under what circumstances may a pharmacist fill prescriptions written in another state?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>29. Is there any provision for dispensing an emergency refill supply of legend drugs when there are no refills left and the prescriber cannot be contacted? What is allowed/required?</td>
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<td></td>
</tr>
<tr>
<td>30. Are patient profiles required for all patients?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31. What information is required on the profile?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32. What use of the profile is required? Review prior to dispensing new Rx's? Review prior to refills?</td>
<td></td>
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</tr>
<tr>
<td>33. What is expected to be looked for during profile review?</td>
<td></td>
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<tr>
<td>34. Can a patient refuse to give certain information for the profile? If so, must the refusal be documented, and how?</td>
<td></td>
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</tr>
<tr>
<td>35. What are the requirements for use of computers to process prescriptions?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>36. What must be done if the computer system goes down?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>37. Is there any requirement for a daily printout of prescriptions that were entered into the computer? Who must sign the printout?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>38. Can a pharmacist legally repackage another pharmacy's prescription? Under what circumstances?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>40. Can legend drug prescriptions be transferred electronically (ie, by computer)? Under what circumstances and requirements?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>41. Under what circumstances are FAXed CSA prescriptions allowed?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>42. Can refills of legend drugs be transferred from one</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Answer</td>
<td></td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>--------</td>
<td></td>
</tr>
<tr>
<td>Can a pharmacy transfer prescriptions to another? Can they be transferred back?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can an intern transfer refills?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Must information regarding the transfer of legend drugs be recorded on the hard copy of the original prescription, or can it merely be recorded in the computer?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What information must be recorded by the transferring pharmacy?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What information must be placed on the original copy of the transferred prescription by the receiving pharmacy?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is it possible for pharmacies under a common ownership to share a single patient/prescription database? If so, what are the rules for prescription transfers?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How long must the pharmacy maintain the following records: original prescriptions, refill records, drug purchase records, patient profiles? Are any of these different for CSAs? If any of these can be maintained on computer, how long do they need to be maintained &quot;on-line&quot;?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Must every pharmacy have a pharmacist-in-charge?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there any special requirements to be pharmacist-in-charge?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>May a person be pharmacist-in-charge for more than one pharmacy?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>When must the Board of Pharmacy be notified of any of the following? Change of pharmacist-in-charge, change of pharmacy address, closing or sale of a pharmacy, change of pharmacy telephone number, change of an individual pharmacist's address, change of an intern's address, change of a technician's address, change of a person's name?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What must be on the label of a unit-dose or single-dose package of a legend drug dispensed for a patient in a hospital or nursing home?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What must be on the label of a multiple-dose container dispensed for a patient in a hospital?</td>
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<tr>
<td></td>
<td>nursing home?</td>
<td></td>
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<td>---</td>
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</tr>
<tr>
<td>55.</td>
<td>What is required on the label of a parenteral solution dispensed for a patient in a hospital?</td>
<td></td>
</tr>
<tr>
<td>56.</td>
<td>What is required on the label of a parenteral solution dispensed to a patient for home infusion therapy?</td>
<td></td>
</tr>
<tr>
<td>57.</td>
<td>What is required on the label of a radiopharmaceutical agent?</td>
<td></td>
</tr>
<tr>
<td>58.</td>
<td>What are special requirements, if any, to be a nuclear pharmacist?</td>
<td></td>
</tr>
<tr>
<td>59.</td>
<td>Can transfers of refill information be faxed between pharmacies?</td>
<td></td>
</tr>
<tr>
<td>60.</td>
<td>How rapidly must a pharmacy respond to a patient's request to amend the information in his or her medication record?</td>
<td></td>
</tr>
<tr>
<td>61.</td>
<td>May a pharmacy transmit a patient's prescription claim information electronically to a third party payor without the patient having provided written consent to the payor or the pharmacy?</td>
<td></td>
</tr>
<tr>
<td>62.</td>
<td>When must a pharmacy provide a copy of its Notice of Privacy Practices to a patient or other person requesting one?</td>
<td></td>
</tr>
<tr>
<td>63.</td>
<td>How can changes in the NOPP be communicated to patients?</td>
<td></td>
</tr>
<tr>
<td>64.</td>
<td>Can a non-custodial parent act on behalf of a minor to authorize disclosure of information in the patient medication record?</td>
<td></td>
</tr>
<tr>
<td>65.</td>
<td>What is the maximum amount of pseudoephedrine that can be sold CTC to an individual in a given day?</td>
<td></td>
</tr>
<tr>
<td>66.</td>
<td>May pharmacists administer drugs? By which route(s)?</td>
<td></td>
</tr>
<tr>
<td>67.</td>
<td>What are the requirements for immunizations administered by pharmacists?</td>
<td></td>
</tr>
<tr>
<td>68.</td>
<td>To what extent are collaborative practice agreements allowed?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Question</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>--------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>69</td>
<td>What is the status of carisoprodol? Tramadol?</td>
<td></td>
</tr>
<tr>
<td>70</td>
<td>Under what circumstances may a pharmacist refuse to fill a lawful prescription?</td>
<td></td>
</tr>
<tr>
<td>71</td>
<td>What is the maximum ratio of technicians to pharmacists? Of interns to pharmacists?</td>
<td></td>
</tr>
<tr>
<td>72</td>
<td>What are the requirements for storage and accountability for controlled substances in a hospital?</td>
<td></td>
</tr>
<tr>
<td>73</td>
<td>What are the requirements for storage and accountability for controlled substances in a long-term care facility?</td>
<td></td>
</tr>
<tr>
<td>74</td>
<td>Are tech-check-tech programs allowed? Under what circumstances?</td>
<td></td>
</tr>
<tr>
<td>75</td>
<td>What is the ratio of pharmacists to technicians? Does it differ by setting?</td>
<td></td>
</tr>
<tr>
<td>76</td>
<td>Can techs fill IVs? Can techs fill or check drug dispensing machines?</td>
<td></td>
</tr>
<tr>
<td>77</td>
<td>What are the requirements for remote processing of prescriptions?</td>
<td></td>
</tr>
</tbody>
</table>
Pharmacy Manager Guidelines

