

Drug Dispensing

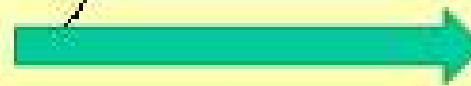


„Pharmacy“

is a **health profession** concerned with:

- discovery,
- development,
- production,
- distribution,
- dispensing

of drugs



**Drug consumption
sphere,
Public /hospital
pharmacies**

Drug dispensing:

the preparation, packaging,
labeling, record keeping, and
transfer of a

prescription or OTC drug

to a patient or an
intermediary, who is
responsible for
administration of the drug.

„Dispensing“

Dispensing is often regulated by governments into three categories: 

Over-the-counter (OTC) medications, which are available in pharmacies without special restrictions,

Behind-the-counter (BTC), which are dispensed by a pharmacist without needing a doctor's prescription, and

Prescription only medicines (POM), which must be prescribed by a licensed medical professional, usually a physician.

POM

**Dispensing is the core function of
pharmaceutical care.**

**It is a complex process
unequivocally under the
supervision of the
pharmacist.**

**Dispensing process
is inherently risky
and dispensing errors
are inevitable occurrences in
community and hospital
pharmacies across the world.**

**Dispensing errors are a major concern for the
pharmacy profession.**

Dispensing Pharmacists,

are healthcare professionals who practice in pharmacy, the field of health sciences focusing on safe and effective medication use.

The role of the pharmacist has shifted from the classical "lick, stick, and pour" dispensary role (that is, "lick & stick the labels, count the pills & pour liquids"), **to** **being an integrated member of the health care team directly involved in patient care.**

Pharmacists interpret and communicate this specialized knowledge to patients, physicians, and other health care providers.

The most common pharmacist positions are:

that of a *community pharmacist* (also referred to as a *retail pharmacist, first-line pharmacist* ,

or a *hospital pharmacist*,

where they instruct and counsel on the proper use and adverse effects of medically prescribed drugs and medicines.

In most countries, the profession of Pharmacy is subject to professional regulation.

Depending on the legal scope of practice, pharmacists may contribute to prescribing (also referred to as "pharmacist prescriber") and administering certain medications in some jurisdictions.

TEN KEY DUTIES AND RESPONSIBILITIES
FOR DISPENSING:

1. To dispense medication as stated on prescriptions, maintaining accurate dispensing records and ensuring that the medication is labelled with the correct drug name, strength, quantity, directions for use, patient's name and includes any additional required information.

2. To adhere to practice policies and procedures for dispensing medicines, in particular those relating to expensive and controlled drugs.

3. Provide a second-check on all medication issued.

4. Maintain minimum stock levels of medicines, checking expiry dates and storage conditions.

5. Place accurate and timely orders with suppliers and accept deliveries of medication, adding them to the computerised stock control records.

TEN KEY DUTIES AND RESPONSIBILITIES **FOR DISPENSING:**

6. Maintain dispensary equipment, ensuring it is clean, accurate and in a good state of repair.

7. Dispensing of patient dosette boxes and associated administration.

8. At all times maintain absolute confidentiality.

9. Be pro-active in developing new initiatives in the dispensary.

10. Respond to queries from patients, pharmacies, hospitals, nursing homes etc, whether by face-to-face contact, telephone, email, fax etc.

Counselling patients about prescribed medicines.

Patients have the right to expect that the pharmacist will counsel them privately about their medicines, but the patient reserves the right not to be counselled.

The pharmacist should make every effort to counsel, or to offer to counsel, the patient whenever a medicine is supplied.

Patient counselling is the final checking process to ensure the correct medicine is supplied to the correct patient.

More detailed advice is especially important when certain drugs are supplied and in certain circumstances.

Examples include:

- the taking of medicines that can sedate
- the taking of medicines that have a narrow therapeutic index
- unusual dose forms (e.g. fentanyl patches)
- unusual frequency of use (e.g. alendronate, methotrexate)
- when a new medicine is prescribed
- when there is a change in the dose or frequency of administration
- when the brand of medicine has changed

- when the medicine is a controlled drug
- with each supply of medicine for which there are valid reasons for regular reinforcement of information (e.g. teratogenics or cytotoxics; major contraindications; special patient needs, such as language preference, vision, hearing or cognitive impairment, or cultural issues)
- at regular intervals (e.g. six monthly) for medicines used for long-term therapy
- when the medicine is for a child;
- if the patient is taking many medicines
- when there is an acute illness or event (e.g. hospital admission).

There exist and are accepted more dispensing systems in Pharmacy.

For instance:

unit-dose system, a system of drug distribution in which a portable cart containing a drawer for each patient's medications is prepared by the hospital pharmacy with a 24-hour supply of the medications.

In unit-dose dispensing, medication is dispensed in a package that is ready to administer to the patient.² It can be used for medications administered by any route, but oral, parenteral, and respiratory routes are especially common. When unit-dose dispensing first began, hospital pharmacies equipped themselves with machines that packaged and labeled tablets and capsules, one pill per package. They also purchased equipment for packaging liquids in unit-doses. As the popularity of this packaging increased, the pharmaceutical industry began prepackaging pills in unit-of-use form. Many hospitals now purchase prepackaged unit-dose medications. However, it is still common for hospital pharmacies to purchase bulk supplies of tablets and capsules from manufacturers and repackage them in the central pharmacy into unit-dose packages.² It is important to note that hospitals vary in the proportion of their wards covered by a unit-dose system.

There are many variations of unit-dose dispensing. As just one example, when physicians write orders for inpatients, these orders are sent to the central pharmacy (by pharmacists, nurses, other personnel, or computer). Pharmacists verify these orders and technicians place drugs in unit-dose carts. The carts have drawers in which each patient's medications are placed by pharmacy technicians—one drawer for each patient. The drawers are labeled with the patient's name, ward, room, and bed number. Before the carts are transported to the wards, pharmacists check each drawer's medications for accuracy. Sections of each cart containing all medication drawers for an entire nursing unit often slide out and can be inserted into wheeled medication carts used by nurses during their medication administration cycles. A medication administration recording form sits on top of the cart and is used by the nurse to check-off and initial the time of each administration of each medication. The next day, the carts are retrieved from the wards and replaced by a fresh and updated medication supply. Medications that have been returned to the central pharmacy are credited to the patient's account.

Unit dose dispensing.

A unit dose is a method of preparing and packaging medications into single-use, pre-measured containers that provide exactly one dose. The unit dose can be packaged in a vial, a blister pack, or a pre-filled syringe.

Many hospitals and health care facilities use unit dose packaging to reduce the risk of medication errors. Using this system offers many benefits and very few drawbacks for both medical personnel and patients.

One of the common issues

that **care givers** have to deal
with on a daily basis,

is the need to dispense their care recipient's
medication in a safe and timely fashion.

Physicians who **dispense drugs**.

There's a bit of a trend in the last few years for more and more doctors to dispense medications directly to patients rather than send them to their pharmacist with prescriptions in hand.

A number of companies sell turnkey setups that resemble a mini-pharmacy, with prepackaged medications, office storage facilities and tracking software.

Doctors see dispensing as a way to offset declining reimbursements by creating an ancillary revenue source.

While physician dispensing is permitted in most states, it is often carefully regulated and restricted to samples or conditions of immediate need.

Some states require dispensing doctors to have a special permit or license.

Seven Stars Pharmacist

The identified roles and responsibilities are:

- 1. Care giver.
- 2. Decision maker.
- 3. Communicator.
- 4. Leader.
- 5. Manager.
- 6. Life-long learner.
- 7. Teacher.

Thanks
for your attention.