



Electronic Prescribing

After consulting with stakeholders, Council has approved and released a policy statement and guidelines for members.

Effective July 1, 2009, members are allowed to accept electronic prescriptions that meet the requirements of our recently released policy statement. The policy aims to describe when electronic prescribing that is safer and more secure becomes acceptable for members. The release coincides with the advent of electronic medical record (EMR) systems for physicians' offices and the availability of a "print prescription" functionality within the Pharmaceutical Information Program (PIP) system to assist members with record keeping. This means that electronic prescriptions issued within the PIP system are acceptable and eliminates the step where the physician prints the prescription, signs it and hands it to the patient.

In December 2007, Health Canada released a policy that stated, in part, "... After further review, Health Canada has concluded that there are currently no regulatory impediments to moving ahead with electronically generated and transmitted prescriptions and that these are permissible to the extent that they achieve the same objectives as written prescriptions ...". Relying upon this policy, and based upon our interpretation of *The Pharmacy Act, 1996* and our Bylaws and Standards, we have determined that the electronic transmission of a prescription for any drug is equivalent to the written format and is acceptable, provided that:

- Pharmacists are able to fulfill their professional obligations to verify the authenticity of the prescription; and,

- The principles governing shared onus between the prescriber and the pharmacist for patient confidentiality, authenticity, validity, security and patient choice of pharmacy as described below are met to ensure accountability for the authenticity of the electronically transmitted prescription, as follows:

Principle #1

The process must maintain patient confidentiality.

Principle #2

The process must be able to verify the authenticity of the prescription; that is, authenticating the prescriber initiating the document.

Principle #3

The accuracy of the prescription must be able to be validated, including a mechanism to prevent forgeries.

Principle #4

The process must incorporate a mechanism to prevent diversion, so that the prescription authorization cannot be transmitted to more than one pharmacy.

Principle #5

Patient choice must be protected; that is, the patient must determine the pharmacy to receive the prescription authority.

Electronically transmitted prescriptions must contain the signature of the prescriber as defined by Health Canada in their policy. A prescription with an electronic signature of the prescriber represents authority for the pharmacist to dispense the drug. Without limiting the generality of the foregoing, examples of acceptable electronic signatures are:

- Original signature of the physician on the facsimile transmitted to the pharmacy;
- A digital reproduction of the physician's original signature where the physician is the only person authorized to generate his/her signature in the electronic device reproducing his/her signature;
- A code or identifier that uniquely identifies that particular physician where the physician is the only person authorized to generate his/her code from an electronic device designed for this purpose; or,
- The name of the physician is associated with an order for a drug issued within a secure electronic environment or network to which that physician has secure access.

Our position is that the onus is upon the physician to ensure that adequate security measures are in place to protect the electronic signature from unauthorized use. When the signature of the physician is unknown to the pharmacist, or where the pharmacist is concerned with the authenticity of the prescription or physician, the pharmacist must verify the prescription with the physician.

We have further concluded that a prescription produced in a secure electronic environment or network to which both the prescriber and the pharmacist have secure access, such as the PIP system, meets the principles in this document and represents sufficient authority for the pharmacist to dispense the prescription. In this case, even though the signature may not be affixed to the prescription itself, it is deemed to
continued on page 3

SCP Council 2008-09

Division 1
Jodie Simes, Fort Qu'Appelle
(term expires June 30, 2009)

Division 2
Joan Bobyn, Saskatoon
(term expires June 30, 2010)

Division 3
Randy Wiser, Prince Albert
(term expires June 30, 2009)
President-Elect

Division 4
Chris Hrudka, Saskatoon
(term expires June 30, 2010)
Vice-President

Division 5
George Furneaux, Regina
(term expires June 30, 2009)
President

Division 6
Joe Carroll, Moose Jaw
(term expires June 30, 2010)

Division 7
Debbie McCulloch, Rosetown
(term expires June 30, 2009)

Division 8
Janet Harding, Saskatoon
(term expires June 30, 2010)

