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August 2007 "Pharmacy Resources, Computers & the Internet" 707-000-07-008-H04



THIS MONTH--
"Computers & the
Internet"

FLORIDA PHARMACISTS---Be sure to provide your Florida License Number in the space provided on the quiz sheet.

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HAVE YOU RECENTLY MOVED? PLEASE NOTIFY US.

Periodically we present a lesson that addresses how computers & the Internet can positively impact pharmacy practice. In this lesson we take a practical perusal at this topic. This lesson provides 1.25 hours (0.125 CEUs) of credit, and is intended for pharmacists in all practice settings.

The program ID # for this lesson is 707-000-07-008-H04.

Pharmacists completing this lesson by August 31, 2010 may receive full credit.

To obtain continuing education credit for this lesson, you must answer the questions on the quiz (70% correct required), and return the quiz. Should you score less than 70%, you will be asked to repeat the quiz. Computerized records are maintained for each participant.

If you have any comments, suggestions or questions, contact us at the above address, or call toll free 1-800-323-4305. (In Alaska and Hawaii phone 1-847-945-8050). **Please write your ID Number (the number that is on the top of the mailing label) in the indicated space on the quiz page** (for continuous participants only).

The objectives of this lesson are such that upon completion the participant will be able to:

1. List ways to harness the Internet to help patients interpret information.
2. Describe ways for pharmacists to facilitate practice concepts by utilizing the Internet.
3. Discuss the significance of enhancing patient care via computers & the Internet.

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OVERVIEW

When pharmacists think of computers, they associate them with work tools that are used to process prescriptions, inform about dispensing rejections and even help with the basics of inventory. But with new technology, computers can allow pharmacists to pursue other rewarding and profitable aspects of practice.

Scenarios other than prescription filling and insurance claim procedures exist. Advances in computer technology that are associated with computers and the Internet can give the pharmacist more time to delegate daily dispensing tasks and make running various reports faster than ever. Finally, the pharmacist can use the computer and explore and implement revenue generating options.

TRENDS IN ALTERNATE PHARMACY REVENUE STREAMS

The National Community Pharmacists Association (NCPA) has spearheaded two major initiatives: The Asthma Intervention Project and Community MTM. The Asthma Intervention Project is a collaborative effort with NCPA, Medical Care and Outcomes LLC, and Glaxo SmithKline. Using a specially designed questionnaire, pharmacists asked a certain group of asthma patients questions to ascertain level of asthma control. The pharmacist can evaluate current treatments and reinforce therapies or contact providers. Scheduled follow-ups are done to check on patient progress. The study consists of three interventions:

Intervention 1: patient enrollment, test administered, patient counseling, data collected.

Intervention 2: 60 days later: patient follow-up – collect additional test data.

Intervention 3: entering patient fill data online into a computer program.

Information is shared with the study providers. For these efforts, the pharmacist receives payment for clinical judgment. This is an important development in pharmacy. The reimbursement is competitive, and the providers see pharmacists' contributions to clinical management. Then patient's responses to asthma management can be used to enhance treatment.

In March 2007, the Asthma Intervention Program presented its findings at the APhA Annual Meeting and Exposition. Preliminary data from the program was compiled and presented in "Impact of Community Pharmacy Intervention on Outcomes of Asthma Patients: Use of the Asthma Control Test (ACT) in Asthma Management." Among the key findings presented: 3,987 patients took the Asthma Control Test at enrollment; 2,787 patients (70%) were determined to have uncontrolled asthma based on their ACT score; 1,916 patients with uncontrolled asthma were retested at 60-120 days. Out of the 1,916 patients some remarkable data emerged – 471 patients (25%) had improved their ACT score and now had their asthma under control; 65% of these patients received a higher ACT score on the retest (22% scored lower and 13% remained unchanged); the average ACT score of these 1,916 patients improved 2.3 points (17%). Finally, 1,196 patients (62%) reported seeing their physician, and 372 (31%) reported a change in asthma therapy. What is remarkable about this data is all input was done via computer from various pharmacy sites. Total payments to pharmacies came to more than \$200,000.

