

# Where there are no pharmacists – Testing your knowledge

## Chapter 1.1 and 1.2

In these chapters you learn about Primary health Care and the duties of a pharmacist and how access to the right medicines is part of PHC.

### Exercises

**The role of pharmacist in a health facility includes ....**

**(Tick all boxes that are right)**

- ☐ Providing any medicines the patient asks for
- ☐ Dispensing medicines that is prescribed by the staff of the health facility
- ☐ Dispensing what you think is right if you can't understand the prescriber's writing.
- ☐ Buying medicines from a pharmacy in town to sell to patients
- ☐ Labelling clearly the medicines prescribed for patients
- ☐ Talking to the patients about their medicines and answering questions.
- ☐ Storing the medicines in an orderly way
- ☐ Keeping a tally of the medicines that have been used
- ☐ Re-ordering medicines for the clinic

**Primary Health Care (PHC) as defined in 1978 is ....**

**(Tick all boxes that are right)**

- ☐ Access to a doctor in every village
- ☐ A good GP clinic
- ☐ Good hospitals in every village
- ☐ Affordable health care and medicines
- ☐ essential health care based on scientifically sound and socially acceptable methods and technology, made universally accessible and affordable to individuals, families and communities by their full participation

**Primary Health Care does NOT include (tick all boxes you agree are NOT part of PHC)**

- ☐ Access to safe water
- ☐ Access to community Health Workers
- ☐ Antenatal care
- ☐ Good sanitation
- ☐ Health education

- ☐ Prevention of common diseases
- ☐ Access to free modern medicines
- ☐ Family planning
- ☐ Referral to good curative services when needed
- ☐ Maternal and Child health care
- ☐ Immunisation
- ☐ Good nutrition
- ☐ Community participation in decisions about health services
- ☐ Community support for community health workers
- ☐ Control of communicable diseases
- ☐ Control of epidemics
- ☐ Health workers from the community

**Access to appropriate needed medicines by everyone in the community requires:**

**(Tick all boxes that are right)**

- ☐ A good distribution system so that the medicines can be transported to all areas of the country
- ☐ Plenty of money to buy the most modern medicines
- ☐ Health workers who understand how to use the medicines
- ☐ National policies that support the importation, distribution and use of appropriate and safe medicines at prices people can afford.
- ☐ A good record keeping system so the right medicines needs can be calculated and appropriate orders made
- ☐ Good storage conditions

## Chapter 1.3

In this chapter you learn about government policies and selection of the right medicines.

### Exercises

#### National Medicines Policy (True or false [T or F] )

National Medicines Policy

- ☐ only applies to the Public sector
- ☐ only needed in poor countries
- ☐ defines the areas that will be covered by the policy and it should cover activities in public, private, NGO and faith-based (religious) sectors
- ☐ does not have to match the pharmaceutical legislation
- ☐ is linked to National Health Policy
- ☐ is a guide for action throughout the whole pharmaceutical sector
- ☐ outlines a country's goals, for example improving people's access to good-quality essential medicines and ensuring their appropriate use, and sets out the roles and responsibilities of the main actors in both the public and private sectors.

#### Essential Medicines ARE (tick)

- ☐ The most modern medicines available for a disease
- ☐ The cheapest drugs available
- ☐ Medicines that act quickly
- ☐ Medicines to treat poor people who cannot afford to pay
- ☐ Injections
- ☐ Medicines needed for the most common problems in a community that are safe, effective and affordable

#### Essential medicines list (True or false [T or F] )

- ☐ Is made by a group of doctors who decide which medicines they would like to be available
- ☐ should be made before treatment guidelines are prepared
- ☐ should be prepared after treatment guidelines have defined the medicines that are needed
- ☐ do not have to be updated regularly
- ☐ can be added to by anyone at any time
- ☐ must be updated whenever new treatment guidelines are prepared
- ☐ is only useful for the public sector
- ☐ needs to be available to everyone working in the health sector

- ☐ its use is a guarantee that products are **excluded** which haven't been properly evaluated, or are known to be quite dangerous, or which have nothing to do with the needs of the population
- ☐ excludes inappropriate drugs that could be made available by donation

**Appropriate or rational use of medicine is ..... (True or false [T or F] )**

- ☐ Prescribing what the patient wants
- ☐ Prescribing the newest medicine available.
- ☐ Prescribing the right medicine for the problem in the right dose at the right time and for the right duration
- ☐ Prescribing as much medicine as the patient can afford to buy or wants
- ☐ Prescribing what you have most of on stock
- ☐ Prescribing injections because the patients think they work best
- ☐ Prescribing a long list of medicines so some of them should work
- ☐ Prescribing expensive medicines because the patient thinks they are better
- ☐ Prescribing according to National Treatment Guidelines (STGs)