Introduction
In order to help you develop and retain competent Pharmacy Technicians, we have put together a training program to accomplish the following objectives:

- Provide thorough Pharmacy Technician training.
- Prepare Pharmacy Technician candidates for the initial competency exam and PTCE.
- Increase the efficiency of the pharmacy workflow and increase productivity through effective training of associates.
- Retain competent Pharmacy Technicians and reduce Technician turnover.
- Increase prescription-dispensing accuracy.
- Help with the Pharmacist workload.
- Provide more patient time and counseling time for Pharmacists.

Program Overview
- Six (6) month program
- Ten (10) Workbook chapters with exercises
- Minimum of 16 hours of classroom instruction

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<tr>
<td>Role of Pharmacy Manager</td>
<td>2</td>
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<tr>
<td>Descriptions of Training workbooks and manuals</td>
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<td>Additional components needed</td>
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<td>Completion of training</td>
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<td>State rules and regulations</td>
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<tr>
<td>In-store training responsibility</td>
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Pharmacy Technician Program Completion Affidavit

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Field Training & Development
Welcome to the Pharmacy Technician Training Program. This is a six (6) month program, which must include the following:

- Minimum of 600 hours of practical experience.
- Completion of all assigned CBT modules consisting of 8 hrs of computer instruction.
- Minimum of 16 hours of classroom training. This may be completed in four 4-hour sessions or two 8-hour sessions, or eight 2-hour sessions.
- Complete all the exercises in your Student Workbook.
- Complete 8 HOURS OF PHARMACY LAW STUDIES.
- Complete the final competency exam with a proctor present.

**NOTE:** Contact your Technician Trainer to schedule time to complete the proctored Competency Exam. Do not complete this exam unless scheduled with a proctor.

The Pharmacy Technician Training Program is a six month long. This timeline requirement for certification cannot be shortened. You may work ahead in the program CBTs and workbook, but you may not take the exam until six months after you started the program. The decision to work ahead is entirely yours based on your rate of learning. Remember, however, that the CBTs are designed to be taken in 20 to 30 minute increments; along with classes; and workbook chapters and exercises.

Some states have different requirements and limitations regarding pharmacy technician training, testing, and certification. Your trainer, using the State Pharmacy Technician Law Guide, may be required to modify the training materials AND your involvement in the training program in order to comply with your state’s rules and regulations.

**It is very important that you and your trainer follow the training and certification requirements of your state.**

Many states also have different rules and regulations restricting duties that pharmacy technicians may perform. Your trainer will discuss them with you as you progress through training to assure proper compliance. It is not possible to include all the rules and regulations of each state in this training program. For this reason, it is the responsibility of your trainer to use good judgment when adjusting the program to fit your state’s rules and regulations.

