

**WEST VIRGINIA  
SECRETARY OF STATE**

**KEN HECHLER**

**ADMINISTRATIVE LAW DIVISION**

Form #3

Do Not Mark in this Box

**FILED**

APR 4 1 14 PM '96

OFFICE OF WEST VIRGINIA  
SECRETARY OF STATE

**NOTICE OF AGENCY APPROVAL OF A PROPOSED RULE  
AND  
FILING WITH THE LEGISLATIVE RULE-MAKING REVIEW COMMITTEE**

AGENCY: WV Board of Pharmacy TITLE NUMBER: 15

CITE AUTHORITY W. Va. Code Sections 29A-3-3, 30-5-2

AMENDMENT TO AN EXISTING RULE: YES  NO

IF YES, SERIES NUMBER OF RULE BEING AMENDED: \_\_\_\_\_

TITLE OF RULE BEING AMENDED: \_\_\_\_\_

IF NO, SERIES NUMBER OF NEW RULE BEING PROPOSED: 7

TITLE OF RULE BEING PROPOSED: Registration of Pharmacy Technicians

THE ABOVE PROPOSED LEGISLATIVE RULE HAVING GONE TO A PUBLIC HEARING OR A PUBLIC COMMENT PERIOD IS HEREBY APPROVED BY THE PROMULGATING AGENCY FOR FILING WITH THE SECRETARY OF STATE AND THE LEGISLATIVE RULE MAKING REVIEW COMMITTEE FOR THEIR REVIEW.



Authorized Signature

15:00

## SUMMARY OF PROPOSED LEGISLATIVE RULE

15 C.S.R. 7.

### Registration of Pharmacy Technicians.

West Virginia Code § 30-5-5(a) passed by the West Virginia Legislature in 1995 states that, on or after the first day of July 1996, any person practicing as a pharmacy technician in the State of West Virginia shall be registered with the Board of Pharmacy and in order to become registered as a pharmacy technician they must satisfactorily complete a Board approved pharmacy technician program established by rule. The statute also states that the training program shall be designed to train individuals to perform non-professional functions as described in legislative rules and also that pharmacy technicians shall be identified by a name tag and designation as a pharmacy technician while working in a pharmacy. The following rule establishes the qualifications for registration as a pharmacy technician and sets up the core requirements of the pharmacy technician training program. This rule also elaborates on the duties and restrictions of a pharmacy technician or technician trainee and states how the identification of the technicians and technician trainees will be accomplished. Due to the requirement that technicians must be registered by July 1, 1996, after completing a Board approved training program established by rule, this rule must be promulgated prior to the 1997 legislative session as an emergency rule.

APPENDIX B

FISCAL NOTE FOR PROPOSED RULES

Rule Title: Title 15 Series 7, Registration of Pharmacy Technicians  
 Type of Rule:  Legislative  Interpretive  Procedural  
 Agency West Virginia Board of Pharmacy  
 Address 236 Capitol Street  
Charleston, WV 25301

1. Effect of Proposed Rule Not Applicable.

	ANNUAL		FISCAL YEAR		
	INCREASE	DECREASE	CURRENT	NEXT	HEREAFTER
<u>ESTIMATED TOTAL COST</u>	\$	\$	\$	\$	\$
PERSONAL SERVICES					
CURRENT EXPENSE					
REPAIRS & ALTERATIONS					
EQUIPMENT					
OTHER					

2. Explanation of above estimates: Not Applicable

3. Objectives of these rules:

Rule establishes the qualifications for registration as a pharmacy technician and sets up the core requirements of the pharmacy technician training program.

Rule Title: Title 15 Series 7, Registration of Pharmacy Technicians

4. Explanation of Overall Economic Impact of Proposed Rule.

A. Economic Impact on State Government.

Not Applicable.

B. Economic Impact on Political Subdivisions; Specific Industries; Specific groups of Citizens.

Applicants will pay a \$100.00 fee to the Board for the competency examination.

C. Economic Impact on Citizens/Public at Large.

Not Applicable.

Date: 1/18/96

Signature of Agency Head or Authorized Representative :



DATE:

TO: LEGISLATIVE RULE-MAKING REVIEW COMMITTEE

FROM:

LEGISLATIVE RULE TITLE: Registration of Pharmacy Technicians

1. Authorizing statute(s) citation W. Va. Code Section 30-5-5(a)
- 
2. a. Date filed in State Register with Notice of Hearing  
Notice of Comment Period filed January 23, 1996
- b. What other notice, including advertising, did you give of the hearing?  
N/A
- 
- c. Date of Hearing(s) N/A
- 
- d. Attach list of persons who appeared at hearing, comments received, amendments, reasons for amendments.  
Attached X No comments received
- e. Date you filed in State Register the agency approved proposed Legislative Rule following public hearing: (be exact)  
N/A
- 
- f. Name and phone number(s) of agency person(s) to contact for additional information:
- |                                 |                 |
|---------------------------------|-----------------|
| <u>Samuel Kapourales</u>        | <u>235-3535</u> |
| <u>William T. Douglass, Jr.</u> | <u>558-2522</u> |
-

3. If the statute under which you promulgated the submitted rules requires certain findings and determinations to be made as a condition precedent to their promulgation:

a. Give the date upon which you filed in the State Register a notice of the time and place of a hearing for the taking of evidence and a general description of the issues to be decided.

N/A

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b. Date of hearing:           N/A          

c. On what date did you file in the State Register the findings and determinations required together with the reasons therefor?

N/A

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d. Attach findings and determinations and reasons:

Attached           N/A          

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FILED

LEGISLATIVE RULES

15 C.S.R. 7

TITLE 15

WEST VIRGINIA BOARD OF PHARMACY

SERIES 7

REGISTRATION OF PHARMACY TECHNICIANS

APR 4 1 15 PM '96

OFFICE OF WEST VIRGINIA  
SECRETARY OF STATE

§ 15-7-1. General.