Past President
Bev Allen, Saskatoon

Ex Officio
Dean Dennis Gorecki
College of Pharmacy and Nutrition,
Saskatoon

Public
Ken Hutchinson, Fort Qu'Appelle

Student Observer
Haley Gill

SCP Staff

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Assistant Registrar

Pat Guillemin,
Administrative Assistant

Ray Joubert,
Registrar

Cheryl Klein,
Senior Administrative Assistant

Reola Mathieu,
Receptionist

Heather Neirinck,
Administrative Assistant

Lori Postnikoff,
Field Officer

Jeannette Sandiford,
Contract Field Officer

Audrey Solie,
Administrative Assistant

Council Highlights – May 1, 2009

- New Council for the 2009-2010 membership year is:

Division 1 – VACANT

Division 2 – Joan Bobyn, Vice-President, Saskatoon

Division 3 – Randy Wiser, President, Prince Albert

Division 4 – Christine Hrudka, President-Elect, Saskatoon

Division 5 – Spiro Kolitsas, Regina

Division 6 – Joe Carroll, Moose Jaw

Division 7 – VACANT

Division 8 – Janet Harding, Saskatoon

Past-President – George Furneaux, Regina

Ex-Officio – Dennis Gorecki, Dean, College of Pharmacy and Nutrition

Public Members: Ken Hutchinson, Fort Qu'Appelle

Barbara-Ann de Haan, Biggar

Student Rep – Brent Goeres, Senior Stick

Regarding the vacancies in Divisions 1 and 7, memos will be sent to members in these divisions asking for volunteers. Pursuant to Bylaw 1.1.16, Council may appoint eligible members from the division, or failing that, from the membership at large.

- Funds from the Alternative Reimbursement Fund have been transferred to the Pharmacists' Association of Saskatchewan.
- Council approved the following guideline as recommended by the Professional Practice Committee:

Prescriptions not picked up within seven (7) days shall necessitate that the patient be contacted and if the medication is no longer required the prescription is to be returned to inventory (pharmacy in the case of a depot delivery) and it is the responsibility of the pharmacist to ensure that the prescription information is corrected on the Pharmaceutical Information Program (PIP) system and reversals to the DP&EBB, NIHB and other 3rd party payers are completed.

The Committee's concern is that in an emergency, health care professionals base decisions on the information available via the PIP Viewer. It is imperative that that the information be as reliable and accurate as possible.

As a guideline, the pharmacist retains the ability to use his professional judgement in each situation, but as a "steward of the medication" is encouraged to follow this statement.

- The Professional Practice Committee has updated the SaskTech document to reflect the current scope of practice of pharmacy assistants. A second review will be conducted as we move closer to regulation of pharmacy technicians.
- A template for Collaborative Practice Agreements has been approved by Council. SCP will be contacting PAS regarding malpractice insurance coverage for pharmacists entering into such a practice.
- The College bylaws have been reformatted to separate the Administrative Bylaws and the Regulatory Bylaws as approved by Council. These will come into effect once they have been approved by the Minister of Health and published in the Saskatchewan Gazette. Watch for details in an upcoming issue.
- HISC has finalized upgrades to the PIP Viewer regarding E-Prescribing. See article on front page regarding the policy statement and guidelines for pharmacists.
- In follow up to the article in the March issue of the Newsletter, the "Guidelines Regarding Vaccine Storage, Handling & Transport" document is now available on the website at: http://napra.ca/Content_Files/Files/Guidelines_Re_Vaccine_Storage_Handling_Transport.pdf

From the "Field"

Faxed Prescriptions

Recently we have been informed that physician offices may be re-using prescriptions which were previously faxed by changing the date on the prescription. This practice is in violation of the "Operational Guidelines — Facsimile Transmission of Prescriptions".

From the guidelines:

"The electronic transmission of a prescription for any drug is acceptable provided that the principles governing shared onus between the prescriber and pharmacist for patient confidentiality, authenticity, validity, security, and patient choice of pharmacy are met. It has been determined that the electronic transmission of a prescription is equivalent to the written format with the facsimile representing the original prescription".

And:

"(9) After transmission, the prescriber or their agent must ensure that the original written prescription has been invalidated, securely filed, retained for a period of at least two years, be available for inspection, and not transmitted elsewhere at another time."The onus is on the pharmacist to ensure the facsimile of a prescription is valid and accurate. Any concerns should be discussed with the physician.