*Continued on next page*
Technician Training Program – Pharmacy 201

**Overview, Continued**

The Pharmacy Technician Program Completion Affidavit, located in your Student Workbook, will record your progress through the program.

The following signatures are required in order for Certification to be approved:

Your pharmacy manager will sign the first time giving permission for you to enter the program and verifying the date that the first CBT, *Introduction*, was completed.

Your classroom instructor MUST sign for EACH class attended. The dates for class attendance must also be listed.

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The exam proctor must sign and date the form. This signature will indicate that your exam was NOT taken in the pharmacy and the proctor was present throughout the whole exam.

Upon completion of the internal training program, the candidate will be eligible to sit for the PTCE exam.

Successful passing of this exam will be forwarded to the WA State Commission for review and pharmacy technician license credentialing.
Pharmacy Technician Training Materials

Introduction
When enrolled in the Pharmacy Technician training program, you have access to various training materials. You also have a minimum of 16 hours in a classroom setting. As you progress through the program, do not hesitate to contact your trainer with any questions that you have.

Pharmacy Technician Training Student Workbook
This workbook contains exercises that relate to the material found in the Pharmacy Technician Training CBTs. Use the workbook when viewing the CBTs to gain better understanding of the material presented. This will help to prepare you for your final assessment and your responsibilities and skills as a pharmacy technician.

Appendix B contains a practice Student Assessment to help get you ready for the Competency Exam.

Flashcards
Your pharmacy manager can order flashcards of the top 200 drugs and common SIG codes to help you prepare for your certification.

Pharmacy Technician Training CBTs
The Pharmacy Technician Training CBTs contain in-depth information regarding technician responsibilities, pharmacy guidelines and the professional practice of pharmacy. The CBTs are to be used as an aide to training; reinforcing knowledge and skills learned in the Pharmacy Technician Training Student Workbook. Each CBT corresponds to a chapter in the workbook. Make note of questions you may have for discussion during your classroom training.

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You must attend a minimum of 16 hours of classroom training to cover any state specific information as well as discuss your workbook activities and complete a progress assessment. The classroom sessions may be conducted in smaller increments of two 8 hour sessions or 4 four hour sessions, but they must total 16 hours.

In order to ensure that you have satisfactorily completed training and have reached an acceptable level of competency, all candidates for certification must complete the Pharmacy Technician Competency Exam.

The Competency Exam is taken at the end of the six month (180 days) training period. You will have two (2) hours to complete the 100 multiple choice questions with a proctor present throughout the entire exam. The minimum passing score is 75%. Be sure to have your proctor sign and date your affidavit when you complete the exam.

You are allowed three (3) attempts to pass the exam. If you fail the exam after three attempts, you will be required to repeat the entire six month program before sitting for the Competency Exam again. Contact your PDM to have the CBTs reset.

Do not open the exam file until you are ready to take the test. The process of opening the exam will register as an attempt even if you decide to exit out of the file.

NOTE: You may not take the exam in the pharmacy. If the exam is taken in the pharmacy or if there is not proctor present it will automatically count as a ‘failed’ attempt.

It is suggested that you print the certificate recording your passing score and the completion date to keep for your records.

Continued on next page
Several different training methods are used throughout the Technician Training Program.

<table>
<thead>
<tr>
<th>TRAINING METHOD</th>
<th>ACTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learning Activities</td>
<td>Read this area carefully because there is a learning activity related to this information.</td>
</tr>
<tr>
<td>Pharmacy Discussion</td>
<td>Discuss the topic with fellow associates or the Pharmacist.</td>
</tr>
<tr>
<td>CBT Referral</td>
<td>Refer to the CBT for more information on this topic.</td>
</tr>
<tr>
<td>Signature</td>
<td>Obtain a signature from a designated training associate.</td>
</tr>
<tr>
<td>Stop Sign</td>
<td>Read the “Stop Sign” instructions. This will alert you to special instructions that must be completed.</td>
</tr>
</tbody>
</table>
Chapter 1: Introduction

Introduction

An old Chinese proverb states:

"Even a journey of a thousand miles starts with the first step."

This is also true with learning! You have chosen a time honored profession in pharmacy, and are now taking the first steps on your journey.

This chapter is an overview of pharmacy and the responsibilities a pharmacy technician may be required to perform.