1.1. Scope. --- To establish rules for the training and regulation of pharmacy technicians.

1.2. Authority. --- W. Va. Code § 30-5-5(a).

1.3. Filing Date. --- \_\_\_\_\_, 199\_\_.

1.4. Effective Date. --- \_\_\_\_\_, 199\_\_.

§ 15-7-2. Qualifications for registration as a pharmacy technician.

2.1 In order to become registered as a pharmacy technician in this State, an individual shall:

- a) be at least eighteen (18) years old;
- b) be a high school graduate or its equivalent;
- c) present to the Board satisfactory evidence that he or she is of good moral character, is not addicted to alcohol or controlled substances and is free of any felony convictions; and

d) satisfactorily complete a Board-Approved Pharmacy Technician Training Program.

§ 15-7-3. Pharmacy Technician Training Program.

3.1. An applicant for registration as a pharmacy technician shall complete 2,080 hours of on-the-job training within a pharmacy under the direct supervision of a pharmacist within a period of twenty-four (24) months.

3.2. A prospective pharmacy technician trainee may begin their initial orientation and evaluation by a licensed Pharmacist while their application forms are being processed by the Board. A pharmacy technician trainee must register with the Board immediately via letter and make application with submission of a \$25 registration fee within 30 days of starting to work in the pharmacy. Any hours worked during this interim period will be applied toward the 2,080 hour requirement upon the successful completion of the registration process.

3.3. After a period of 24 months has passed since a technician trainee has registered with the Board, the technician trainee must send in verification of completion of 2,080 hours of on-the-job training. If the trainee has failed to complete the required hours, his/her registration expires and he/she can no longer perform the duties of a technician; Provided, that the Board may provide for an extension of time upon the showing of special circumstances by the trainee.

3.4. Upon completion of the on-the-job training the applicant shall be required to take a competency examination prepared and administered by the Board and obtain a passing score of 75%. If the applicant takes and fails the examination two times then the applicant shall not be permitted to perform the duties of a technician until he/she successfully completes the examination.

3.5. A manual shall be used during the course of the on the job training program and such training manual shall be approved by the Board prior to its use.

**§ 15-7-4. Duties and restrictions.**

4.1. During the course of their employment the duties of a registered pharmacy technician or technician trainee may include, but are not limited, to the following:

- (a) Place, receive, unpack, and store drug orders.

(b) Maintain work area and equipment in a clean and orderly condition. Order and stock all pharmacy supplies.

(c) Check all prescription and non-prescription stock for outdates and process outdated returns.

(d) Operate the cash register.

1. May only handle the complete transaction on refill prescriptions when specifically requested to do so by the pharmacist and when the patient has no questions for the pharmacist.

2. May only handle the transactions on new prescriptions after counseling by the pharmacist has been offered. New prescriptions packaged for the will-call shelf shall be clearly marked by the pharmacist completing the order.

3. Must refer all questions regarding over the counter and prescription product selection or advice to the pharmacist.

(e) File completed hard-copies of new prescriptions (except schedule II drugs) in numerical order. Pharmacists shall file the C-II hard-copies.

(f) Place completed prescription orders on the will-call shelf.

(g) Wrap completed orders for mailing and log mailed and delivered orders into the record.

(h) Print out third-party billings and process them for mailing and transmit electronically handled third-party billings.

(i) Reconcile third-party payments.

(j) Contact third-party billers and payers if problems arise while handling patients' insurance transmissions.

(k) Post patient purchases to private charge accounts and assist with the printing and distribution of the monthly statements.

(l) Handle non-professional phone calls to/from:

1. Patients requesting refills of prescriptions by number and patient name.

2. Physicians' offices authorizing refills providing no changes in the prescription are involved, and in which the patient's name, medication and strength, number of doses, and date of prior fill is stated. Any other inquiries by the office shall be referred to the pharmacist.

3. Patients concerning price information as per computer calculated.

4. Patients concerning business hours, mailing and delivery services, and availability of goods and services.

5. Patients asking if their prescriptions are refillable and/or number of refills remaining. Any interpretation of the proper length of time between refills must be handled by the pharmacist.

6. Wholesalers and distributors dealing with the ordering of goods and supplies.

7. Physicians' offices dealing with profile information where no interpretation or judgment is necessary only after verifying to whom the information is being given.

(m) Accept refill requests and accept new written prescriptions from patients or their agents after determining the following- correct name, address, phone number, birth date, drug allergies, disease states, and method of payment.

(n) Enter prescription data and patient profile data into the computer. Any information needing clarification or interpretation shall be referred to the pharmacist.

1. Monitor label printing.

2. Alert pharmacist to any duplication of medication, drug therapy overlap, drug interactions, drug-disease state interactions, and any questions that arise from inputting the information.

(o) Perform tasks under pharmacist's supervision, such as obtaining stock bottles for prescription filling.

(p) Count and pour from stock bottles for individual prescriptions only under the direct supervision of a pharmacist. The accuracy of the prescription contents and the accuracy of the labeling must be accounted for by the initials of the pharmacist on the hard-copy and the label.

(q) Reconstitute-restoration of original form of medication previously altered for preservation and storage by the addition of a specific quantity of an appropriate diluent requiring no calculations. May assist in the preparation of sterile parenteral/enteral products under the direct supervision of a licensed pharmacist. In all cases the accuracy of the assistant is checked and verified by a pharmacist.

(r) Weigh or measure specific ingredients for the pharmacist to use in extemporaneous compounding. In all cases the accuracy must be verified by the pharmacist.

4.2. The only personnel that shall be allowed within the pharmacy area to perform pharmaceutical care are, pharmacists, registered pharmacy technicians, technician trainees and pharmacy interns.

4.3. A registered pharmacy technician or technician trainee shall not receive any telephone calls for new prescriptions from a physician's office and such calls are to be immediately transferred to a pharmacist.