Recent Increase in Forgeries

In the past year, the College has had an increasing number of reports of forged prescriptions. Many of these prescriptions have been filled by pharmacists and only later discovered to be forgeries.

It is very important that pharmacists take all necessary steps to ensure that authenticity of a prescription. Forgeries often contain different colored pens, misspelled drug names, incorrect or unusual directions (such as 2x day instead of BID). Individuals forging prescriptions have added a narcotic to the prescription, have altered the strength or the quantity of the prescription, or removed the Schedule F Drug and replaced it with the narcotic prescription, then faxed that prescription to the pharmacy. Individuals presenting forged prescriptions may be overly attentive to your workflow, watching you closely and/or being overly friendly or talkative. They may be in a hurry and try to rush you through the filling process or use other techniques to distract you from carefully reviewing the prescription.

If you are unsure of the authenticity or accuracy of any prescription for narcotics, controlled drugs, benzodiazepine or targeted substances, the onus is on you to verify the prescription with the practitioner as per The Narcotic Control Regulations and Part G of The Food and Drug Regulations.

All of the rules of the Prescription Review Program should be followed to ensure the accuracy of the prescription. In almost all instances of a forged prescription, some Prescription Review Program requirements were absent from the prescription.

Electronic Prescribing continued from page 1

be associated with the prescription because the physician can only access the system that generates the prescription via secure means attributed to that particular physician. As the Saskatchewan Medical Association has assured us that acceptable EMRs can be integrated to communicate with PIP, pharmacists may dispense prescriptions from the electronic prescription generated by the physician in PIP either directly or through the EMR. The pharmacist

is left to determine if other electronic prescribing methods meet our policy.

Members are encouraged to read the entire policy. We recently sent it to all community and hospital pharmacy managers. It is also available at the Reference Manual section of our home page at the NAPRA website: <http://napra.ca/pages/skPharmacy-ReferenceManual/default.aspx> by selecting "Electronic Prescriptions".

New Dean of Pharmacy and Nutrition, University of Saskatchewan

The University of Saskatchewan Board of Governors has approved the appointment of Dr. David Hill as the new Dean of the College of Pharmacy and Nutrition. Dr. Hill will assume his role as Dean, effective August 1, 2009, replacing Dean Gorecki, who has served in this capacity since 1998.

David Hill received his education in pharmacy and business administration from the University of British Columbia. He also earned his Ed.D. from Brigham Young University. He is a Fellow of the Canadian Society of Hospital Pharmacists. Dr. Hill has been a hospital pharmacy director at two major hospitals in British Columbia. In 1988, he accepted an appointment in the Faculty of Pharmaceutical Sciences at the University of British Columbia and served as Associate Dean for External Affairs from 1993 to 2002. From 2002 to 2006, he served as Associate Dean for Administration and Clinical affairs, and taught and conducted research in pharmacy practice, pharmaceutical policy and bioethics at the School of Pharmacy at the University of Colorado at Denver and Health Sciences Center. Dr. Hill was appointed executive director of the Canadian Council for Accreditation of Pharmacy Programs in 2006. He has been active in many academic, professional and voluntary organizations in Canada. Dr. Hill chairs the Blueprint for Pharmacy Task Force, a multi-organizational collaboration of national and provincial pharmacy organizations creating a strategic action plan for the future of the pharmacy profession in Canada.

PAS Conference 2009

SCP Awards Evening Friday, May 1, 2009

The Pharmacists' Association of Saskatchewan's 8th Annual Conference was held at the Sheraton Cavalier Hotel in Saskatoon, May 1-3, 2009. The Welcome Reception was held Friday evening at which time we celebrated with the Class of 1984 as they commemorated their 25th anniversary of their pharmacy graduation and with the Class of 1959 as we recognized their 50th anniversary in the profession.

The 25 year grads were introduced by their classmate, Tanya Wur of Saskatoon. There were 8 members of the Class of '84 in attendance.

Members of the Class of '59 were recognized for their achievements with Registrar Joubert reading their biographies as President Furneaux presented each member of the class with a SCP 50 year pin and

their anniversary certificates. John Bachynsky of Edmonton, Alberta replied on behalf of the class. Of the 11 classmates in attendance, four are still practising today.