Objectives

Upon completion of this chapter, you will be able to:

Describe the duties of a pharmacy technician.
Explain your responsibility for pharmacy security.
Recognize the need for patient confidentiality.
Define HIPAA.
Explain the importance of proper workflow in the filling process.
Technician Training Program – Pharmacy 201 Chapter 1

Technician Responsibilities

Overview

CL RX. is committed to the education and growth of its associates. You are a valued part of our team and it is your direct efforts in your pharmacy that help drive sales.

The Certified Pharmacy Technician is the heart of our pharmacies.

As a pharmacy technician, you are part of a health care profession that dates back several centuries. The pharmacy technician has helped the Pharmacist prepare and dispense medications since the establishment of pharmacies. Over the decades, specific responsibilities have been traditionally performed by technicians such as assisting the Pharmacist, placing orders, and cashiering prescriptions.

Before you perform a task for the first time, check that you are allowed to do that task. Ask your Pharmacist or Pharmacy Supervisor to clarify any questions you may have regarding the duties you are allowed to perform.

In addition to the essential duties and responsibilities described in the official CL RX. Pharmacy Technician job description, all CL RX. Certified Technicians are expected to:

- Ensure superior service in the Pharmacy by assisting customers and operating the cash register.

Depending on your state pharmacy laws, a CL RX. Certified Pharmacy Technician may be asked to:

Accept the patient’s health and prescription information, including refill authorization from prescriber’s offices.

Retrieve the appropriate medication from inventory.

Input patient and prescription data into the computer system.

Figure 1 Typical pharmacy in late 19th century

Continued on next page

http://commons.wikimedia.org/wiki/File:Krak%C3%B3w_Muzeum_Farmacji_CMUJ.JPG retrieved 01 Oct 2009

Field Training & Development 1-2 3/25/2010
Create prescription labels and apply them on prescription containers.
Place medication in containers.
Reconstitute oral liquids.
Contact the Third party help desk to resolve insurance issues.
Complete required paperwork related to filling prescriptions.
Assist with maintaining the Pharmacy by keeping it clean and clutter free.
Place orders for pharmacy inventory from the distribution center or a supplier.
Always follow CL RX policies and procedures.
Provide superior customer service with each and every transaction.

Pharmacy Technicians have a somewhat unique position in the pharmacy. It can sometimes seem like a delicate balancing act between taking care of your duties and responsibilities and taking care of your customers. You will find as you continue on your path to Certification that customer service is an important part of your duties and responsibilities as a technician.

Accurately and efficiently completing your duties and responsibilities as a technician will allow you to provide prompt, courteous customer service.
Technician Training Program – Pharmacy 201 Chapter 1

Technician Responsibilities, Continued

Pharmacy security

CV is committed to the safety and security of all its associates. As a Pharmacy Associate, you have a responsibility to help maintain the security of the area where you work. One of the best things you can do to maintain the security of the pharmacy is to make sure the pharmacy door is closed and locked at all times. Do not think just because you are walking out on the floor for only a minute you can prop the pharmacy door open. It only takes a minute for an unauthorized person to enter the pharmacy. Never take a chance.

You also should never leave the pharmacy totally unmanned when it is open. At least one associate should be in the pharmacy at all times. The Pharmacist on duty is the individual who is ultimately responsible for the security of the pharmacy, but all associates must take an active role in keeping the pharmacy and its Associates safe and secure.

Continued on next page
Patient Confidentiality

Overview

Patient confidentiality has always been extremely important at CL Pharmacy. As a Pharmacy Associate, you have access to patient health information including patient profiles for any individual that has had a prescription filled at CL Pharmacy. This information is confidential and protected by several federal and state laws.

Patient privacy is covered in the HIPAA Privacy Training for the Pharmacy Workplace. CBT and Module 1, Introduction, the first CBT in the Pharmacy Technician Training series. Make sure you have completed these CBTs before continuing with this Workbook.

Confidentiality

There are several things you can do to protect the privacy of your patients.

Only discuss patient information in the course of providing a health care service.

When discussing a patient issue with other Pharmacy Associates, be mindful of the volume of your voice. You never know when someone else may overhear your

If accessing information from the register, make sure the monitor cannot be seen by patients.

Drive thru speaker volume should be set as low as possible to avoid others from hearing.

Follow confidential trash policies and procedures.

Make sure the input monitor and other monitors/registers are turned away from patients' view or placed on machine view.

Use caution when paging patients to the pharmacy.