4.4. Any pharmacy desiring to utilize registered technicians shall maintain written policies and procedures regarding the utilization of technicians stating their position and specific scope of duties. Such written policies and procedures shall be available for inspection at all times by the Board.

4.5. A ratio of no more than four (4) pharmacy technicians and/or technician trainees per on duty pharmacist operating in out-patient, mail order or institutional pharmacies shall be maintained.

**§ 16-7-5. Identification of Technicians and Technician Trainees.**

5.1. Pharmacy technicians shall be identified by a name tag approved by the Board with the designation "Pharmacy Technician" while working in a pharmacy within this State. The name tags shall not be smaller than 3 1/2 inches by 2 1/4 inches and shall be permanent; no removable labels are permitted. Pharmacy technicians and technician trainees shall be required to wear appropriate sanitary attire other than a white coat.

5.2. A pharmacy technician trainee during the period of on-the-job training, shall wear a name tag approved by the Board with the designation "Pharmacy Technician Trainee". The name tags shall not be smaller than 3 1/2 inches by 2 1/4 inches and shall be permanent; no removable labels are permitted.

**§ 15-7-6. Grandfathering.**

6.1. Any person who has been continuously employed in the State of West Virginia as a pharmacy technician for 2,080 hours within the two (2) years prior to the effective date of this rule shall be exempt from the on-the-job training requirement and the competency examination for registration. Such applicant must verify their employment by submitting to the Board an affidavit of the pharmacist-in-charge certifying that the applicant has performed the duties of a pharmacy technician as defined in § 15-7-4 of this rule for the two (2) years prior to the effective date of this rule.

6.2. An applicant who has performed the duties of a pharmacy technician for less than two (2) years prior to the effective date of this rule may have the

number of hours worked applied toward the 2,080 hour on-the-job training requirement upon submitting verification of such employment to the Board.

**§ 15-7-7. Fees.**

7.1. The Board of Pharmacy shall charge and collect the following fees:

(a) Application and Registration Fee for a Pharmacy Technician -- as established by statute;

(b) Annual Renewal Fee -- as established by statute; and,

(c) Competency Examination Fee -- \$100.00.

(d) Technician Trainee Registration --\$25.00

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## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
236 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

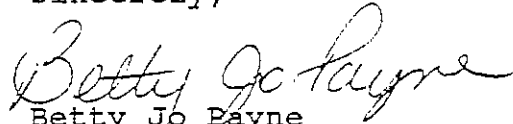
Mr. Thomas Robinette, R.Ph.  
Director of Pharmaceutical Services  
Thomas Memorial Hospital  
South Charleston, West Virginia 25309

Dear Mr. Robinette:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp

February 12, 1996

Sam Kapourales, President  
West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

Re: Legislative Rules  
15 C.S.R. 7  
TITLE 15  
WEST VIRGINIA BOARD OF PHARMACY  
SERIES 7  
REGISTRATION OF PHARMACY TECHNICIANS

Dear Mr. Kapourales:

The purpose of this letter is to provide comments regarding the proposed rules for the registration of pharmacy technicians. The Legislature, in 1995, enacted a major revision to the Pharmacy Practice Act which included the recognition and registration of pharmacy technicians. The intent in recognizing the role of the pharmacy technician was to assist or relieve the pharmacist of certain tasks to improve pharmaceutical care and therapeutic outcomes. I believe the proposed rules impose serious barriers to fulfilling the intent of the Legislature. The proposed rules do not accurately represent or support the long standing and exemplary record of the use of supportive personnel in the broad scope of pharmacy practice in the State.

#### **§ 15-7-3.2 Pharmacy Technician Training Program**

The requirement of **2080 hours** of "on-the-job" training is exceedingly onerous in light of the degree of direct supervision by a licensed pharmacist. This exceeds the requirement for pharmacist licensure, i.e. 9 months. While the skills and knowledge to perform the technical functions for a particular area or site of practice may require extensive on-the-job training, the skills and knowledge to meet a minimum standard of competency may be obtained through formal didactic programs which include site specific experience criteria. One need only review the duties of the technician as outlined to recognize that 2080 hours is excessive. The Board intends to impose these hours in addition to time required for the completion of well constructed and in some cases nationally accredited training programs. It should be noted that at the June, 1995 meeting of the Board recommendations for reducing the on-the-job requirements were made by pharmacists representing institutional, independent, and chain drug stores. The Board accepted those recommendations and subsequently reversed itself.

The 2080 hours of training will discriminate against those persons who, for whatever reasons, are limited to working 20 hours or less per week, e.g. student, retiree collecting social security, disabilities, etc.. In this instance, it is impossible to achieve 2080 hours within 24 months. In contrast, a person

applying for pharmacist licensure is required to obtain 9 months apprenticeship either while enrolled in a college of pharmacy or is a graduate of the same. There is no stated time limit for a pharmacy graduate to complete his/her apprenticeship. Unlike the pharmacist licensure examination, there is no provision for re-examination in the event a passing score is not achieved. Would a technician applicant have to complete another 2080 hours of on-the-job-training?

The Board is unyielding in its position that a competency test will be developed solely from the training manual published by the National Association of Retail Druggists (NARD). The NARD manual is by title narrowly focused at retail pharmacy practice. It is an inadequate representation of the functions routinely performed by technicians in hospitals, home care, and nursing home services. Certainly, the Legislature did not intend for the Board to disregard the broad scope of pharmacy technician practice. Additionally, the Board has not provided a definition or criteria for what it will consider to be an acceptable training program.