In attendance at this year's awards evening were two members of the Class of 1949 who were celebrating their 60th Anniversary: Mrs. Betty Riddell and Mr. Harold Anderson.

SCP 98th Annual General Meeting

President George Furneaux opened the 98th Annual General Meeting of the Saskatchewan College of Pharmacists on Saturday, May 2, 2009. President Furneaux thanked the retiring members of Council for their efforts over the past years and then announced the new Council beginning on July 1, 2009.

Attendees stood for a moment of silent tribute to those members who have passed away over the past year:

Walter "Wally" Boshuck, Allison Broenink (nee Hill), Carrol Franklin Chlopan, Allan McCoy Goodeve, Michael Horlick, and Vernon Nelson Miner.

The following members were approved for the designation of Member Emeritus at the 98th Annual General Meeting: Albert Broudy, Donovan Einarson, Margaret Joan Langstaff, Margaret Sim, and Elwood Salter.

President's Luncheon

The last official function of the 2009 Conference was the President's Luncheon. Host President George Furneaux welcomed everyone to the event. This function is the opportunity for the College to recognize members for their outstanding service to the Saskatchewan College of Pharmacists:

Receiving the Certificate of Recognition:

- Upon retirement from the Complaints Committee – Leanne Cameron and Scott Livingstone
- Upon retirement from the University of Regina Senate where she has sat on behalf of the College – Janet Bradshaw
- Upon retirement from the Saskatchewan College of Pharmacists Council – Bev Allen, Debbie McCulloch and Dennis Gorecki

Receiving the Award of Merit:

- Upon retirement from the Council and the Complaints Committee as a public member – Joseph Jeerakathil.

President Furneaux presented his farewell address in which he shared some accomplishments of the College from the past year and wished President-Elect Randy Wiser all the best.

Registrar Joubert then proceeded with the presidential installation ceremony of Randy Wiser. This will be Randy's second term as President of the College, having formerly occupied the office for the 2003-2004 membership year.



Class of 1984 (left to right) – Back: Brad Hayes, Celina Colegrave, Pat Marsh, Kris Joie, Cindy Klimek. Front: Toby Gillen, Tanya Wur, Rick Cheetham.



Class of 1959 (left to right) – Back: Denis Burke, Ivan Silsly, Myron Kowalyk, Ron Heeg, John Bachynsky, Evangeline Enns, Al Meyer. Front: Frank Abbott, Elaine Tanner, Orville Wagner and Harvey Sauder.

Convocation Luncheon

The Saskatchewan College of Pharmacists hosted the 53rd Annual Convocation Ceremony Luncheon May 27, 2009 at TCU Place, Saskatoon. This year there were 196 attendees registered for the luncheon.

Following the lunch, the program got underway with President Furneaux welcoming those in attendance and introducing invited guests. He then offered his personal congratulations to the grads and spoke on behalf of the Saskatchewan College of Pharmacists. Greetings were also brought from Mr. Harold Just, Board Chair of the Pharmacists' Association of Saskatchewan, and from Ms. Dianne Donnan, President, the National Association of Pharmacy Regulatory Authorities (NAPRA), who was in attendance with Ms. Carole Bouchard, Executive Director of NAPRA.



Ms. Tara Dawn Hindley accepting congratulations from SCP President George Furneaux .



President George Furneaux congratulates Ms. Melissa Ann Viker.

President-elect Randy Wiser presented the SCP Awards to: Ms. Tara Dawn Hindley, the Saskatchewan College of Pharmacists' Gold Medal and the Robert Martin Prize

as the Most Distinguished Graduate and to Ms. Melissa Ann Viker, the Saskatchewan College of Pharmacists' Campbell Prize.

Recording Extra Internship Hours Worked Outside of SPEP Rotation

Tracking Non-SPEP Hours

The Saskatchewan College of Pharmacists can track non-SPEP hours worked if a log is provided. SCP accepts the hours worked after registration as an intern.

An Intern Hours Report form is available from SCP. Following the proper completion of this form, which has been signed by the intern and the preceptor, SCP will enter the total hours into the system and update the intern's records. Please do not send SCP the average hours worked per week. SCP requires the actual hours. For example, worked 20 hours per week (this is the minimum number of hours allowed) for two weeks; 35 hours per week for one week; 40 hours per week (this is the maximum number of hours allowed) for six weeks. SCP will calculate your hours by multiplying the number of hours worked

per week times the number of hours worked. Any vacation time or sick leave during this time must be reported. Do not include your SPEP hours on this form.