Community MTM is done in concordance with NCPA's Medicare Part D partnership with prescription drug plan Community Care Rx. Community MTM targets patients who put the most financial burden on the healthcare system – those with diabetes, HIV, hypertension and dyslipidemia who spend more than \$4,000 dollars annually on medications. Pharmacists receive training via Community MTM's website on how to perform data entry and patient clinical assessments. New patients to Community Care RX (CCRx) can request a CCRx Medication Review – this is akin to an electronic "pharmacy brown bag". Again, in these two scenarios, pharmacists are compensated for their time and expertise. In all of these cases, we are showing healthcare providers and society in general the value of a pharmacist in the healthcare system. Society has a plethora of needs in healthcare. And pharmacists can help facilitate drug delivery in many ways. First, by improving medication use, drugs can be utilized more appropriately and effectively. Secondly, pharmacists can see the "big picture" regarding a patient's drug regimen and intervene to correct problems. This could include duplication of active ingredients or preventing a drug interaction. Third, an educated patient is a more motivated patient. With a pharmacist's accessibility, patient education can help improve therapeutic outcomes. Fourth, while on the subject of therapeutic outcomes, one major barrier is poor adherence to drug regimens. Studies and statistics abound regarding the cost to the healthcare system and society regarding poor adherence. A pharmacist's involvement can lessen this problem. Fifth, via the comput-

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er, community pharmacists can help make the clinical trial system more efficient by signing up the correct cohort of patients sooner and get important data to the primary investigators quicker. Sixth, finally, patients on specialty medications like HIV, transplant and fertility drugs need special attention. In addition to making sure that the medications are refilled in a timely manner, these patients need intensive counseling, and pharmacists need to act as a conduit to prescribers if necessary. These patients offer a double financial incentive: the reimbursements on these medications are often proportionately higher, and compensation opportunities exist for medication management.

Community MTM can be profitable to pharmacies because there is no inventory investment, no cost of goods – just pharmacist's time. In addition, these two programs are good ways to keep prescriptions in the community. Apparently a lot of pharmacists agree this is a good idea. According to a February 2007 Community MTM press release, "over 39,000 members are in the network. Network members include independent, chain, long term care, supermarket and mass merchandiser pharmacies that represent nearly 71 percent of all U.S.-based pharmacies." In 2006, over 1.6 million dollars was earned by Community MTM pharmacists for their clinical expertise, and in less than one year 44,000 patient cases were processed with the Community MTM system. Finally, according to company officials, "MTM provides a way for community pharmacists to enlarge their role beyond dispensing and create a revenue stream based on their clinical skills."

TAKING CARE OF PATIENTS

Patient counseling can take on a whole new dimension when computers are utilized. Some ways are more evident, others require thinking "outside the box". For example, if a pharmacist has hearing impaired patients, then he can use a laptop or PC to communicate with that patient. Many hearing impaired patients "talk" on the phone using a keyboard and a phone company operator. Thus, many of these patients are adept at typing. Instead of talking slowly or writing out notes, the pharmacist can type questions to the patient in the pharmacy while the patient responds.

Various software exists to help pharmacists counsel patients. Some of these programs are proprietary, others you can get off the Internet. For example, let us say a patient has a question regarding a nutritional supplement. You could either take them into a counseling room or more commonly go from pharmacy dispensing hardware to the search engine to get the answer. Personal Digital Assistants (PDAs) can be extremely useful to pharmacists. Examples of these devices include Palm, Treo, Motorola Q and Blackberry. Initially used in hospitals in a more clinical setting, these devices can make a community pharmacist's life a lot easier. Information updates to these devices can be activated via the Internet. Thus the pharmacist has the most current data available. What could be a typical scenario? You are counseling a patient on a quinolone. The patient asks you if this drug interacts with an anti-fungal they are taking. Instead of going back to your computer, you can use your PDA's drug interaction program to get an answer in seconds. Not only does this make you look good in front of a patient, you save time. A couple of companies in this field are Epocrates and Lexi-Comp. Both of these providers have a variety of software programs to meet a pharmacist's clinical needs. Other software that is readily available in the pharmacy can be used to help pharmacists manage their patients' refill histories and other clinical functions. For example, you can use the Microsoft programs like Excel or Access to manage patient refills. Also, you can access the Internet to find out how to take a course in disease state management.