#### § 15-7-4 Duties and Restrictions

The duties outlined are narrowly focused on retail pharmacy practice and fail to include duties uniquely associated with institutional and home health practice environments. One of the most important functions that pharmacy technicians routinely perform is the preparation of intravenous medications and nutrition preparations (I.V. admixtures). The use of technical support in this capacity has been commonplace for at least the 25 years I have practiced in the State. Whereas the Practice Act, § 30-5-3, leaves this function of the technician open for interpretation, the proposed rule narrowly restricts the technician to "reconstitution...by the addition of a specific quantity of distilled water". The argument has been made that the preparation of intravenous medications is "compounding" and is restricted to a licensed pharmacist or intern. In this event, the duties outlined in the proposed rules are also in conflict with the term "compounding" as defined in the Practice Act under § 30-5-1b (c), i.e. "preparation, mixing, assembling, packaging, or labeling of a drug or device." Strict interpretation and application of these rules could result in one or more of the following:

- Technicians now performing I.V. admixtures would have to be replaced with licensed pharmacists. In hospitals alone this is approximately **256** positions. The net financial impact would be approximately **\$8 MILLION DOLLARS** added to the cost of health care.
- Pharmacists would have to be reassigned from their duties of monitoring patient medication therapy, patient assessment, patient education, drug information, adverse reaction monitoring and intervention etc.. This is contradictory to the intent of the Legislature as stated in § 30-5-5a (a) which recognizes the enhanced level of care provided by pharmacists in any setting.
- Pharmacy services would have to be truncated thus undermining or negating the processes developed over many years which have provided the safest, most efficient, and highest quality of patient care in history.

#### § 15-7-5 Identification of Technicians and Technician Trainees

It is important that the pharmacist, pharmacy technician, and pharmacy technician trainee have proper identification; however, the requirement proposed by the Board for technicians is duplicative for most practice sites and is excessive. As pointed out to the Board previously, most hospitals have established dress codes and identification systems for the benefit and protection of their patients. The requirement of a unique name tag and Board approved "coat" is unnecessary and potentially conflicts with

organizational dress codes. Additionally, the lettering requirement of not smaller than 3 1/2 inches by 2 1/4 inches is probably an oversight. Nevertheless, a name tag of 3 1/2 inches by 2 1/4 inches itself is unnecessarily large.

#### 15-7-7 Fees

The fee of \$100 to for the Board to administer a competency examination for a technician appears to be excessive when compared to the fee of \$125 required to administer the licensure examination for pharmacists comprising 2 days of written examination and practical skills. The Practice Act requires satisfactory completion of a board -approved technician training program. Verification of this satisfactory completion of training can be made by the pharmacist-in-charge at the technician's place of employment. If a competency examination is ultimately required, the pharmacist-in-charge can administer the examination. Afterall, the pharmacist-in-charge will ultimately be the responsible for the competency and supervision of the technician.

I am concerned that adoption of these rules, as written, will necessitate repeated revision as it becomes clear that they are excessive, costly, ambiguous, and questionably enforceable. The rules should be revised with substantive input from the professional pharmacy organizations representing the various types of practice in the state. As always, I will be available to assist the Board in developing these rules.

Respectfully submitted,



Thomas L. Robinette, R.Ph.  
Director of Pharmaceutical Services  
Thomas Memorial Hospital  
South Charleston, WV  
(304) 766-3544

THOMAS

February 22, 1993

Sam Kapourales, President  
West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

Dear Mr. Kapourales:

I was pleased to hear that the Board is going to address the issue of technicians preparing intravenous admixtures and other sterile preparations under the supervision of a licensed pharmacist. I feel very strongly that the wording in § 15-7-4, Duties and Restrictions, should be revised in a manner to accommodate these duties. Specifically:

§ 15-7-4.1: Insert after "may include" the phrase "but not limited to"

§ 15-7-4.1 (q): Reconstitute-restoration of original form of medication previously altered for preservation and storage by the addition of a specific quantity of ~~distilled water~~ or provided an appropriate diluent requiring no calculations. May assist in the preparation of sterile parenteral/enteral products. In all cases the accuracy of the technician and the final product is checked and verified by a pharmacist.

I appreciate the opportunity to present these recommendations. Please feel free to give me a call if you have any questions or would like to discuss this matter.

Sincerely,



Thomas L. Robinette, R.Ph.  
Director of Pharmaceutical Services  
Thomas Memorial Hospital  
South Charleston, WV 25309  
(304) 766-3544

**Thomas Memorial Hospital**

4605 MacCorkle Avenue, SW ■ South Charleston, WV 25309 ■ 304-766-3600



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
236 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

Ms. Kathryn Lavriha  
Senior Manager, State Government Affairs  
National Association of Chain Drug Stores  
413 North Lee Street  
P. O. Box 1417  
Alexandria, Virginia 22313-1480

Dear Ms. Lavriha:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

*Betty Jo Payne*  
Betty Jo Payne  
Office Administrator

bjp

# NACDS

National Association of Chain Drug Stores

David L. Maher  
Chairman of the Board

Ronald L. Ziegler  
President & CEO

February 23, 1996

Mr. Sam Kapourales, President  
West Virginia Board of Pharmacy  
300 Capitol Street  
Suite 1002  
Charleston, WV 25301

Dear Sam:

We have reviewed the draft rules regarding pharmacy technicians. We appreciate the Board members thoughtful consideration of the changes suggested by the NACDS chain members. This draft of the rules incorporates many of those changes.

I would, however, like to suggest a change in one key provision in the rule:

### Section 15-7-3. Pharmacy Technician Training Program

- 3.1 This provision states that a pharmacy technician trainee must register with the Board and make application prior to any on-the-job training.

It is important that this registration becomes effective upon receipt of a letter. We suggest that a letter from the pharmacy employer written to the Board would suffice for the registration requirement. And, receipt of this letter at the Board constitutes registration.

- 3.2 This provision requires that a pharmacy technician shall complete 2,080 hours of on-the-job training... within a twenty-four month period.

We recommend deleting the twenty-four month time requirement for completion of the training program.

The requirement of 2,080 over a two-year time frame is problematic. To complete that number of training hours during a two-year period would require working 20 hours per week for 52 weeks a year. This schedule does not take into account for sick time, vacation, or employees working less than half-time.