The following are responses to questions commonly asked regarding how to record any extra hours worked in a pharmacy beyond (outside the designated period) the SPEP rotation:

Q What about hours worked during the same 4 or 5 week rotation (5 days per week at their assigned rotation and then working the other 2 days at a place of employment)?

RESPONSE:

From the Bylaws: "5.2 b) (i) To receive internship credit, the intern shall work a minimum of 20 hours per week and a maximum of 40 hours per week, of which at least one half

of the hours worked per week must be served in the dispensary" [Note: An intern cannot receive 'credit' for more than 40 hours per week.]

Q What about recording credit for weeks worked other than the SPEP rotations in the summer (i.e., 'credit' for the other three months of the summer)?

RESPONSE:

Students should contact SCP (584-2292) and request an "Internship Hours Report". The information provided on these reports is recorded in the interns' file so that should they decide to register in a province requiring proof of internship outside the University SPEP program, then SCP can provide that information on the Certificate of Standing to the provincial regulatory authority.

Are you Mentoring or Employing a Pharmacy Student Intern?

Each year, the College of Pharmacy and Nutrition welcomes pharmacists from across the province to participate as instructors/preceptors in the Structured Practice Experiences Program (SPEP). Your commitment to the program is vital to the training and development of future pharmacists. These practice experiences serve as a bridge between students' academic training and actual practice, and to ensure that each student develops the professional skills and abilities, ethical judgment and technical proficiency necessary for entry into the pharmacy profession as a competent pharmacist.

To participate in SPEP, all students must be registered as interns with the Saskatchewan College of Pharmacists (SCP) before the end of their second year in the pharmacy program. This ensures that they are able to practice as interns in the PHARMACY 380 practicum, a four week rotation in the summer following their second year in the program. Pharmacy 380 is built around the management of drug distribution with the emphasis on the development of competencies in communication and technical skills, and an introduction to pharmacy and patient care activities in community practice under the supervision of a licensed pharmacist.

With the many changes our profession is undergoing, and the need for more assistance in pharmacy care activities and provision of medications to patients, many pharmacists/owners are employing pharmacy students following the first year in the program. However, pharmacists and students should be aware that students **MUST** be registered as interns if they are performing duties that are designated as those pertaining to professional practice of a pharmacist (and they must do so under the supervision of a pharmacist). It would be a fair statement to assume that a pharmacy student working in a dispensary would be functioning as a pharmacy intern, and not just as a pharmacy tech-

nician (who would not be registered as a pharmacy intern). Failure to register as an intern can present liability and insurance issues as well as potential professional misconduct issues for both the student and the pharmacist(s) involved.

Registration must be initiated and completed by the pharmacy student and one cannot assume that registration has been undertaken and completed until receipt of a certificate from the SCP. Registration in Saskatchewan with SCP accommodates all four years of the academic program. Pharmacists/employers should ensure that those employed or on an educational rotation are properly registered with the Saskatchewan College of Pharmacists. Similarly, it is the professional responsibility of a student in pharmacy to register as an intern with SCP before commencing or participating in any activities in the pharmacy associated with being a professional pharmacist.

Unfortunately, there have been some instances where students have been functioning in a professional role without being registered. Border town pharmacies such as Lloydminster have pharmacies that are licensed either in Saskatchewan or Alberta (according to their location) yet fill prescriptions for residents from both provinces. If a pharmacy student is employed (or placed there for an SPEP rotation), he must be registered in the province where the pharmacy holds a permit. In other words, a duly registered pharmacy intern in Saskatchewan cannot practice as an intern in a pharmacy with an Alberta permit. The same would be applicable for any pharmacy student applying for employment and/or academic rotation from another province in Saskatchewan — they must qualify and become registered with SCP.

The hours of experience gained under SPEP are credited to the student's requirements for registration and licensing as a pharmacist in Saskatchewan. However, it is further recommended that students

register any additional hours worked outside of this practical experience with SCP. This would apply to any hours worked in Saskatchewan and/or another province as an intern. The form Internship Hours Report is available from the SCP office and is to be completed by the preceptor for any internship served in addition to the SPEP period. This report should NOT include the hours completed in the Structured Practice Experience Program.

