

House Bill 4686  
Sponsor: Rep. Michael J. Bennane  
Committee: Public Health

Complete to 9-13-93

**A SUMMARY OF HOUSE BILL 4686 AS INTRODUCED 5-4-93**

The bill would amend the Public Health Code to require pharmacists to keep certain information on patients, to conduct prospective drug reviews before filling certain prescriptions, and to offer to discuss with patients presenting certain prescriptions "appropriate" information regarding the prescription.

Prospective drug reviews and patient "counseling." The bill would require pharmacists to conduct prospective drug reviews before dispensing or delivering a new prescription or refilling a prescription ("to the extent considered appropriate by the pharmacist in his or her professional judgment"). Pharmacists would have to consider all of the following in conducting a prospective drug review:

- (1) Potential drug problems from "therapeutic duplication";
- (2) interactions between drugs, including over-the-counter drugs;
- (3) incorrect drug dosage or duration of drug use;
- (4) allergic reactions to drugs;
- (5) clinical abuse or misuse; and
- (6) contraindication of drugs for a disease if the diagnosis was included on the prescription by the prescriber.

Unless a prescription was dispensed in a hospital or unless, in the pharmacist's professional judgment, a face-to-face discussion would be unnecessary or inappropriate, the bill would require pharmacists (or their designees) to offer to discuss, face-to-face, with the patient (or the person presenting the prescription on behalf of the patient) "appropriate" information regarding a prescription. (If a pharmacist decided that a face-to-face offer to discuss prescription information was unnecessary or inappropriate, he or she could offer to discuss the information in writing, by telephone, or "in a manner determined appropriate by the pharmacist.") In making a professional judgment about offering to discuss a prescription (and about the content of the prescription), pharmacists could consider the patient information (see below) that the bill would require pharmacists to keep on patients.

If the pharmacist's offer to discuss the prescription were accepted, the pharmacist would be required to conduct the discussion face-to-face, if practicable, or by telephone. Pharmacists wouldn't be required to give the information proposed under the bill if their offer to discuss were refused.

The proposed discussion would have to include "elements of medication information considered appropriate by the pharmacist," including, but not limited to, all of the following:

- (1) The name and description of the prescribed drug;

- (2) the drug form and dose, how it was to be taken, and how long to take it;
- (3) if the diagnosis is included on the prescription, the intended use and expected effects of the drug;
- (4) special directions and precautions for preparing, taking, and using the drug;
- (5) common severe or adverse effects or interactions with other drugs and "therapeutic contraindications" (that is, reasons why the drug wouldn't be appropriate to the patient's condition);
- (6) ways the patient can monitor his or her use of drugs;
- (7) how to store the drug properly;
- (8) information on prescription refills; and
- (9) comments relevant to the patient's drug therapy, including, but not limited to, information about the particular patient or the prescribed drug.

Pharmacists could supplement their discussions with additional electronic, printed, or video information.

Records on patients. The bill would require pharmacists (or their designees) to make "reasonable" efforts to obtain, record, and keep the following patient information at the pharmacy:

- \* the patient's name, address, telephone number, date of birth or age, and gender;
- \* if considered significant by the pharmacist, an individual patient history including, but not limited to, each patient's known drug allergies and reactions, a "comprehensive" list of drugs and devices used by the patient, and the patient's chronic conditions or diseases (if that information is available); and
- \* additional comments by the pharmacist "relevant to the patient's drug use."

Pharmacists would record the above information on patients in the patient's manual or electronic profile, and could include documentation of the pharmacist's offer to discuss the prescription or a patient's refusal of the offer (the offer and any refusal also could be recorded in the prescription signature log "or any other system of records"). If there were no record that a patient had refused a pharmacist's offer to discuss a prescription, there would be a presumption that the pharmacist had made the offer, the patient accepted the offer, and the pharmacist provided the discussion.

MCL 333.17707, 333.17712, and 333.17713