Continued on next page
Technician Training Program – Pharmacy 201 Chapter 1

Patient Confidentiality, Continued

HIPAA

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) has had a huge impact on the business of pharmacy. The effects are covered in the HIPAA CBT and will be further discussed during your classroom training.

This section will provide you with a little background as to why HIPAA was enacted and hopefully answer any questions you have still have.

Background

HIPAA was enacted on August 21, 1996. Part of the Act required the Secretary of Health and Human Services (HHS) to publicize standards for the electronic and paper exchange, privacy and security of health information.

HIPAA concerns

The HIPAA Privacy Rule (the Rule) establishes national standards to protect individuals' medical records and other personal health information. This protection applies to health plans, health care clearinghouses, and those health care providers, such as pharmacies, that conduct certain health care transactions.

Be aware of your voice level.

The Rule requires appropriate safeguards to protect the privacy of personal health information (like confidential trash), and sets limits and conditions on the uses and disclosures that may be made of such information without patient authorization.

Know your pharmacy trash

Do's and Don'ts

The Rule also gives patients rights over their health information, including rights to examine and obtain a copy of their health records, and to request corrections.

Field Training & Development 1-6 3/25/2010
Workflow

Overview

One of the most important aspects to maintaining a safe and efficient pharmacy is proper workflow. Workflow is the filling of prescriptions through a defined process with responsibilities divided amongst multiple members of a pharmacy team.

Think of yourself and your fellow pharmacy associates as a team - team work! Working together as a team will provide an efficient, safe, and enjoyable working environment. Proper workflow and working together as a team can help prevent most pharmacy issues.

Think of workflow as a linear process, no matter what pharmacy layout. It moves in one direction. This creates an environment for safe and efficient filling of prescriptions.

Workflow can be divided into six specific steps or stages. Each specific stage has its own processes. Even if one person completes multiple steps, always think of these workflow stages during the filling process one step at a time.

The six stages of workflow are represented below:

![Workflow process diagram]

Figure 3 Linear workflow process
Exercise 1: List five (5) essential duties of a pharmacy technician:

1. ________________
2. ________________
3. ________________
4. ________________
5. ________________

Continued on next page
Learning Activities, Continued

Exercise 2: Duties technicians cannot perform

List three (3) duties in the pharmacy that technicians cannot perform:

1. A tech cannot do the initial review to check off prescriptions.

2. Give medical advice to customers.

3. Administer shots to patients.

Continued on next page
Learning Activities, Continued

Exercise 3: Acronyms

Write in the meanings of the acronym provided.

1. HIPAA **The Health Insurance Portability and Accountability Act**
2. DEA **Drug Enforcement Administration**
3. OBRA
4. CBT **Computer Based Training**
5. FDA **The Food and Drug Administration**
6. RACS
7. NPI **National Provider Identifier for Health Care Providers**
8. DPC **Documenting Pick Up of medication**
9. RAP
10. PDM **Pharmacy District Manager**

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Continued on next page
Exercise 4: Getting to know your pharmacy

Locate each of the following items in your pharmacy and make a notation of where you find each item. Work with your pharmacist if you need help finding any items.

<table>
<thead>
<tr>
<th>ITEM</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmacy Law Guide</td>
<td></td>
</tr>
<tr>
<td>&quot;Bad Pill&quot; Poster</td>
<td></td>
</tr>
<tr>
<td>Monograph Receipt Paper</td>
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</tr>
<tr>
<td>FlavoRx® Display</td>
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<tr>
<td>McKesson Invoices</td>
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<tr>
<td>Pharmacy Operations Binder</td>
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<tr>
<td>Controlled Substance Record Keeping Box</td>
<td></td>
</tr>
<tr>
<td>Ointment Jars</td>
<td></td>
</tr>
<tr>
<td>Pharmacy Returns Manual</td>
<td></td>
</tr>
<tr>
<td>Location of MedGuides</td>
<td></td>
</tr>
<tr>
<td>eRx Policy</td>
<td></td>
</tr>
<tr>
<td>&quot;Access to Prescription Area&quot;</td>
<td></td>
</tr>
<tr>
<td>Item number for 13 dram vials</td>
<td></td>
</tr>
<tr>
<td>Latest CSI Score</td>
<td></td>
</tr>
<tr>
<td>Health Conditions</td>
<td></td>
</tr>
<tr>
<td>Platform Plan-o-Gram</td>
<td></td>
</tr>
<tr>
<td>Rx Labels for offline dispensing</td>
<td></td>
</tr>
</tbody>
</table>

Continued on next page
Exercise 5: Workflow

Draw the approximate layout of your pharmacy in the space provided below. Label each area of your pharmacy, such as register, drug storage, sink, drop off, etc. Include the functions that are performed in each area. Indicate the proper Workflow to be used in your pharmacy with arrows indicating the flow.
Chapter 2: Basic Pharmacology

Introduction
As a Certified Technician, you will need to have a basic understanding of disease states and the medications used to treat those diseases. The tables, charts, and exercises presented in this Chapter are tools to help you achieve this understanding.