The recording of internship hours with SCP will be reported on any requested Certificate of Standing in the event that the student is asked to provide a record of additional internship hours to another licensing body. The College of Pharmacy and Nutrition provides an affidavit to SCP indicating the hours of experience gained by each student at the conclusion of a successful SPEP rotation.

As a reminder, SCP By-Law 5.9 states: "Before commencing employment as an intern, that person shall notify the Registrar-Treasurer of the name of his preceptor and the place of employment and shall notify the Registrar-Treasurer of any subsequent change of internship employment." This should include:

- Name of preceptor
- Pharmacy name and location of placement
- Proposed dates of the internship
- A current mailing address

Please contact the SCP office at 584-2292 regarding this and any other questions regarding an internship in Saskatchewan.

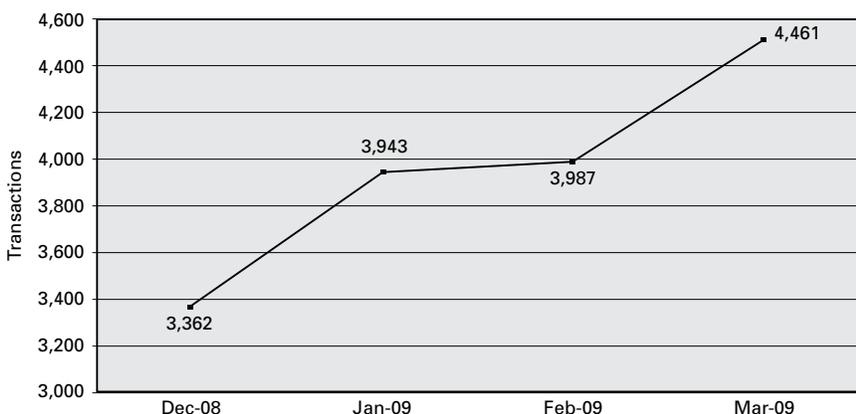
In conclusion, pharmacists have the professional responsibility to ensure that pharmacy students hired or accepted into a mentorship program are duly licensed with our regulatory body, SCP. Similarly, pharmacy students have a professional obligation to register before commencing their structured practice experiences or employment regardless of year of academic training.

PIP Usage Statistics – March 2009

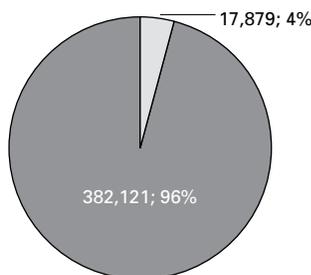
Month	Community Pharmacy Views	Community Pharmacy FYI/Allergy/E-prescription	Total Transactions	Average Weekly Views	Average Weekly Total Transactions
Dec-08	13,863	1,024	14,887	3,130	3,362
Jan-09	16,069	1,392	17,461	3,629	3,943
Feb-09	14,453	1,494	15,947	3,613	3,987
Mar-09	17,879	1,876	19,755	4,037	4,461

Note: Average of 1,000,000 dispenses per month by community pharmacies. Average of 2.5 prescriptions per patient, based on queries on 2006 drug plan data.

Average Weekly PIP Transactions for Community Pharmacies

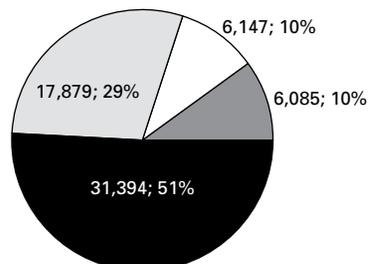


Community Pharmacy Use vs. Potential Total Usage



Community Pharmacy Access Views
Estimated Patient Profiles not Accessed

PIP View Totals by Facility Type (March 2009)



Community Pharmacies
Physician Views
RHA
E-Prescribing

PRP – Missing Information and Illegible Signatures

Recently there has been an increase in the number of situations being brought to the attention of the Prescription Review Program (PRP) at the College of Physicians and Surgeons with regards to incomplete written prescriptions and illegible prescriber signatures.

