What Pharmacists Need to Know about Training Technicians

Oklahoma State Board of Pharmacy

- Training documentation must be maintained for all technicians
- Training must be updated annually
- Permit must be displayed properly
- Schedule displayed in pharmacy (shows role)
- Properly identified (tech and clerks required, DPh not)
- Ratio maintained at all times

General Info

- Address should be local and accurate (not out of state or parent's address if inaccessible to them).
- Must report all arrests even if dismissed, deferred, suspended
- If any answers are "yes", must be initialed by pharmacist.
- Applicant must complete "Addendum to Application with Charges and Convictions"
- Must complete Citizenship Affidavit or Affidavit Verifying Qualified Alien Status if not a citizen

Application Highlights
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- Exam must be completed and maintained in the pharmacy.
  Do not send exam to the Pharmacy Board.
- By signing at bottom, pharmacist is stating that they have completed Phase 1 training, the exam, and will complete training.
- Allow 21 days for processing.
- Make sure application is completely filled out before signing.
- Don’t sign a blank application.

Tech Information
- Online vs. paper renewal
- Must be employed in a pharmacy to renew
- Renewal vs. reinstatement
- If previously permitted, must reinstate.
- Reinstatement is double normal fee, regardless of the time since permit expired.
- Tax hold
- OK Tax Commission (405-522-6800)
- Duplicate permits $10 (can print out own duplicates after renewed online)

Qualifications
- No age limit, but must have:
- HS Diploma or GED Equivalent
- Be of good moral character
- Non-impaired
Tech Training

- Phase 1 and Phase 2 (90 days to complete Phase 2)
- Must be documented regardless of:
  - Prior education
  - Previous employment
  - Previous experience
- Documentation of previously permitted tech within 10 days
- Must be maintained in pharmacy
- If training not completed, permit becomes invalid. Must report to Board.

Sample Permit

- Attach Current Picture
- Must have Current Photo
- Pharmacist Signature and DPh # doesn’t have to be PIC
- Pharmacy License number and the one pharmacy only
- Date signed by DPh, should be done promptly upon receipt

Hiring

- References
- Look at job history
  - Job gaps
  - Change jobs often
  - Commuting long distances
- Listen to what they say
  - It was “just shoplifting”
  - Marijuana isn’t a drug
  - Oxy’s, zany bars, footballs
  - Always someone else’s fault
Screening
• Background check (Board only does random checks)
  • Fingerprint-based $19, Name-based $15
  • [Link](https://www.ok.gov/osbi/Criminal_History/Criminal_History_Search/)
  • [Link](http://www1.odcr.com/)
  • OIG Medicare Exclusion List
  • [Link](https://exclusions.oig.hhs.gov/)
• Cannot use PMP to screen employees.
• OPhA – Quality-Hire

Waivers
• Must be obtained by employer
  • Site specific
• OBNDD – Any CDS-related misdemeanor or any felony. Includes finding of guilt, guilty plea, nolo contendere plea, deferred or suspended sentences, or probation.
• DEA – Any CDS-related felony or has surrendered a registration for cause or in lieu of prosecution.
• May affect your bonding insurance

Tech Training
• Orientation
• Rules
• Duties
• CDS Regulations
• Diversion Issues
• Calculations
• Conversions
• Inventory Management
• Abbreviations
• Sig codes
• Dosage Forms
• Drug labels
• Drugs
• Insurance
• Continuing Education
• Compounding
• Error prevention
Orientation (Phase 1)

Tour
- Chain of Command
- Employee Handbook and/or Policies & Procedures
- Job Description/Expectations
- Sexual Harassment
- Business Hours/Meals/Breaks
- Customer Service/Phone Etiquette
- Customer relations w/prescribers
- Computer Software

Orientation (Phase 1)

Benefits
- Confidentiality
- Dress Code/Identification
- Evaluations
- Job Safety/Emergency Procedures
- Training Guidelines on Board website
- Initial test on website/keep with training (do not mail in)
- Must have training manual
- After completion of Phase I, may mail in application. Have 90 days to complete Phase II training.