MEDICARE PART D

Implementation of this government program has tested the mettle of most pharmacists. Issues with the reimbursement and timeliness of payments have caused problems for pharmacies nationwide. Regarding reimbursements, one pharmacist characterized them as "slow and low". Yet, computers can help ameliorate the impact of pharmacy's newest challenge. The key is efficiency and making up lower reimbursements by increasing volume. Utilizing computers and where appropriate prescription filling robots, can help improve a pharmacy's bottom line. While robots have been shown to be accurate and cost saving in terms of labor costs, they are not inexpensive and come with leasing and service agreements. If patients come into the pharmacy, who are on Medicare Part D and either misplaced their card or letter telling them their plan, pharmacy software exists that will tell the pharmacist what plan the patient selected or assigned – thus saving numerous time consuming phone calls. One important tip to remember is before you fill any new Medicare Part D plans (or any 3rd party plan for that matter) test an E1 enrollment transaction (making sure the pharmacy was connected to plan's network), and run a test claim first. A pharmacist can use the computer to enhance patient loyalty and save time. Here is how some pharmacies are doing this:

- use the Internet to help patients select the Part D plan based on the plan's formulary.
- go to Medicare.gov for plan information after speaking with a patient and getting a medication review.
- utilize computer software to do split billing of co-pays.
- print a patient's drug regimen so you can track drugs that were discontinued due to changes in a plan's formularies.
- utilize computer programs to track and document steps taken for re-establishment or renewing of medications.
- utilize prescription pricing software—this can help capture reimbursements that are being missed by third party payers.

One item that is particularly important is not to make drastic changes in hardware or software until the pharmacist sees that the rise in prescription volume coincides with an increase in bottom line. Another company called Third Party Station can capture your prescription traffic, move your reimbursements directly to your bank account and most importantly reconcile the transactions. With margins in pharmacy as tight as ever, spending a little money on having an extra pair of "eyes" watching your prescription submissions is money well spent (www.thirdpartystation.com).

IMPLEMENTING NEW TECHNOLOGY

Computertalk Magazine included an article in late 2006 outlining a strategy to use when implementing enhanced computer technologies. This involves training the most important segment of this transition: pharmacy employees. First and foremost, involving the staff from the beginning is crucial. Change is difficult for most people. One element of accurate dispensing of medications is following a process. So, involve the staff as early in the process as possible. Not only does a change of routine promote anxiety, but what about job status (is a computer replacing me?). Job status questions must be answered quickly and honestly. Also, management would be encouraging a positive work atmosphere if a proactive approach was taken to discussing changes in technology and job status. If possible, ask current employees what is missing with the current software. Then try to incorporate that into the software update.

Creating excitement is positive when introducing new technologies. Have a kickoff meeting and orientation scheduled with a member of the software or hardware company (computer vendor) present to answer questions. When training staff, during training have your computer vendor review any changes to the software. If you are using a completely new pharmacy software program, explain what the differences are compared to the old system. Also, review key features of the pharmacy software. Where possible, try to train employees before actually using computers during business. Do not forget the basics such as how to print out labels, load the printer and basic troubleshooting. Remember to order new labels BEFORE the new programs come to the pharmacy.

PHARMACY DATA SECURITY

With the advent of HIPAA, protecting and determining access to pharmacy information is more important than ever. Yet at the same time, security procedures should not be cumbersome. One solution that has proven effective is the use of fingerprint identification when accessing a computer. In March 2004, a major pharmacy chain in the United States incorporated this technology. According to company officials, this dramatically cut down on snafus with passwords and impediments to logging into the system. Also, audit trail creation was enhanced as well as tracking computer based training. The company that designed this system is DigitalPersona, Inc. (www.digitalpersona.com).