**Inappropriate or irrational use of medicines can occur when .....**

**(True or false [T or F])**

- ☐ Prescribers lack enough education and training
- ☐ Prescribers copy inappropriate role models
- ☐ Prescribers follow national treatment guidelines (STGs)
- ☐ Prescribers always use Pharmaceutical industry information about medicines' efficacy
- ☐ Prescribers get paid for dispensing the medicines they prescribe
- ☐ There are short consultation times
- ☐ There is no lab capacity for accurate diagnosis
- ☐ The right medicine is not in stock
- ☐ There is not enough regulation
- ☐ Regulations are not enforced
- ☐ Non-essential medicines are available
- ☐ The STGs remain in the MoH – are not distributed

### **Donated medicines (True or false [T or F] )**

- ☐ Donations are usually a good source of medicines
- ☐ It is important to have a national donation policy
- ☐ Donors must only provide donations in line with national policy
- ☐ Close links with Customs authorities is very important
- ☐ Donations can only be accepted if the donor has a written request from the FPBSC
- ☐ You should ask visiting tourists for donations

### **National Programs (Eg HIV, TB, IMCI Family Planning etc) (True of False [T or F] )**

- ☐ It is alright for national programs to be run independently from the other routine programs in a health facility
- ☐ Trainings for medicines used in national programs can be run without consultation with the department of pharmacy
- ☐ It is important for pharmacy workers to be aware of the management of national programs.
- ☐ Medicines for use in national programs must not be introduced without consulting with the National Medicines and Therapeutics Committee and the pharmacy department so the recommendations do not conflict with STGs and EML
- ☐ Management of medicines for national programs should be integrated with management of all other medicines
- ☐ It is not important to talk to the people introducing or managing the national programs
- ☐ People introducing or managing the national programs must collaborate with the pharmacy department
- ☐ Medicines for national programs need separate storage warehouses and staff
- ☐ No records need to be kept about use of medicines for national programs because they will be re-supplied anyway
- ☐ The range of medicines available at different level facilities might have to be changed to fit with the needs of special programs
- ☐ Health workers do not mind making different reports for several different programs
- ☐ The MOH should develop one reporting format for health facilities that covers all activities

## Chapter 1.4

In this chapter you learn about the laws and regulations that apply to medicines and the supply of medicines and why they are important.

### Exercises

**Registration of medicines to be allowed into the country is important because**

**(Tick CORRECT answers)**

- ☐ it controls medical products that can be imported and distributed and by whom and under what conditions
- ☐ it informs the Customs authorities to know what they should allow into the country
- ☐ it prevents medicines that are not registered from being imported
- ☐ It prevents medicines that are not known or are not safe from coming into the country
- ☐ it controls the quality of medicines that can be imported into a country

**There are schedules or categories for the availability of medicines that mean...**

**(Tick CORRECT answers)**

- ☐ Most medicines can be sold in supermarkets
- ☐ Some medicines can be used safely by primary health workers like Village Health Workers
- ☐ Some medicines can only be used by health professionals with more special training, for example women's health workers, specialist nurses
- ☐ There is no difference between which medicines can be supplied doctors and nurses
- ☐ Most medicines can only be prescribed by specialists
- ☐ Some medicines can only be used by doctors at the hospital level
- ☐ Medicines that are not safe to be sold over the counter can only be prescribed by specially trained staff.
- ☐ Patients need to see a doctor for a prescription if they need certain medicines

## Chapter 1.5

In this chapter you learn about why it is important to know about medicines and what each medicines is used for and whether it is right for a particular person; and why medicines come in different forms – tablets, creams, mixtures injections and so on. The chapter explains different categories of medicines and how they are used differently.

### Exercises

**The follow statements are true or false**

**(Mark the boxes T or F)**

- ☐ Medicines can be poisonous if more than the right dose is given
- ☐ There may be side effects that medicines can cause
- ☐ All medicines are safe to take during pregnancy
- ☐ Medicines do not react with each other
- ☐ Dosage forms (eg tablets, mixtures, creams, injections) help deliver the medicine to the part of the body where it needs to work.
- ☐ Injections are always more effective than oral medicines
- ☐ Oral medicines can be just as effective as injections, are easy to administer and they are usually cheaper.
- ☐ Medicines can cure all diseases.
- ☐ Medicines taken for diabetes and asthma control the disease rather than cure it.
- ☐ Medicine taken to relieve pain, like paracetamol, control the pain but will not cure the disease or illness that is causing the pain.
- ☐ Not everyone will suffer side effects from a medicine and it is difficult to predict who might.
- ☐ Some medicines are taken to prevent an illness or condition.
- ☐ No medicines have to be taken for a long period.
- ☐ Antibacterials are used to treat all infections.
- ☐ Anti-diabetic medicines reduce the amount of sugar in the blood.
- ☐ Anti-diabetic medicines include *glibenclamide* and *metformin*.
- ☐ Promethazine can cause drowsiness.
- ☐ There is no need to tell people that if they begin to have the symptoms of any type of allergy, they should see a health worker, doctor or nurse immediately.
- ☐ Metronidazole and alcohol are safe to take together.
- ☐ Medicines are safe to take during breast-feeding.

