Prescriptions

Prescriptions – Parts of a Prescription

- A **prescription** is a legal and professional document written by a licensed prescriber (such as a doctor, dentist, or nurse practitioner) that authorizes a pharmacist to dispense a specific medication to a patient.
- It acts as a communication tool between the prescriber, the pharmacist, and the patient.

Parts of a Prescription:

- Each prescription typically includes the following components.

It is essential for a pharmacist to understand and review each of these parts carefully:

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 ------------------------------------------------------
| Dr. John Smith, MD                    Date: 01/11/2025  |
| Reg. No: 123456                    Phone: (123) 456-7890  |
 ------------------------------------------------------
| Patient: Jane Doe       Age: 6 yrs                      |
| Address: 123 Elm Street, City                           |
 ------------------------------------------------------
| Rx:                                                     |
|     Amoxicillin 500 mg capsules                         |
|     Sig: Take 1 capsule by mouth every 8 hours          |
|          after meals for 7 days                         |
|     Dispense: 30 capsules                               |
|     Refills: 2                                          |
 ------------------------------------------------------
| [Prescriber's Signature]                                |
| DEA No. (if controlled): AB1234567                      |
| Schedule II – No refills permitted                      |
 ------------------------------------------------------
```

A. Prescriber Information:

- **Name, qualification, and contact information** of the prescribing professional.
- In some cases, registration number (especially for controlled substances).
- This information is important for verifying authenticity and for contacting the prescriber if clarification is needed.

B. Date of Prescription:

- The date when the prescription is written.
- Helps determine the validity and relevance of the treatment.

- Legally important for controlled substances, which may have a limited time for validity (e.g., 7 to 28 days).

C. Patient Information:

- Full **name**, **age or date of birth**, and sometimes address.
- Age is critical in pediatrics or geriatrics for dose calculation and therapy assessment.
- Patient identifiers ensure correct dispensing and record-keeping.

D. Superscription:

- Traditionally marked with "Rx" – a Latin abbreviation meaning "take thou."
- This symbol denotes that the following instructions are a prescription.

E. Inscription:

- Contains the **name of the medication**, **strength**, and **dosage form**.
- Example: Amoxicillin 500 mg capsules.
- This is the actual content of the prescription—the drug to be dispensed.

F. Subscription:

- Directions to the **pharmacist** about the quantity of medication to dispense.
- Example: Dispense 30 tablets.
- May also include special preparation instructions for compounding prescriptions.

G. Signa (or Sig.):

- Instructions to the **patient** about how to take the medication.
- Includes **dose**, **route**, **frequency**, **duration**, and **special instructions**.
- Example: Take one tablet by mouth twice daily after meals for 7 days.

H. Refill Information:

- Indicates the number of **authorized refills**.
- If absent, no refills are permitted unless otherwise clarified with the prescriber.
- Refill regulations differ based on the class of medication.

I. Prescriber's Signature:

- Must be signed by the prescriber to validate the prescription.
- For electronic prescriptions, a secure digital signature is used.
- Unsigned prescriptions are not legally valid.

J. Controlled Substance Information (if applicable):

- Schedule classification (e.g., Schedule II) must be considered.

- Prescriptions for controlled drugs often have stricter requirements (e.g., no refills, written in ink, specific forms).

Legality of Prescription

- Pharmacists have a legal and professional responsibility to ensure the safe and appropriate use of medications.
- This includes assessing prescriptions for legality and identifying medication-related problems (MRPs) such as drug interactions, incorrect dosages, therapeutic duplications, or contraindications.

Legal Aspects in Community Pharmacy:

1. **Prescription Validity:**
   - Must be written by a licensed prescriber with the legal authority in the jurisdiction.
   - Certain medications (e.g., controlled drugs) have specific validity periods and documentation requirements.
   - The prescription must be dated and signed.
   - Generic substitution laws may apply, requiring pharmacist to dispense generic versions unless "Do Not Substitute" is written.
2. **Scope of Practice:**
   - Pharmacists must verify that the prescriber is authorized to prescribe the drug (e.g., a dentist prescribing antibiotics vs. opioids).
   - Certain categories of drugs can only be prescribed by specialists.
3. **Controlled Substances Regulations:**
   - In many countries, special forms or electronic systems are used for Schedule II/III drugs.
   - Prescription must contain the quantity in words and figures.
   - Tamper-proof or electronic prescription systems are mandatory in some jurisdictions.
4. **Patient Consent and Privacy:**
   - Pharmacists must respect patient confidentiality.
   - Any counseling or discussion about drug therapy must comply with data protection laws.

Identification of Medication-Related Problems

- Medication-related problems can arise due to multiple reasons.

- Community pharmacists are often the last healthcare professional to review the prescription before the patient uses the medication, making their role critical.

Common Types of MRPs:

A. Drug-Drug Interactions:

- Occur when two or more drugs interact, reducing effectiveness or increasing toxicity.
- Example: Warfarin and NSAIDs increase bleeding risk.
- Pharmacists use software systems or clinical knowledge to detect interactions.

B. Drug-Disease Interactions:

- A drug may worsen a patient's existing condition.
- Example: Beta-blockers in asthmatic patients can trigger bronchospasm.

C. Incorrect Dosage or Duration:

- Doses that are too high can cause toxicity; too low may be ineffective.
- Pediatric and geriatric populations are especially vulnerable.
- Duration is important for antibiotics to prevent resistance.

D. Therapeutic Duplication:

- Occurs when the same or similar medications are prescribed together.
- Example: Two antihistamines being prescribed simultaneously.

E. Contraindications:

- Some drugs are not recommended in specific conditions or populations.
- Example: ACE inhibitors in pregnant women.

F. Allergies and Intolerances:

- Pharmacists must check for documented allergies.
- Example: A penicillin-allergic patient prescribed amoxicillin.

G. Patient-Specific Issues:

- Renal or hepatic impairment may require dose adjustments.
- Non-adherence risks, polypharmacy concerns, or socio-economic barriers may affect treatment outcomes.

Pharmacist's Role in Community Pharmacy:

- Review prescription against patient history.
- Use clinical decision support tools to detect interactions.
- Contact prescriber if clarification or therapy modification is needed.
- Educate the patient on potential side effects and what to do in case of adverse effects.

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