HARNESSING THE POWER OF THE INTERNET

Want to learn about new pharmacy business models? How about trends that affect your type of pharmacy? One way that pharmacists can use computers more efficiently is learn how to search for information. Bill Felkey and Brent I> Fox, Pharm.D., pharmacy faculty at Auburn University, tell students about the search engine Google. According to Felkey and Fox, there are over 5 billion web sites networked into the World Wide Web. Over 1 billion of these sites address health-care issues. What will make a pharmacist successful in this information age is not accessing the information, but knowing how to specifically search for something. Here is a quick synopsis on how to do this. First, go to www.google.com. Then click on the Advanced Search link. Then click on Advanced Search Tips. Then click on the link for basic search strategies. Taking a few minutes to learn how to search on the Internet will make searching for items faster and less frustrating. Let us say you want to find out how computers can enhance pharmacy practice from a patient counseling and dispensing accuracy perspective. Here is an example: if you type in *pharmacy computers* you will get over 3 million hits. Then put quotation marks around *pharmacy computers*. This will give you over 9,000 hits. This is quite a difference! To further cull the list, the pharmacist types "*pharmacy and computers*" + *community pharmacy* and the hits get reduced to just under 20! This is a free service. And if you use other search engines, the nomenclature and logic of searching will be similar.

Felkey and Fox have some other favorites. Google can do more than get you information. Let us say a pharmacist wants to learn about drug recalls on diabetes drugs. Maybe the pharmacist wants to find out the current activities of a competitor or track industry trends. He can use the *Google Alerts* application. This will allow the reader to receive an email once a day on any news or web presence pertaining to the key words you put in the Google alert fields. This is very useful, but the caveat is each email may not match exactly what you are inquiring about. For example, let us say you typed in *Asthma Management* pertaining to medication therapy. You would receive emails on Asthma Management pertaining to monitoring, healthcare costs, etc. One would not want to limit the alert too much because when you skim the email, it may make the user think differently about the subject area. Another favorite is *Google Answers*. Pharmacists are just as time deprived as the next person (when did you last sit down for lunch). Yet, if you have a question that needs answering, Google has a cadre of over 500 researchers who will answer your question for a fee (varies). You set the fee anywhere from \$2 to \$200, with a transaction fee of 50 cents. The question is posted on the Internet and depending on the

researcher's availability and fairness of your fee, the pharmacist could get an answer quickly. Also, the *Google Toolbar* is a great time saver and acts as a "spam sentry" for your computer. For example, the toolbar has a "pop-up blocker". If a pharmacist orders a lot of items for the pharmacy via computer, he can use an auto fill feature that helps you complete web-site registration forms. Let us say you want to find more information regarding a web page. With a single click, you can convert the page to a PDF file and use the Google Search Engine to find information that previously was unavailable. The pharmacist can get this from clicking on the *more* section on the Google home page. *Google Scholar* is also a helpful feature. If the pharmacist wants to read primary literature regarding a topic of interest, *Google Scholar* can help. For example, a pharmacist is working with a family medicine practitioner and needs info on the latest findings in metered dose inhaler administration. He could speak to the physician knowledgeably on this topic. Imagine if you could have a software application in your computer that could keep track of virtually everything in your laptop or PC. *Google Desktop* can help you find information on your computer you forgot was in the hard drive. When doing an Internet Search, articles in your computer that pertain to the search are listed alongside the current Internet hits. Let us say you want to communicate the pleasures and angst of being a pharmacist. If you like to write and keep a blog (web-based journal) on a computer the *Google Toolbar* enables you to set up your own blog site and even gives you space to publish! In addition, you can do a search for other like-minded individuals. Writing a blog takes time, commitment and knowledge of a subject. In addition, the pharmacist's grasp of grammar, syntax, organizing thoughts and interpretation of situations is on display for everyone to see. Recently the *Wall Street Journal* had an article on blogging; employers have started to read blogs to hire potential employees! The article went on to say this practice is becoming more common. This makes sense because over time the employer is getting an untarnished sense of a person's abilities. Imagine a pharmacist having their own virtual career counselor.