## Chapter 1.6

This chapter explains more about medicines: what does generic mean? Why are some medicines controlled? What is drug dependence? What are fixed dose combinations?

### Exercises

#### Generic medicines (True or false [T or F])

- ☐ Are not as good as brand name medicines
- ☐ Do not have to comply with quality control
- ☐ Are usually cheaper than original brand name medicines
- ☐ Are only used for poor people
- ☐ Must meet the same quality standards as brand name medicines

#### Controlled medicines (True or false [T or F])

- ☐ Can be used for the wrong reasons and people can become addicted to them.
- ☐ Controlled medicines are not useful for any illnesses
- ☐ Controlled medicines must be available for patients who need them.
- ☐ Controlled medicines should be stored in a locked cabinet that can only be accessed by the pharmacist or the person who is responsible for these medicines.
- ☐ There are no laws and regulations to control how these medicines must be stored and handled and how they can be prescribed and dispensed.
- ☐ Palliative care including pain relief is designed to reduce suffering for people with a serious, incurable disease, such as kidney disease, cancer or heart failure.

#### Traditional medicines (True or false [T or F])

- ☐ Traditional medicines are always safe
- ☐ Some traditional and herbal medicines interact with modern medicines.
- ☐ Traditional medicines may not be safe because their ingredients are not controlled for safety and quality.



**Fixed dose combinations (FDC)** eg Cotrimoxazole containing sulphamethoxazole and trimethprim **(True or false [T or F])**

- ☐ FDCs are medicines with more than one active medicine in one formulation
- ☐ With FDCs there are fewer tablets or capsules that the patient must take, making treatment simple, and easier when a patient does need more than one medicine
- ☐ Sometimes a patient will have a side-effect or reaction to just one of the ingredients in an FDC. It can be difficult to work out which part of the combination is causing the problem
- ☐ It is always possible to mix two or more medicines in one table or capsule.

## Chapter 2.1

In this chapter you learn how to calculate what needs to be ordered both at a national level and from your health facility to keep up the right supply of the right medicines for your patients.

### Exercises

**You will have a reliable supply of the right medicines in your health facility by....**  
**(True or false [T or F] )**

- ☐ Re-ordering everything that is on an allocation sheet
- ☐ Having pre-packed kits of supplies sent regularly
- ☐ Sticking to the treatment guidelines (STGs) when you prescribe for patients
- ☐ Keeping accurate patient records and using them to guide the monthly orders from the clinics to the medical store
- ☐ Having printed order forms including the medicines and supplies normally found at a particular level of the health service
- ☐ Providing patients with standard courses of treatment according to the STGs and keeping records that can be added to calculate ongoing needs
- ☐ Good communication with the warehouse (CMS) to check orders and get information about supplies
- ☐ Looking at the Patient Register for information to help you work out how much you need to order

## Chapter 2.4

This chapter will show you good ways to receive and store and look after your stock as well as making it easy to find things.

### Exercises

#### How can you tell if medicines are damaged or not good quality?

(True or false [T or F] )

- ☐ Water damage inside carton
- ☐ Containers or bottles are not sealed, or are opened or not labelled,
- ☐ The label is different from what you are used to
- ☐ The expiry date has passed or will pass before you can use it
- ☐ Packaging or bottles are broken
- ☐ Tablets look crumbly
- ☐ Liquid that should be clear has something floating in it.

#### When you unpack medicines that have just arrived you should?

(True or false [T or F] )

- ☐ Count tablets by the number of tins
- ☐ Put stock on the shelves in the order they arrive
- ☐ Enter the stock on the stock cards according to the number of containers or tins
- ☐ Check off each item carefully on the packing sheet and record any mistakes or differences
- ☐ Enter the stock on the stock card at the same time as you checked the packing sheet
- ☐ Enter the stock on the card for the appropriate strength and according to the number of units eg a unit is a tablet or capsule

(True or false [T or F] )

- ☐ Arrangement of stock by therapeutic category has good advantages
- ☐ Certain products need special storage conditions
- ☐ Heat does not affect modern medicines
- ☐ Stock cards are not needed if you have a computer
- ☐ Regular physical stock checks of all items is important
- ☐ It is not important to look at the date of manufacture of stock

## Chapter 3.1,2,3 Dispensing and RUM

In this chapter you learn that dispensing is the final act of preparing and giving out medicines to the people that need them. This is the step that is the whole reason for selecting, purchasing and storing medicines. It is the most complex and most important step and it must be done well.