Many of the chain pharmacy technicians, especially high school or college students, work only nights, weekends, or during school vacation periods. Requiring them to work 20 hours is overly restrictive.

We believe that the only requirement should be that they complete the site specific training program and that the pharmacist certify the completion of the training program.

Thank you for your consideration of these changes. I look forward to seeing you at the Board meeting on Wednesday, February 28.

Sincerely,



Kathryn Lavriha  
Senior Manager, State Government Affairs

cc: Mary Ann Wagner  
Director, Professional Services



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
235 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

Ms. Tanya Sutton, R.Ph.  
Total Health Services of West Virginia, Inc.  
101 State Street  
Bridgeport, West Virginia 26330

Dear Ms. Sutton:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

Betty Jo Payne  
Office Administrator

bjp



## Board of Pharmacy

Phone (304) 558-0558

Fax (304) 558-0572

Office

238 Capital Street

Charleston, West Virginia 25301

March 28, 1996

Mr. Ken Gianettino, R.Ph.  
Total Health Services of West Virginia, Inc.  
101 State Street  
Bridgeport, West Virginia 26330

Dear Mr. Gianettino:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

Betty Jo Payne  
Office Administrator

bjp

January 31, 1996

Sam Kaporelus  
Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

Dear Sam,

Thank you for allowing me to share my concerns regarding the legislative rules drafted by the West Virginia Board of Pharmacy. I have reviewed the areas of objection below to document our conversation. I appreciate your attention to this matter and feel that these items need to be addressed before I could support the Legislative Rules.

Legislative Rules

15 C.S.R. 7

TITLE 15

WEST VIRGINIA BOARD OF PHARMACY

SERIES 7

REGISTRATION OF PHARMACY TECHNICIANS

Objection # 1     § 15-7-3.2 Pharmacy Technician Training Program

I believe that the number of required hours are extraordinarily high. What other high school diploma job requires a full year of training? The Pharmacy Practice Act only requires that the "technician" register with the Board of Pharmacy. We should allow the pharmacist, who is determined competent by the Board and whom the technician is under direct supervision, determine the training required. Many technicians whom I hire are from a bordering state and may have many years of experience that need very little training.

Objection # 2     § 15-7-3.3 Pharmacy Technician Training Program

The Pharmacy Practice Act does not require that the Board of Pharmacy to prepare and administer a competency examination. I believe the Board is excerpting undue control and have been very unreasonable to discuss this issue. Their intent is to develop a test from the National Association of Retail Druggist (NARD) handbook which has no application towards institutional, hospital, or home care organizations. Many states, like Texas, recognizes a National Technician Competency Examination administered by the Pharmacy Technician Certification Board. (PTCB) This Board was established by the American Pharmaceutical Association and the American Society of Health-System Pharmacists recognizing the needs of both hospital and retail

identifying our state code because both West Virginia Pharmacist Association and the West Virginia Society of Health-System Pharmacist endorses the test. Many object to this test due to its difficulty; but I believe the standards should be higher when it comes to public safety. I believe the Board of Pharmacy should recognize several examinations and not mandate the competency of technicians solely on NARD standards.

Objection # 3 § 15-7-4. Duties and Restrictions

Once again the Board of Pharmacy legislative rules has narrowed pharmacy regulations by focusing on retail pharmacy and omitting some key hospital technician duties. The foremost duty omitted is the compounding and admixing of intravenous solutions. The practice of technicians performing this duty dates back since the beginning of hospitals establishing pharmacy department's within the hospital walls. To require that a pharmacist perform this function would overburden hospitals throughout the state. It is estimated that it would cost hospitals approximately *eight million dollars* to comply with this regulation. The Board's position is that this is part of the Pharmacy Practice Act and that the Act itself would have to be changed prior to changing the legislative rules. I believe the plan to not enforce the Practice Act on this issue is wrong. I do not agree with this philosophy because it increases pharmacists liability when legislative rules are not followed. I believe that the Legislative Rules regarding "Duties and Restrictions" should be rewritten with more attention given to hospital pharmacy practice. I realize that we are under a time restriction, but we have attempted several times to communicate this to the Board to no avail! This is another example of why the Board of Pharmacy's composition should be reflective, on a percentage basis, of the different types of pharmacy practice throughout our state.

Objection # 4 § 16-7-5. Identification of Technicians and Technician Trainees

This is a minor objection but one that is very practical. The legislative rules state that the *lettering* on name tags shall not be smaller than 3 1/2 inches by 2 1/4 inches. I believe to comply with the intent of this rule that it should simply state that the pharmacist is differentiated from the pharmacy technician. To dictate the lettering on name tags would be a burden for many hospitals that have hospital-wide policies that apply to all departments. Hospitals establish such policies to maintain patient confidentiality and ensure patient safety. This is also one more example of the Board's narrow focus on retail pharmacy.

I recognize the politics in this process, but I agree with the wise person who said "If the shoe doesn't fit then don't wear it". We should send the rules back to the Board of Pharmacy and mandate that a committee be developed, composed of all areas of pharmacy practice, to rewrite the Registration of Pharmacy Technicians Legislative Rules.

Thanks again for your attention to this matter, I look forward in hearing from you soon.

Sincerely,



M. Todd Way, R.Ph., MSHA  
Director of Pharmacy  
President, West Virginia Society of Health-System Pharmacist

encl: PTCB Certification Material  
cc: Pete Mulford, Administrator



## Total Health Services of West Virginia, Inc.

101 State Street, Bridgeport, WV 26330 • (304) 842-1911 • 1-800-377-3358 • Fax: (304) 842-1914

February 23, 1996

### West Virginia Board of Pharmacy

236 Capitol Street  
Charleston, West Virginia 25302

To Whom It May Concern:

We at *Total Health Services* welcome a "recognition and certification" process for the pharmacy technician in West Virginia. Pharmacy practice has welcomed the increased clinical involvement of the pharmacist in overall care and monitoring of the patient. As a result, however, the pharmacy technician has become necessary to assist the pharmacist with the more technical and administrative functions.