INTEGRITY AND THE INTERNET

Because the Internet is open to everyone, opportunities for people to mislead or lie exist. This happens often in healthcare, especially with patients dealing with terminal diseases. So, when these types of patients do Internet searches on healthcare topics they will get responses or "hits" from reputable and not so reputable sources. The patient can utilize the pharmacist to discern what is useful. One way pharmacists can guide patients in evaluating websites is to look for the HON seal of accreditation – sort of the Internet's "Good Housekeeping Seal of Approval". HON stands for Health On the Net Foundation. And here is some information taken directly from a section of the website: www.hon.ch/visitor.html. HON has been created for improving the quality of information intended for both patients and medical professionals for facilitating quick access to the most relevant and up-to-date medical discoveries. The HONcode is the oldest and most used ethical and trustworthy code for medical and health related information on the Internet. The HONcode is designed for two target audiences: the general public and the web publisher. Here are some facts about HON:

- Most widely accepted reference for online health and medical publishers.
- The HONcode is used by over 5000 websites covering 72 countries.
- The main website: www.healthonnet.org is visited by 27,000 people worldwide every day.

The website can be viewed in many languages, and the user can put in a web address to verify if it has HONcode accreditation. For a website to earn HON accreditation, the process is quite rigorous. Here is the abridged version of the HONcode of conduct:

1. Authoritative: indicate the qualifications of the authors.
2. Complementarity: information should support, not replace, the doctor-patient relationship.
3. Privacy: respect the privacy and confidentiality of personal data submitted to the site by the visitor.
4. Attribution: cite the source(s) of published information, date and medical and health pages.
5. Justifiability: site must back up claims relating to benefits and performance.
6. Transparency: accessible presentation, accurate email contact.
7. Financial disclosure: identify funding sources.
8. Advertising policy: clearly distinguish advertising from editorial content.

POLITICAL ADVOCACY

In the "Taking Care of Patients" section, a number of handheld personal digital assistants (PDAs) were mentioned. Pharmacy's reimbursement rates seem under attack almost daily from a variety of sources. Whether you are a hospital pharmacy director at the Mayo Clinic in Minnesota or a community pharmacist in New York City, cuts in reimbursements curtail your ability to make a living for yourself and your loved ones – not to mention hampering patient care. Computer software can help make pharmacists a more unified force. Any pharmacist who belongs to a national pharmacy organiza-

tion has seen computers used to notify us of deleterious trends to our profession and spurred us to take action. For example, the National Community Pharmacist Association has a section of their website called "NCPA Legislative Action Center" When legislative brushfires emerge, a pharmacist can go to this section, type in the store's zip code and find out the contact information of the federal and state legislators. Sometimes calls for action come in a variety of ways – computer generated faxes and email blasts. Some new wrinkles to the way of communicating to people involve text messaging. So whether it is a bill going in front of Congress or a changing of your state's pharmacy scope of practice, computers can help mobilize large numbers of us quickly.