These situations cause undue delay in filling prescriptions, resulting in inconvenience to patients, disruptive work flow in the pharmacies and an increased risk for drug diversion as a result of altered and/or forged prescriptions.

In order to identify and to communicate to the prescribers responsible for writing prescriptions ie. missing information, improperly written refills instead of part fills for PRP drugs, and illegible signatures, please fax a copy of the prescription to the College of Physician and Surgeons at:

1-306-244-0090

Attention: Doug Spitzig

Only through education and intervention with prescribers can these issues be addressed. I have been reassured by our solicitor at the College that transferring this information does not in any way violate the rules and regulations of HIPA.

Doug Spitzig, BSP
Consultant Pharmacist
Prescription Review Program
College of Physician & Surgeons
of Saskatchewan

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or 306-757-2333

Memorial University Pharmacy Alumni Homecoming

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For more information
and to register:

[www.mun.ca/pharmacy/
pharmacyalumni/homecoming.php](http://www.mun.ca/pharmacy/pharmacyalumni/homecoming.php)

SHIRP Access

Full SHIRP Access is now available to all PIP Users.

All that is required is a valid PIP user account. Go to the link under the "REFERENCE" tab once you have logged into the PIP application. The link is then listed as "SASKATCHEWAN HEALTH INFORMATION RESOURCE PARTNERSHIP".

There is no charge for this additional access.

Diabetes Resource Booklets Now Available

Saskatchewan Health is pleased to report that the following four new diabetes resource booklets are now available:

1. "Type II Diabetes: Your Guide to Getting Started" — a twenty-two page resource for clients newly diagnosed with Type 2 Diabetes. This resource can be used by the client alone or by health professionals as a teaching tool.
2. "Diabetes in Pregnancy Gestational Diabetes" — a teaching tool to promote awareness and management of Gestational Diabetes (GDM). Primary users will be diabetes educators/dietitians throughout the province.
3. "Nutrition Tips for those with Diabetes and Chronic Kidney Disease" — a teaching resource for health professionals to assist people with diabetes who are at risk of or are newly diagnosed

with chronic kidney disease integrate diabetes and nutrition management.

4. "Diabetes and Kidney Disease" — an eleven-page resource developed for individuals with diabetes diagnosed with early stage chronic kidney disease.

The resources are available free of charge through the Ministry of Health's Primary Health Services Branch. To order copies of the resources, please contact Karen Shearer at 787-0872 or via email at kshearer@health.gov.sk.ca.

Levonorgestrel Scheduling

The National Drug Scheduling Advisory Committee (NDSAC) of NAPRA has made a recommendation for amendments to the schedules for levonorgestrel (Plan B). Council had approved the recommendations at their December 2008 meeting and the drug schedule amendments were submitted to the Minister of Health shortly thereafter.

Following government's usual process of stakeholder consultation, the Minister has NOT approved the submitted amendments and as such there has been no change in Saskatchewan regarding the sale of levonorgestrel products. Plan B remains a schedule II product that can only be sold by a pharmacist who is certified to prescribe this product.

Suspect an Adverse Reaction?

Recently you may have seen or read information regarding how to report adverse reactions to Canada Vigilance via MedEffect Canada.

MedEffect Canada is an initiative of Health Canada which provides centralized access to relevant and reliable health product safety information and makes it simple and efficient for health professionals and consumers to complete and file adverse reaction reports via web, phone, fax or mail.

The Canada Vigilance Program (formerly the Canadian Adverse Drug Reaction Monitoring Program) is a program of MedEffect Canada that is responsible for the collection and assessment of reports of adverse reactions to drugs and health products marketed in Canada.

Reporting an adverse reaction to the Canada Vigilance Program can be done by one of the following three ways:

- Call toll-free at 1-866-234-2345
- Report online at www.health-canada.gc.ca/medeffect
- Mail to: Canada Vigilance Program, Health Canada Address Locator: 0701C, Ottawa, ON K1A 0K9

Postage paid labels, Canada Vigilance Reporting Form and the adverse reaction reporting guidelines are available on the MedEffect Canada Web site at www.health-canada.gc.ca/medeffect

Scope of practice changes... Workforce shortages... Electronic health records...



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