TECHtalk

FEBRUARY/MARCH 2011

LEARN DRUG NAMES ON THE GO

How do you pronounce "Zuclopenthixol?" It's not easy, but help is now at hand.

Canadian Drug Speak is an audio/visual training tool that provides the correct pronunciation and classification of more than 1,000 Canadian brand and generic drug names. Developed by Bow Valley College (BVC) in Calgary, the CD-ROM and booklet combination is compatible with any MP3 player, hand-held device, or computer, for convenient learning on the go.

Originally designed for use by BVC pharmacy technician and nursing students, the concept proved so popular that the College turned it into a commercial product in 2010, retailing for \$39.99.

Canadian Drug Speak may be particularly useful to techs who are taking bridging courses in pursuit of regulation. According to a BVC press release, the product received an enthusiastic response from Alberta pharmacy technicians at their last provincial conference.

To hear an audio sample or get more information about ordering the product visit www.canadiandrugspeak.ca.

FREE CCCEP-ACCREDITED CE INSIDE:

Prostate cancer

An overview of the disease, plus tips on what technicians can do to help patients manage treatment.

Accredited by the Canadian Council on Continuing Education in Pharmacy



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AN IDEAL SPOT Tech lands position in hospital oncology department

HOSPITAL PHARMACY TECHNICIAN Dave Soltesz was presented with a unique opportunity when his pharmacy manager asked him if he wanted to train as a Specialized Pharmacy Oncology Technician (SPOT). Ridge Meadows Hospital pharmacy in Maple Ridge, B.C., introduced the position about two years ago to assist the pharmacist with the 15 patients a week on average who were receiving chemotherapy at the hospital's outpatient oncology unit.

Normally, oncology pharmacy technicians are involved only with preparing chemotherapeutic admixtures; few are involved with computer order entries, review of blood work, and gathering drug information for patient counselling, according to Dr. Anita Lo, the pharmacy manager who proposed the position to Soltesz. With four years experience as a hospital pharmacy technician when he took on the SPOT job, Soltesz was already proficient in order entry, and had been trained under the tech-check-tech program. In order to train for his new position, he completed the relevant modules on the British Columbia Cancer Agency (BCCA) website under the guidance of the pharmacist, and took the BCCA examination designed for pharmacists.

Besides preparing chemotherapeutic admixtures, the SPOT technician was assigned six basic functions, according to Dr. Lo: collecting laboratory data, printing patient profiles, performing calculations, triaging oncology-related calls, submitting drug approvals through the Compassionate Access Program, and interviewing patients. Soltesz says he was involved in the processing of all the orders, checking the doses, recording blood work and ensuring it was within the correct range of the protocol, and checking to ensure the patient would receive treatment that day before the medications were prepared—"sort of a go-between the



Dave Soltesz says his position at Ridge Meadows Hospital was a wonderful learning opportunity

pharmacist and the oncology department to make sure these patients were going to get their medications and an extra check in the process," he explains. Once he knew which patients were getting their medications, he could then "gown up and go in and get everything ready for the mixers." He was also able to order the medications so that each patient had his or her beginning and next doses at the right time, while the mixer could stay in the hood.

Soltesz worked as a SPOT for about a year, at which time he was offered a position as front-store manager of a Pharmasave in Abbotsford Regional Hospital. While he still works occasionally as a pharmacy technician, he says the SPOT position gave him an opportunity to do something outside the scope of a normal technician's work. It also helped him in his current job by enhancing his time management skills, "because you really had to make sure that the doses went out at the right time," he explains. "Now I'm doing ordering for the store, and it has to be done in a timely manner."

In view of the ongoing success of the SPOT position at Ridge Meadows Hospital, Soltesz hopes it will be offered at more hospitals. "With the regulation of technicians, that's going to increase their responsibility, so I can see it happening at hopefully all hospitals to bridge the gap between the pharmacist and the oncology department."

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ONTARIO NEWS

OCP now registering qualified techs

AFTER 12 YEARS IN THE WORKS, regulation finally became official in Ontario when the provincial government passed the amendments to the Registration Regulation this past December, enabling the Ontario College of Pharmacists (OCP) to register those who met the requirements for a certificate of registration as a pharmacy technician. "The regulation of pharmacy technicians will enable pharmacists to take on an enhanced role in the provision of comprehensive patient care services to the public," says Bonnie Hauser, OCP president.

As of early January, the College had registered more than 100 technicians, and there are 250-300 who could be eligible to be registered in the next month or two, says Susan James, manager, registration programs, OCP. Registered technicians are now listed on the OCP website at www.ocpinfo.com.

From now on, only those who are registered with OCP as pharmacy technicians may use that title. Other non-registered dispensary personnel must use other designations, such as dispensary or pharmacy assistant.

Amber Walker is among the first group of registered technicians. Walker, who works at both the independent Neighbourhood Pharmacy in St. Catharines and West Lincoln Memorial Hospital pharmacy in Grimsby, and completed the bridging programs at Niagara College, says it is still too soon to determine how her duties will change. "We do a lot of weekly dosettes, so I'm hoping that with my scope, I will be checking those over anything else at least," she says. "Other than that, we've sort of just opened the door to conversation about what's going to happen, so I don't know for sure yet." She expects that within the next month or two, her new role and compensation will be established.