We at *Total Health Services* are providing "Home IV Therapy" services for patients throughout West Virginia. In addition to licensing with the West Virginia Board of Pharmacy, we have pursued accreditation with the "Joint Commission of Accreditation of Health Care Organizations". As you are aware, the 1995 JCAHO Clinical Standards demand that the pharmacist be an integral part of the patient management process. Therefore, we are requesting that the WV Practice Guidelines for pharmacy technicians include the mixing and preparation of intravenous products.

Sincerely,

Ken Gianettino, RPh.

Tanya Sutton, RPh.

KG:jes



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
238 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

Ms. Nancy R. Wilson, R.N.  
Executive Secretary  
West Virginia State Board of Examiners  
For Licensed Practical Nurses  
101 Dee Drive  
Charleston, West Virginia 25311-1688

Dear Ms. Wilson:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

Betty Jo Payne  
Office Administrator

bjp

WEST VIRGINIA  
STATE BOARD OF EXAMINERS  
FOR LICENSED PRACTICAL NURSES

NANCY R. WILSON, R.N.  
EXECUTIVE SECRETARY

LANETTE L. ANDERSON, J.D., R.N.  
ASSISTANT EXECUTIVE SECRETARY



TELEPHONE  
(304) 558-3572

FAX  
(304) 558-3666

101 DEE DRIVE  
CHARLESTON, WEST VIRGINIA 25311-1688

February 22, 1996

West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

RE: Registration of Pharmacy Technicians

Dear Sirs:

The members of the West Virginia State Board of Examiners for Licensed Practical Nurses met in regular session today and reviewed the proposed rules for the registration of Pharmacy Technicians. One concern raised by the group was how the Board of Pharmacy might interpret these rules and their impact on the role and current practice of the licensed practical nurse in an organized health care setting.

Members understand that the rules are to be filed as emergency rules, however, look forward to describing their concerns more fully at the open hearing.

Sincerely Yours,

A handwritten signature in cursive script that reads "Nancy R. Wilson".

Nancy R. Wilson, R.N.  
Executive Secretary

NRW/w



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
238 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

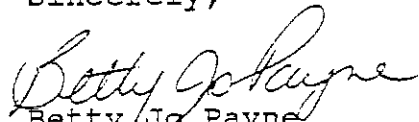
Ms. Marjorie A. Marnell, R.Ph., MBA  
Ohio Valley Medical Center  
2000 Eoff Street  
Wheeling, West Virginia 26003

Dear Ms. Marnell:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp



## OHIO VALLEY MEDICAL CENTER

2000 Eoff Street  
Wheeling, WV 26003

February 20, 1996

West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

RE: REGISTRATION OF PHARMACY TECHNICIANS

Dear Board Member:

As a licensed pharmacist and now a hospital administrator, I have concerns about the proposed legislative rules related to the registration of pharmacy technicians. It appears as though no forethought was given to the institutional side of the practice of pharmacy, rather that these proposed rules address merely the retail practice of pharmacy.

I believe that the Hospital Association has addressed its concern related to the admixture of IV solutions and I also share these concerns. I believe that when regulations of this nature are reviewed, that despite the fact that a hospital pharmacist is represented on the Board of Pharmacy, that input be obtained from the West Virginia Society of Hospital Pharmacists or some hospital pharmacy representative. As was the case with the legislation several years back related to automated pharmacies, the retail practice of pharmacy varies significantly in many respects from the practice of institutional pharmacy and therefore it becomes difficult to establish one set of rules that is pertinent to both.

I would ask that you seek input from the institutional pharmacy arena prior to implementing such regulations. I would be happy to provide more detailed input if desired.

Sincerely,

Marjorie A. Marnell, R.Ph., MBA

MAM:jib

cc: T. P. Galinski, President and CEO, OVHS&E  
J. Krantz, WVHA

OHIO VALLEY MEDICAL CENTER  
EAST OHIO REGIONAL HOSPITAL  
PETERSON REHABILITATION HOSPITAL

Ohio Valley Health Services and Education Corporation





## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
238 Capital Street  
Charleston, West Virginia 25301

March 28, 1996


Mr. Frank Sebroski, R.Ph.  
Director of Pharmacy  
Ohio Valley Medical Center  
2000 Eoff Street  
Wheeling, West Virginia 26003

Dear Mr. Sebroski:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp



# OHIO VALLEY MEDICAL CENTER

2000 Eoff Street  
Wheeling, WV 26003

FRANK SEBROSKI, R.PH.  
DIRECTOR PHARMACY, OVHS&E  
OHIO VALLEY MEDICAL CENTER  
2000 EOFF STREET  
WHEELING, WV 26003  
304-234-1820

WEST VIRGINIA BOARD OF PHARMACY  
236 CAPITAL STREET  
CHARLESTON, WV 25301

DEAR SIR:

I AM REQUESTING THAT THE FOLLOWING COMMENTS BE CONSIDERED ON THE PROPOSED LEGISLATIVE RULES CONCERNING REGISTRATION OF PHARMACY TECHNICIANS. MY COMMENTS ARE AS FOLLOWS:

A). LIKE PAST RULES AND REGULATIONS THE RULES ARE WRITTEN FOR RETAIL PHARMACY. THEY DO NOT ADEQUATELY ADDRESS HOSPITAL PHARMACY. WILL THE SAME MANUAL BE USED FOR BOTH HOSPITAL AND RETAIL TECHNICIANS? THE RULES DO NOT ADEQUATELY ADDRESS WHAT THE ROLE OF THE TECHNICIAN WILL BE IN PERFORMING IV ADMIXTURE UNDER THE SUPERVISION OF THE PHARMACIST.

B). NAME TAGS. THE HOSPITAL HAS NAME TAGS FOR EMPLOYEES. IT SEEMS TRIVIAL TO SPECIFY A SIZE OF NAME TAGS. THE SIZE LISTED IS EXCESSIVE.