Objectives
Upon completion of this chapter, you will be able to:

- Define basic terms related to pharmacology and pharmacokinetics.
- List common disease states and medications used to treat the disease states.
- Explain terms associated with antibiotics and list common antibiotics.
- Summarize how contraceptive medications work and list some common oral contraceptive medications.
- Describe common side effects and uses of corticosteroids.
- List common corticosteroids.
Disease State Management

Basic Pharmacology, provides a general overview of pharmacology and the medications used in disease state management.

Disease state management can be viewed as a grouping of four areas of pharmacy that in combination, are used to treat a specific disease. These areas are: pharmacokinetics, pharmacology, therapeutics, and toxicology. This chapter will start with a brief introduction to these four areas of pharmacy and then discuss some common disease states.

Pharmacokinetics

Drugs are used for a specific intended action which is dependent on its absorption, distribution, metabolism, and excretion (referred to as pharmacokinetics).

Absorption, distribution, metabolism and excretion are all dynamic processes; meaning they all take place at the same time

Things like patient's age, weight, gender, race, genetic factors, and health conditions can affect the way the body processes a drug. In addition, food and other drugs also have an effect on the dynamic processes of pharmacokinetics. You can begin to see the challenges that can arise in treating disease. However, even with all of these factors, it is possible to promote appropriate drug therapy with careful patient monitoring by health care professionals.

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Pharmacology

Pharmacology is the study of drugs and the effects they exert on the body. It relates to the cellular reactions and interactions between the chemical structures of the body and those of the drug. Pharmacology also includes the study of toxicology, which is defined below.

Toxicology

Toxicology is the study of adverse or harmful effects of drugs on the body. When an effect becomes harmful it is referred to as toxic. Toxicities can be very dangerous and could result in death.

Many things can relate to the toxicity of a drug including dose, disease states, and genetic defects. All medications are toxic at a high enough dose, so toxicology is extremely important in establishing a maximum safe dose for medications.

Therapeutics

Therapeutics is the study of disease states and the medications used to treat those disease states. Therapeutics is more involved with the diagnosis and treatment of the patient and less involved with the mechanism of drug actions.
Hypertension

Introduction

High blood pressure is called hypertension and is the most common disease state in the United States.

It is called the "silent killer" because most Americans do not know they have it.

Hypertension directly increases the risk of coronary heart disease, heart attacks, strokes, and a whole host of other issues.

Each time the heart beats, blood is pumped through the arteries and veins and creates a pressure in them. This is called blood pressure. Without blood circulation, oxygen and food would not get to the vital organs. Blood is also how our bodies deliver drugs to their sites of action.

Blood pressure is always measured as systolic pressure over diastolic pressure. The average adult blood pressure is 120/80. This would be read as 120 over 80.

For a detailed description of hypertension, the risk factors for hypertension, and the effects of untreated hypertension, refer to your classroom instructor.

One in three Americans has elevated blood pressure.

The following table is from the American Heart Association website listing blood pressure and follow-up recommendations.

<table>
<thead>
<tr>
<th>Blood Pressure Category</th>
<th>Systolic (mm Hg)</th>
<th>Diastolic (mm Hg)</th>
<th>Follow-up Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal</td>
<td>Less than 120</td>
<td>Less than 80</td>
<td>Per physician’s orders</td>
</tr>
<tr>
<td>Pre-hypertension</td>
<td>120-139</td>
<td>Or 80-89</td>
<td>Per physician’s orders</td>
</tr>
<tr>
<td>Stage 1 hypertension</td>
<td>140-159</td>
<td>Or 90-99</td>
<td>Monthly until goal reached, then every 3 to 6 months</td>
</tr>
<tr>
<td>Stage 2 hypertension</td>
<td>160 or higher</td>
<td>Or 100 or higher</td>
<td>Monthly until goal reached, then every 3 to 6 months</td>
</tr>
</tbody>
</table>

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