What Pharmacists Need to Know about Training Technicians Oklahoma State Board of Pharmacy

General Info 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

Application Highlights 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

- 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.

- 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

Tech Training Phase I 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.





Screening
 Background check (Board only does random checks)
Fingerprint-based \$19, Name-based \$15
OIG Medicare Exclusion List
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	• Sig codes
• Rules	Dosage Forms
• Duties	Drug labels
 CDS Regulations 	Drugs
 Diversion Issues 	Insurance
 Calculations 	 Continuing Education
 Conversions 	Compounding
 Inventory Management 	Error prevention
 Abbreviations 	

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.

• Wo	rkflow	
• F	low of prescription	
	Drop-Off	
	Phone Duties	
	Rx Pick-up	
	Cashier	
	Counseling	
	Drive-thru	
	Other services (immunizations, MT	M)
	OTC (front end)	

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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

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Permitted Duties		
Clerical Duties	Technician Only Duties	
Typing Billing Cleaning Stocking/ordering meds	Count/Pour, prepackage Label medications (including auxiliary labels as directed by pharmacist) Reconstitute (liquid antibiotics)	

Permitted 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
Interpr	ret original prescription
• Perfori	n DUR
• Couns	el (including OTC medications)
• Final ve	erification of Rx
Be in p	harmacy 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)

Tech Training Orientation Rules Dosage Forms Duties Drug labels Drugs Diversion Issues Insurance Calculations Conversions Inventory Management Abbreviations Tech Training Sig codes Drugs Drug labels Drugs Insurance Continuing Education Compounding Error prevention

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

 Proper storage/display of PSE products Daily, monthly & annual limitations Proper documentation of PSE transaction Proper ID requirements Online Meth Registry Check 	Pseudoephedrine	
Ommit real regulary creek	Daily, monthly & annual limitations Proper documentation of PSE transaction Proper ID requirements	
	Omine Fied Registry Check	

• Drivers L	icense
 Military II 	
• Passport	
• State-issu	led ID
	ion of State: any state, territory or possession of U.S. r foreign nation
• Tribal ID'	s?
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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 gtts/ml?) Inhalers (puffs per inhaler) Topicals (Need to find out how large area patient is treating)

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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

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	551	eviat	.1011		
 Roman numerals 					
Chemistry terms					
 Medical terminolo 	gy				
Diagnoses					
 Drug abbreviation 					
PNV vs PCNV					

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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

Routes of Administration	
 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. 	The state of the s
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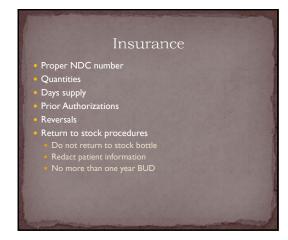
	Drug Labels
• Pa	atient label
	Importance of putting all directions on label
	 Not leaving off perceived "unimportant information" (prn is not unimportant)
	Accuracy of dosage forms (tablet vs capsule, etc)
	Clear instructions (Take two puffs vs Inhale two puffs
	intranasally or inhale two puffs orally)
	Auxiliary labels

	Drug	g Label	S	
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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

Bulk Compounding 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

Sterile Compounding 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

Glove Testing nedia challenge test, or reinstructed and
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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		
• H	IIPAA		
• Fi	raud,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 Le 	etter – resources specific to technicians
 Apps for phone prep, medication 	es (Top 200 drugs, flashcards, math, exam on quiz)

Questions????	
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