C). UNIFORMS- OUR TECHNICIANS AND PHARMACISTS THAT WORK IN THE IV ADMIXTURE ROOM WEAR SCRUBS. THE REQUIREMENT OF A JACKET IS NOT NECESSARY. I THINK IT IS AGAIN TRIVIAL TO ALLOW THE STATE BOARD TO DICTATE WHAT COLOR OF JACKETS MUST BE WORN.

D). THE LENGTH OF THE TRAINING APPEARS LONGER THAN IS NECESSARY TO DEMONSTRATE COMPETENCY.

THANK YOU FOR THE OPPORTUNITY TO COMMENT. I AM AVAILABLE TO APPEAR IN PERSON TO ASSIST IN ADDRESSING THESE ISSUES.

THANK YOU,

FRANK SEBROSKI, R.PH.  
DIRECTOR PHARMACY, OVHS&E

OHIO VALLEY MEDICAL CENTER  
EAST OHIO REGIONAL HOSPITAL  
PETERSON REHABILITATION HOSPITAL

Ohio Valley Health Services and Education Corporation





## Board of Pharmacy

Phone (304) 558-0558

Fax (304) 558-0572

Office  
238 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

Mr. George R. Bonelli, R.Ph.  
Director of Pharmacy  
The People of Logan General Hospital  
20 Hospital Drive  
Logan, West Virginia 25601

Dear Mr. Bonelli:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

Betty Jo Payne  
Office Administrator

bjp

# THE PEOPLE of LOGAN GENERAL HOSPITAL

20 Hospital Drive  
Logan, West Virginia 25601  
304-792-1101

February 20, 1996

Sam Kapourales, President  
West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

Dear Mr. Kapourales:

I am writing in regard to the new rules concerning registration of pharmacy technicians and the rules defining the role of pharmacy technicians. I feel using a competency exam developed from the training manual published by the National Association of Retail Druggists, is by definition discriminatory toward pharmacy technicians working and trained in a hospital environment. We have a number of excellent pharmacy technicians who have never in their twenty-plus years of experience, worked in a retail drug environment.


I feel the duties outlined in the new rules and regulations are designed by, and for, retail pharmacists. There are many duties that have been historically performed by pharmacy technicians in a hospital situation which are restricted under the proposed rules (i.e. preparation of I.V. admixtures). Under the rules of the Joint Commission on Accreditation of Hospitals, pharmacists are moving away from the preparation and distribution of medication toward becoming more clinically involved in patient care and patient outcomes. Approval of these new proposed rules would cause conflict with the J.C.A.H. recommendations causing more registered pharmacists to be involved in the distribution and preparation aspects of institutional pharmacy. This would seriously reduce pharmacists' clinical involvement and drive up the cost of providing healthcare to our citizens.

While it is important for pharmacists, pharmacy technicians and technician trainees to be properly identified, I feel having a dress code or name tag requirement legislated to us is just an unnecessary redundancy as most hospitals have established dress codes and/or identification tags for their personnel. These new rules can potentially interfere with established organizational dress codes.

The fee of \$100.00 to administer a competency exam is excessive relative to the functions of a pharmacy technician. To many potential pharmacy technicians, paying a \$100.00 fee for an exam, as well as requiring the technicians to travel to Morgantown to have the exam administered, would represent an extreme hardship. I see no reason why a pharmacist in charge could not act as proctor for potential pharmacy technicians taking the competency exam. The completed exam could be forwarded to the Board for scoring.

Thank you very much.

Respectfully,



George R. Bonelli, R. Ph.  
Director of Pharmacy

"Committed to meeting the growing needs of Southern West Virginia."



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
238 Capitol Street  
Charleston, West Virginia 25301

March 28, 1996

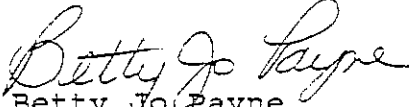
Mr. Roy L. Gryskevich, R.Ph. MBA  
Weirton Medical Center  
601 Colliers Way  
Weirton, West Virginia 26062-5091

Dear Mr. Gryskevich:

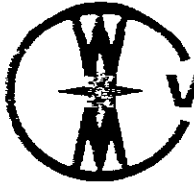
The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp



# WEIRTON MEDICAL CENTER

601 COLLERS WAY WEIRTON, WV 26062-5091 304-797-6000

2/13/86

West Virginia Pharmacy Board  
236 Capitol Street  
Charleston, WV 25301

Re: Registration of Pharmacy Technicians

Dear Sir/Madam:

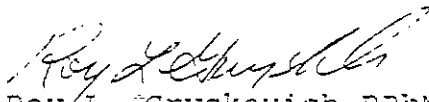
Thank you for permitting us to comment on the Board's proposed rules/regulations for pharmacy technicians. While the overall intent is proper and needed, there are a few areas that need addressed.

First, and foremost, is the description of the duties and restrictions prohibits the technician from mixing IV Solutions. This has long been a standard among hospitals and has been proven a cost-effective and safe means of IV Therapy within the institutional setting.

Secondly, the requirements of the technician to obtain 2080 hours of on the job training within 24 months is unacceptable. We suggest cutting the requirement by half to 1040 hours. In addition, there is no reference to what delineates the technician trainee from the technician. According to the rules as read, they may do all of the duties that a technician can do. We suggest some wording to the effect that a trainee must be supervised more.

Finally, we suggest consideration that other competency programs/tests be considered for licensure. There are many programs out there in academia as well as in the practical setting that may be of value.

Sincerely yours

  
Roy L. Gryskevich RPhMBA  
Director of Pharmacy



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
236 Capitol Street  
Charleston, West Virginia 25301

March 28, 1996

Mr. John J. Bernabei, R.Ph.  
113 East Street  
New Cumberland, West Virginia 26047

Dear Mr. Bernabei:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp

February 20, 1996

From: John J. Bernabei R.Ph.  
113 East Street  
New Cumberland WV, 26047

To: West Virginia Board of Pharmacy  
Charleston, WV

To Whom It May Concern:

My comments are aimed at the Registration of Pharmacy Technicians. (15 C.S.R. 7) Title 15.

