



# Kansas State Board of Pharmacy

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[www.ink.org/public/pharmacy](http://www.ink.org/public/pharmacy)

Published to promote voluntary compliance of pharmacy and drug law.

## Board Members

**Vicki Schmidt, RPh, Topeka** ..... President  
**Max Heidrick, RPh, Beloit** ..... Interim Investigative Member  
**Lori Moore, RPh, Hays** ..... Board Member  
**Michael Hurst, RPh, Wichita** ..... Board Member  
**Merlin McFarland, RPh, Kingman** ..... Board Member  
**Dan Upson, DVM, Manhattan** ..... Public Board Member

## New Board Members Appointments

Governor Bill Graves has announced two appointments to the Kansas State Board of Pharmacy. The Merlin McFarland and Mike Hurst appointments shall run to April 30, 2004, and may be reappointed. Mr McFarland is the president of Kingman Drug, Inc, in Kingman. He is a University of Kansas graduate. Merlin has 30 years of experience providing community pharmacy care in rural Kansas. He is past president of Kansas Pharmacy Service Corporation and has held various offices within pharmacy organizations. Merlin and his wife, Nita, have five children and two grandchildren.

Michael R. Hurst is the director of pharmacy at Wesley Medical Center in Wichita. He is a University of Kansas graduate and has an MBA from Wichita State University. Mike has 35 years experience providing pharmacy care in Kansas. He is the past chair of the Committee on Impaired Pharmacy Practice (CIPP) and is on the Board of Directors for the Arthritis Foundation. Mike and his wife, Sandra, have two children, Ryan and Amanda.

The Board and the agency office would like to express our gratitude to both Lou and Barry for their contribution to the Board and the pharmacy profession during their terms. Elections will take place at the June meeting to designate the new president and vice president.

## Fifty Years of Service

In the March *Newsletter*, a name was left off the list of pharmacists who have been licensed in good standing with the Kansas State Board of Pharmacy for 50 years. We apologize to Mr Leo Shalinsky.

## Transfer of Controlled Substances

When a pharmacist transfers controlled substances to another pharmacy or to a physician's office for dispensing to patients, the following method must be used:

1. Schedule II substances are transferred to the practitioner by submitting his Drug Enforcement Administration (DEA) order form 222;
2. Schedules III, IV, and V are transferred on an invoice.  
 You, as the seller, should keep the first copy, send the second copy to the DEA office, and the practitioner, as the buyer, should keep the third copy. Invoices should be handled in the same manner as the DEA forms.

In no circumstances is it legal for a practitioner to obtain controlled substances for general dispensing by writing a prescription for them. See K.A.R. 68-20-18(b)(2).

## Online Renewals

Pharmacists who wish to renew through the Board of Pharmacy Web site may do so after June 1. The Web site is [www.ink.org/public/pharmacy](http://www.ink.org/public/pharmacy). Only pharmacists who are not audited may do online renewals. For those individuals not being audited, the Board office no longer requires them to send in copies of their continuing education certificate of attendance. Pharmacists will be required to indicate on the renewal form that they have taken the required continuing education credits.

## Electronic Prescriptions

Some confusion still exists regarding the electronic transmission of controlled substance prescriptions. This summary is written in an effort to help clear up some the confusion regarding new and some older regulations for electronic transmission.

The electronic transmission of prescriptions in **Schedules III, IV, and V** may be communicated from a prescriber or a prescriber's agent to a pharmacist in a licensed pharmacy, and the hard copy of the electronic transmission shall serve as the original, written prescription providing:

- All legal requirements for written controlled substance prescriptions have been met. These requirements are as follows:
- A. Be dated and **manually signed** by the prescriber on the day issued;
  - B. Contain the full name, address, and DEA registration number of the prescriber;
  - C. Contain the name and address of the patient;
  - D. Contain the drug name, strength, dosage form, quantity prescribed, and directions for use.

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The prescriber may authorize an agent to communicate a prescription electronically if the identity of the transmitting agent is included on the prescription. Title 21 of the Code of Federal Regulations ( 21 CFR 1306.03(b) ) defines an agent of a prescriber to include "an employee" of the prescriber . . . such as an office nurse, secretary, or receptionist. This definition, however, does not include a patient.

During electronic transmission, no intervening person or entity should have access to the prescription. Prescriptions communicated electronically must identify the transmitter's phone number, the time and date of transmission, and the name of the pharmacy intended to receive the transmission.

The electronic transmission of prescriptions in **Schedule II** may be communicated from a prescriber or a prescriber's agent to a pharmacist in a licensed pharmacy **only** in the following instances. It is important to note that the four points mentioned above are still applicable in these instances as well.

1. For patients residing in long-term care facilities and home hospice settings. In this instance, the hard copy of the electronic transmission shall serve as the original, written prescription.
2. For any Schedule II narcotic substance to be compounded for the direct administration to a patient by **parenteral, intravenous, intramuscular, subcutaneous, or intraspinal infusion**. In this instance, the hard copy of the electronic transmission shall serve as the original, written prescription.
3. In the case of an emergency situation if the quantity prescribed and dispensed is limited to the amount adequate to treat a patient during the emergency time period. Dispensing beyond this period must be pursuant to a written prescription signed by the prescriber. Within **seven days** after authorizing an emergency prescription, the prescriber must deliver or have post-marked for mail delivery a written prescription for the emergency quantity prescribed to the dispensing pharmacist as the electronic transmission does **not** serve as the original prescription.
4. In all other instances, the electronic transmission of prescriptions in Schedule II may occur **if** the original, written, signed prescription is presented to the pharmacist **before** the actual dispensing of the controlled substance as the electronic transmission does **not** serve as the original prescription.

## Health Care Data Request

Please be aware that the Board office has been requested to provide all pharmacists' identifying information, including Social Security numbers, to the State Department of Social and Rehabilitation Services, Child Support Enforcement. Data from the Board is required via federal requirements for use in child support enforcement activities.

## Disciplinary Action

**Dennis J. Cochrane, RPh # 1-09397** – As a result of the hearing held March 14, 2001, the Board found that there was clear and convincing evidence that Mr Cochrane diverted, without a prescription, quantities of hydrocodone tablets. Mr Cochrane's license was limited, preventing him from practicing as a pharmacist until further order from the Board.

## Special Notice about this Newsletter

The *Kansas Board of Pharmacy News* is considered an official method of notification to pharmacists licensed by the Kansas Board of Pharmacy. **These Newsletters have and will continue to be used in hearing as proof of notification.** Please read them carefully and keep them for future reference.

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