CONCLUSION

Computers are no longer just machines pharmacists or pharmacy technicians use for typing data. New technologies have made computers even faster and more powerful. With the advent of the Internet and the myriad of opportunities the Internet contains, these two forces are becoming powerful allies in shaping the future path of our profession. Recently, a pharmacy intervention project was done regarding asthma. With the success of this project and the advent of pharmacy benefit managers having to justify expenditures for patients spending a lot on medications, expect to see more of these programs. Currently, Community Care Rx is working with pharmacists to manage these potentially financially burdensome patients. Patient counseling takes on a whole new perspective with the advent of computers and technology. Pharmacists can use the Internet to explain disease states and answer patient questions. Personal digital assistants and computer software, coupled with pharmacist counseling and empowerment, can help ameliorate one of the biggest problems in health-care today: non-adherence. With the plethora of software programs available, pharmacists are limited only by their creativity and ingenuity in designing programs to track patient medication usage. In addition to using the computer to enhance one-to-one interactions, judicious evaluation of a pharmacy's workflow could mean investing in pharmacy robots to dispense prescriptions, saving money while increasing a pharmacist's time with patients. Implementing new technology in a pharmacy setting requires open communication, careful planning and practicing with hardware and software before using for business. While this technology is quite powerful, protecting pharmacy data from malicious use is important. Biometric technology helps achieve this objective. Understanding of Internet search strategies is crucial for a pharmacist's ability to manage and utilize the huge amount of data found on the Internet. Regardless of the amount of "web surfing" a patient does, interpretation of medication claims rests squarely on the shoulders of a pharmacist. Finally, political advocacy takes on a faster, more targeted approach when computers are used to contact pharmacy constituencies.

WEBSITES FOR PHARMACISTS TO LEARN MORE ABOUT UTILIZING COMPUTERS

www.google.com

www.mco-inc.com

www.lexi.com

www.medinterventions.com

www.communitycarerx.com

www.healthonnet.org

www.epocrates.com

www.digitalpersona.com

TOPICS REMAINING FOR 2007

Asthma

OTC Antidiarrheals

H. pylori & Ulcer Disease

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EMAIL Address (we need this) _____

LESSON EVALUATION

Please fill out this section as a means of evaluating this lesson. The information will aid us in improving future efforts. Either circle the appropriate evaluation answer, or rate the item from 1 to 7 (1 is the lowest rating; 7 is the highest).

1. Does the program meet the learning objectives?

List ways for pharmacists to harness the Internet to help patients Yes No

Describe ways for pharmacists to become more practice oriented by using the Internet Yes No

Discuss the significance of enhancing patient care via computers & the Internet Yes No

2. Was the program independent & non-commercial Yes No

	Poor		Average		Excellent	
	1	2	3	4	5	
3. Relevance of topic					6	7

4. What did you like most about this lesson? _____

5. What did you like least about this lesson? _____

Please Select the Most Correct Answer

- | | |
|---|---|
| <p>1. The program utilizing pharmacists intervention in asthma care is:
 A. Asthma Now
 B. Asthma Intervention Project
 C. Breathright
 D. B & C</p> <p>2. How many patients participated in the Asthma Control Test?
 A. 2,423
 B. 6,125
 C. 3,987
 D. 5,432</p> <p>3. Hearing impaired patients can be counseled via a computer when the pharmacist types out questions in the pharmacy & the patient provides answers.
 A. True B. False</p> <p>4. What is the name of the Community Care Rx's Medication Therapy Management Program?
 A. Community MTM
 B. No Patient Left Behind
 C. Medicare Part D Plus
 D. More Medications/Less Illness</p> <p>5. The price point where a pharmacist would perform Medication Therapy Management for a Medicare Part D patient is \$4,000.
 A. True B. False</p> | <p>6. What was the total amount paid to pharmacies for counseling asthma patients?
 A. More than \$1.6 million
 B. More than \$200,000
 C. None, it was free
 D. None of these</p> <p>7. Drug information data updates can be done via the Internet.
 A. True
 B. False</p> <p>8. Implementing new computer technology requires:
 A. Involve staff from the beginning
 B. Have a kickoff meeting
 C. Train before using for business
 D. All of these</p> <p>9. Harnessing the Internet:
 A. Takes a long time
 B. Can be done using Google
 C. Incorporates various search tips
 D. B & C</p> <p>10. Pharmacists may utilize computers to support political issues by:
 A. Go to national pharmacy organization meetings
 B. Read computer generated faxes
 C. Read computer generated emails
 D. All of these</p> |
|---|---|

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