Orientation (Phase 1)

Workflow
- Flow of prescription
- Drop-Off
- Phone Duties
- Rx Pickup
- Cashier
- Counseling
- Drive-thru
- Other services (immunizations, MTM)
- OTC (front end)
Tech Training
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Rules
- Must work under supervision of DPh at all times
- Ratio 2 techs to 1 pharmacist
- Presence of intern does not affect ratio
- Intern cannot verify tech’s work
- Different ID for clerk if ratio exceeded, must differentiate on schedule
- Regulatory agencies (DEA, OBNDD, FDA) and their roles

Tech Training
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### Permitted Duties

**Clerical Duties**
- Typing
- Billing
- Cleaning
- Stocking/ordering meds

**Technician Only Duties**
- Count/Pour, prepackage
- Label medications (including auxiliary labels as directed by pharmacist)
- Reconstitute (liquid antibiotics)

### Technician Only Duties

- Assist pharmacist with CDS inventory
- Take refill authorization from prescriber's office when no changes are made to non-CDS Rx
- Bulk compounding (discuss later in detail)

### Prohibited Duties

- Interpret original prescription
- Perform DUR
- Counsel (including OTC medications)
- Final verification of Rx
- Be in pharmacy without pharmacist (may possess keys)
Prohibited Duties

- Receive new rx by phone
- Take refill authorization from prescriber’s office if there are any changes to prescription
- Take refill authorization from prescriber’s office for any controlled substance (considered new Rx by DEA)

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CDS Regulations

- Obtaining proper ID for CDS rx’s
- Required information for CDS rx’s
- CII’s – 30 days to fill, no refills, can’t be phoned in
- CIII-V – valid for 6 months, no more than 5 refills
- Non-CDS – valid for one year
- Store policy for CDS (double count?, DPh must count?, document on label?, perpetual inventory?)
- Submitting information to PMP
Pseudoephedrine

- Proper storage/display of PSE products
- Daily, monthly & annual limitations
- Proper documentation of PSE transaction
- Proper ID requirements
- Online Meth Registry Check

Acceptable ID’s

- Drivers License
- Military ID
- Passport
- State-issued ID
  - Definition of State: any state, territory or possession of U.S., D.C., or foreign nation
- Tribal ID’s?
  - Cherokee
  - Muscogee-Creek

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Diversion Issues

- Make them aware and anticipate outside pressure
- Educate about consequences of diversion
  - Criminal prosecution
  - Losing permit/difficulty obtaining other state license
  - Medicare Exclusion List (difficulty obtaining other health-related jobs)
- If a technician is dismissed for cause, it is mandatory to report to Board. (No Board action will be taken without due process.)

Paying attention

- Personality traits/friends
- Changes in circumstances (e.g., divorce, illness)
- Frequent phone calls/texts
- Coming into pharmacy on days off
- Living above their means
- Watch personal use of computer (FB posts)

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Calculations
- Fractions
- Ratios
- Percentages
- Decimals
- Insulin (units/ml) (If quantity exceeds 28 days, days' supply should only be 28 due to BUD)
- Ophthalmics/Otics (drops/ml) (Does pharmacy have a policy or does it depend on pharmacist? 15-20 gtt/mL?)
- Inhalers (puffs per inhaler)
- Topicals (Need to find out how large area patient is treating)

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Conversions
- Metric vs US Customary
- US Customary
- Metric units (mm to cm)
- Fahrenheit vs Celsius
- Apothecary units
- Weight (lb to kg)
- Volume
- Length
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Inventory Management
- Ordering
- Receiving
- Accountability
- Perpetual inventory (who can make adjustments?)
- Proper storage
- FIFO
- Expiration of drugs (remove from shelf immediately, remove from pharmacy within 6 months)
- Reverse distributors
Abbreviations
- Roman numerals
- Chemistry terms
- Medical terminology
- Diagnoses
- Drug abbreviations
- PN vs PCN

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Sig Codes
- Latin
- Confusing (QID, QD, QOD, SID)
- OU vs AU
- OD, OS, OU
- Tsp vs Tbsp
- ss vs ii (one-half vs two)
- mEq vs mg or mcg
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Dosage Forms

- Oral
  - Tablets vs capsules vs caplets
  - Sublingual vs buccal
  - Extended release vs immediate release (can it be cut in half or crushed)
  - Enteric coated
- Suspensions vs Solutions vs Syrups
- Ophthalmic can be used in ears but not vice versa
- Selection of appropriate syringes/needles (SQ vs IM)

Dosage Forms

- Inhalers: Intranasal vs Oral inhalers
- Topicals: Creams vs Ointments, patches
- Suppositories: Rectal vs Vaginal
- Parenteral vs Enteral
Proper instructions
- Take vs. dissolve under tongue
- Unwrap and insert where?
- Inject how?
- Inhale by mouth or intranasally
- Remove patch when putting on new one. Rotate sites.