However, under the new legislation, "registered pharmacy technicians will be able to work to the full scope of the competencies for the profession, including completion of the independent double check and product release," says James. "Once further legislative changes to the Drug and Pharmacies Regulation Act and the Food and Drug Act are finalized, they will also be able to transfer prescriptions and accept verbal prescriptions. Most importantly, they will be able to work in a new collaborative relationship with the pharmacist to more fully support their role." As Walker indicates, it may take time for these changes to be implemented. "Changes to their actual job function will evolve over time as pharmacists and technicians begin to work together to test out new practice models and determine how the pharmacy technician role can best support the pharmacist as they move into their enhanced role," says James.

Those who wish to become registered and have not completed a pharmacy technician program that held provisional accreditation prior to graduation must complete the Pharmacy Examining Board of Canada Evaluating Exam before January 1, 2012. There are only two more opportunities to complete the Exam— April and October—before the deadline. To register, visit www.pebc.ca.

QUEBEC NEWS

Pharmacy Technician training: The AQPP seeks more support

THE ASSOCIATION QUÉBÉCOISE DES PHARMACIENS PROPRIÉTAIRES (Quebec Association of Owner Pharmacists, or AQPP) is calling for greater support from the Ordre des pharmaciens du Québec (Order of Quebec Pharmacists, or OPQ) to make training pharmacy technicians a priority.

At the annual AQPP convention last November, President Normand Bonin deplored the fact that pharmacy technician training no longer appears to be a priority for the OPQ, as it once was.

He pointed out that providing technicians with better training and even establishing their own professional order would be the best way to encourage the delegation of certain tasks usually performed by pharmacists to technicians.

In Quebec, a vocational school diploma is required to become a technician in a public health institution. In community pharmacies, however, most technicians don't hold a diploma recognized by the Department of Education. In most cases, they are trained by pharmacists or by pharmacy chains and banners.

In Montreal, Dawson College is currently creating a college program to train future pharmacy technicians and has consulted with a number of pharmaceutical organizations in the process. The program must be approved by the Quebec Department of Education, Leisure and Sports.

Aiding Alzheimer's patients and their caregivers

SOME 500,000 CANADIANS are living with Alzheimer's disease and other dementias. One in 11 over the age of 65, and one in three over the age of 85, have some form of dementia, according to the Alzheimer's Society of Canada. The number of Canadians with dementia is expected to more than double, reaching 1.1 million within 25 years. Therefore, it is important that pharmacy technicians learn about these diseases and ways in which they can help these patients and their caregivers.

Alzheimer's disease is the most common form of dementia, representing about 64% of all cases, and occurring more often in females. Vascular dementia, the second most common form, is caused by problems in the blood vessels that feed the brain. This disease accounts for about 20% of all dementias, and affects more males. While there is no cure for Alzheimer's disease, medication is available to treat some of the symptoms.

Pharmacy technicians can play an important role by alerting the pharmacist to the possibility that a caregiver is suffering burnout, says pharmacist Heather Scarlett-Ferguson, an instructor of pharmacology at Grant MacEwan University in Edmonton.

For example, perhaps a caregiver will remark that he or she didn't get much sleep, since his or her spouse was up most of the night. A casual conversation with the technician, says Scarlett-Ferguson, "may be valuable information for the pharmacist to have to help figure out ways to support the caregiver." As many caregivers are elderly, they may get run down or depressed, and end up ill as well.

Technicians can help out with refill reminders because the patient may not remember and the caregiver has many things to think about. They can also assist with suggestions for compliance devices, such as bubble-packing of medications, and teach patients or caregivers how to use them.

Technicians can learn more about the different types of dementia through websites such as the Alzheimer's Society of Canada, www.alzheimer.ca, or the U.S.-based Fisher Center for Alzheimer's Research Foundation, www.alzinfo.org, which discusses the "Top 10 Alzheimer's Signs and Symptoms" compared with normal behaviour. For example, if a patient occasionally forgets your name, that doesn't mean he or she has Alzheimer's.

It is also important to be aware that other diseases, such as delirium or depression, can mimic the symptoms of dementia, says Scarlett-Ferguson. Delirium can be caused by an overdose or an excess of medication that accumulates in the body, particularly in the case of elderly people. Therefore,



it is important that patients are correctly diagnosed so they can be properly treated. Besides watching for signs of distress in caregivers, technicians can also be on the lookout for any unusual patient behaviour to report to the pharmacist.

EARLY SIGNS OF ALZHEIMER'S DISEASE INCLUDE:

- 1. Memory loss that affects day-to-day function
- **2.** Difficulty performing familiar tasks
- 3. Problems with language
- 4. Disorientation of time and place
- 5. Poor or decreased judgement
- 6. Problems with abstract thinking
- 7. Misplacing things
- 8. Changes in mood or behaviour
- 9. Changes in personality
- 10. Loss of initiative

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