If the wrong medicine or wrong strength of medicine is dispensed, the results can be serious; the patient could become sicker or even die. It is therefore important that you understand the medicines you are dispensing and that the person receiving the medicines understands how to take them.

You will understand that the rational use of medicines means that patients receive medications appropriate to their clinical needs, in doses that meet their own individual requirements for an adequate period of time, and at the lowest cost to them and their community.

### Exercises

**When you dispense a medicine to a patient..... Are the following statements true or false [T or F]**

- ☐ Tablets can be counted in your hands
- ☐ You need to know who the patient is Self? Family member? Neighbour?
- ☐ If you explain well to the patient how to take the medicine you don't need to write instructions on the label
- ☐ When you are dispensing a mixture for a child from a powder that needs water to be added, it is OK to let the mother or carer work out how much water to add.
- ☐ You always need to include everything on the label and also explain to the patient or carer how the medicine should be taken.
- ☐ You don't have to tell patients how to store their medicines. Heat does not affect modern medicines once they have been dispensed to a patient.
- ☐ You must also keep a complete record of what you have dispensed to a patient
- ☐ Dispensing records are important to keep because they help you calculate the quantities of medicines to keep in stock.
- ☐ When you take bottles of stock from the shelf you must complete the stock card.
- ☐ When you complete the stock card you record the number of containers of stock.
- ☐ You don't need to CHECK after you have completed the dispensing
- ☐ You don't need to know whether the patient is pregnant or breastfeeding
- ☐ You don't need to know what other medicines the patient is taking
- ☐ You don't need to label tablets that have been pre-packed in the warehouse.

## Chapter 3.4 Improving use of medicines in your community

In this chapter you learn about how you can improve use of medicines in your community.

### Exercises

**Put 1, 2, 3 in the boxes you think are the commonest reason for misuse of medicines in Fiji communities and tick all the other correct answers**

- ☐ Health workers are not adequately trained
- ☐ Pharmaceutical companies provide misleading advertising
- ☐ National policies to control the import and use of medicines are not in place or not enforced
- ☐ Patients have traditional beliefs about medicines and how to use them
- ☐ Patients ask for medicines without prescriptions
- ☐ There are bribes and corruption for people to sell medicines without prescriptions
- ☐ People in the community do not know enough about medicines.
- ☐ People use medicines that have been prescribed for someone else
- ☐ People follow advertisements they see on TV.
- ☐ People use the internet to help them decide what medicines they need
- ☐ People take advice from friends and neighbours instead of going to the doctor.
- ☐ The clinics are often out of stock of medicines so people don't bother to go there. They buy some medicines from a supermarket or pharmacy without prescription.
- ☐ They go to a local store or traditional healer because it is easier than going to a clinic.
- ☐ Patients don't ask questions about their medicines

**Can you think of more reasons why medicines can be used wrongly in the community?**

**Question for patients: When you get a prescription from your doctor, what should you do – Tick T or F**

- ☐ Don't ask questions of the doctor - he or she is too busy
- ☐ Ask your doctor any question you want to ask
- ☐ Don't ask you pharmacist or health worker any questions – it is not their job to answer questions
- ☐ Ask your pharmacist or health worker anything you want to know about your medicines

**How many of these things MUST be written on the label**

**(Mark the boxes true or false - T / F )**

- ☐ name of patient
- ☐ name of medicine
- ☐ strength of medicine
- ☐ colour of tablets or mixture
- ☐ address of patient
- ☐ quantity of medicine dispensed
- ☐ dosage instructions
- ☐ date of dispensing
- ☐ any special instructions, eg take with food.
- ☐ any special storage instructions

**Keeping complete patient records is important because**

**(Can you find a wrong answer here? Mark the boxes T or F)**

- ☐ you need to be able to check when patients got their tablets in case they want more - too quickly – you think
- ☐ you need to be able to check so you know what they have had before and whether there is a problem with adding new medicines
- ☐ doctors might want to know what had been prescribed before
- ☐ patients might have questions about something prescribed previously
- ☐ you need to know what medicines the patients need so you can make sure you don't run out of stock
- ☐ you can check whether prescriptions are according to the STGs

**Can you think of more right answers?**