Orientation
- Sig codes
- Dosage Forms
- Drug labels
- Drugs
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Patient label
- Importance of putting all directions on label
  - Not leaving off perceived “unimportant information” (prn is not unimportant)
- Accuracy of dosage forms (tablet vs capsule, etc)
- Clear instructions (Take two puffs vs Inhale two puffs intranasally or Inhale two puffs orally)
- Auxiliary labels
Drug Labels
- Stock bottle label
- Expiration date
- NDC number
- Tall man lettering
- Checking for proper storage requirements
- Which medications need to remain in original containers

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Drugs
- Top 200 drugs
- Drug classifications
- Scheduled drugs
- Name brand vs generic
  - Substitution laws
- Suffixes
- Look alike/Sound alike
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Insurance
- Proper NDC number
- Quantities
- Days supply
- Prior Authorizations
- Reversals
- Return to stock procedures
  - Do not return to stock bottle
  - Redact patient information
  - No more than one year BUD

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Continuing Education

- Annual training required by board
- Formal CE not required by Board
- National Certification requires 20 hours every two years

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Non-sterile Compounding

- Initial competency training
- Written test (must pass prior to compounding)
- Combination of didactic and experiential
- Annual testing
- Failure of written tests – must immediately be instructed and reevaluated prior to resuming compounding
- Must maintain documentation in pharmacy
Compounding Log
- All ingredients, including manufacturers
- Lot #’s
- BUD’s
- Actual weights
- All steps must be verified by pharmacist
- Take care that assigned BUD does not exceed BUD of individual ingredients

Initial competency training
- Written test (must pass prior to compounding)
- Combination of didactic and experiential
- Must be evaluated:
  - Prior to preparing sterile products for patient use
  - At least annually
  - When unacceptable results are produced
  - Unacceptable or questionable techniques are observed

Annual testing
- Media Challenge and Fingertip Glove Testing
- Failure in either written test, media challenge test, or fingertip glove testing must be re instructed and reevaluated until passed.
- Must be documented thoroughly
Sterile Compounding
- Failure of written tests – must immediately be instructed and reevaluated prior to resuming compounding
- Must maintain documentation in pharmacy
- Prior to mixing multi-ingredient or chemotherapeutic compounds, technicians must demonstrate competency to DOP with Board-approved training program

Hazardous Drugs
- NIOSH Hazardous Drugs list for your pharmacy
- MSDS
- USP 800
- PPE (What is it, when to use it, and how to wear it)
- Spill Kit

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Error Prevention
- Do not skip safety steps (barcoding)
- Importance of obtaining/checking allergies
- Importance of confirming patient identity
- Techs should not answer patient’s questions
- Communication system for special circumstances (counseling, refrigerated items, reconstituted drugs, etc.)
- Free 3 hrs CE on OSBP website (Risk Assessment Exam)
- www.ismp.org (Error prevention information)
  - Confused drug names, high-alert meds, tall Man lettering, safety tools, etc.

Federally Required Training
- HIPAA
- Fraud, Waste, & Abuse (annually)
  - Does not count as Board of Pharmacy annual training
- Combat Meth Epidemic Act (CMEA)
- Self-certification

Annual Training
- Must be documented
- Ideas
  - In-services or staff meetings (document topics and attendance)
  - OSBP quarterly newsletter (initial and date)
  - Read cases
  - Information from Compliance Officers
  - Create tests
  - Required CE for national certification
Resources

- Pharmacists Letter – resources specific to technicians
- http://www.pharmacy-tech-study.com/
- http://denalix.com/study-games-pharmacy-technician/
- http://www.pharmacy-tech-test.com/
- Apps for phones (Top 200 drugs, flashcards, math, exam prep, medication quiz)

Questions????

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