The "technician trainee" is not required to register with the state. The trainee is also not required to pay an initial registration fee or a yearly renewal fee. It is clear that under the proposed bill the duties of a registered tech. and tech. trainee are the same. This creates an incentive to never be registered. By remaining a trainee you will never have to pay \$100 to pass a test, never pay a \$25 initial registration fee or a \$10 renewal fee, and clearly enjoy the freedoms of a registered pharmacy tech.

To remedy this problem registration of the trainees is a must. Initial fees and years fees should be the same. An incentive must be created for trainees to become "registered pharmacy technicians", or a time limit must be placed on there trainee status. i.e. 2 years. Also the trainee registration fee can stay at \$25.00 yearly to encourage application for the competency exam.

Filing date is February 29, and Registration date is July 1, 1996. The grandfathering date should be the same as the initial registration deadline. This will make for a better understanding of the rule.

Please consider these changes and comments. If anyone there would like to discuss these comments further, please call me at home 304-748-4614 or at work 304-797-6070. Again, the intent of the law is to provide accountability for those individuals in the pharmacy doing pharmacy like duties. This goal is not met if pharmacy tech. trainees are not required to register.

Pharmaceutically yours,



John. J. Bernabei R.Ph. #4808



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
236 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

Mr. Todd Way, R.Ph., MSHA  
Director of Pharmacy  
President, West Virginia Society of Health-System Pharmacists  
City Hospital  
Dry Run Road  
Martinsburg, West Virginia 25401

Dear Mr. Way:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

*Betty J. Payne*  
Betty J. Payne  
Office Administrator

bjp



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
238 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

Mr. William McFarland  
Loop Plaza Discount Pharmacy  
62 Sixth Avenue  
P. O. Box 480  
St. Albans, West Virginia 25177

Dear Mr. McFarland:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

*Betty Jo Payne*  
Betty Jo Payne  
Office Administrator

bjp

Loop Plaza Discount Pharmacy  
62 Sixth Ave.  
P.O. Box 480  
St. Albans, WV 25177  
304/727-2233



February 19, 1996

Samuel Kapourales, President  
State Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

Dear Mr. Kapourales:

This is in regard to the proposed rules and regulations for pharmacy technicians. I have concerns about two areas:

1) I feel that 2080 hours of on-job-training is more than is needed to produce competent technicians. My suggestion is that 1040 would be more appropriate. The American Society of Health-System Pharmacists requires a minimum of 600 hours for program accreditation. If the Board required 1040 hours plus a state examination, this would certainly be more than adequate.

2) I also feel that the Pharmacy Technician Program at Carver Career Center should be considered as a Board-approved program. Carver graduates complete a rigorous, well-designed technician training program. I have hired six Carver graduates for my retail operation. My impressions of these graduates are that they are highly motivated, well qualified, and look at their role as Pharmacy Technicians with seriousness and responsibility. They are focused and committed to the provision of pharmaceutical care for my patients.

If I can assist the Board in any way, please do not hesitate to call me.

Sincerely,

William McFarland, RPh  
Owner



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
236 Capitol Street  
Charleston, West Virginia 25301

March 28, 1996

Ms. Kathy R. McIntire, R.Ph.  
920 Fortney Street  
Morgantown, West Virginia 26505

Dear Ms. McIntire:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

Betty Jo Payne  
Office Administrator

bjp

Kathy R. McIntire, R.Ph.  
920 Fortney St.  
Morgantown, WV 26505

February 19, 1996

Sam Kapourales, President  
West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

Re: LEGISLATIVE RULES  
15 C.S.R. 7  
Title 15  
West Virginia Board of Pharmacy  
Series 7  
Registration of Pharmacy Technicians

Dear Mr. Kapourales,

My goal in commenting is to assure the safest, most efficacious, and most cost-effective healthcare for all West Virginians through the advancement of appropriate pharmacy practice in all its aspects. This requires full use of the professional training, experience and skills of pharmacists---and that requires highly trained, appropriate technical support. The limits of technical practice proposed in this document would pull pharmacists from current clinical roles, thus endangering patient safety and health, as well as cost significant health care dollars to pay pharmacists to do routine technical work, as well as put a number of very capable technicians out of work. Thus my understanding of this draft is that its role is to draw sufficient comments to produce the best final document. With that in mind, here are my recommendations.

#### 1) Standards of Quality

~~Currently~~ Currently, the standards for quality technical practice are maintained at a high level. Among the forces driving this are regulatory agencies, accrediting organizations, the increasingly litigious culture, and the desire of every institution to guard its reputation and survive. Pharmacists have a significant interest in assuring accurate, quality technical work since it is the pharmacist who will be held primarily responsible for the results. These, as well as other forces, have helped

to ensure that technicians are well-trained, properly supervised, and permitted to do only those tasks for which they have demonstrated competency.

Future standards of quality should be carefully supported in such a way as to allow the practice of pharmacy to adapt to rapidly changing conditions. This is essential if we are to continue to provide quality healthcare within the State of West Virginia. Thus the job description should be sufficient to ensure quality practice, but not place specific constraints that may limit our ability to accomplish these goals.

Thus limits such as dilution using distilled water only should be omitted. (Furthermore, distilled water is an inappropriate diluent for many drugs---some of which are packaged with their own diluents---and water could cause hemolysis and possibly death if used intravenously without other appropriate additives.)

## 2) Scope of Practice

Rules for pharmacy technicians need to consider the wide variety of practice roles and corresponding levels of competency required. Currently the term "technician" is used to describe both the delivery person who occasionally helps out behind the counter by getting bottles off the shelves and the highly trained technician preparing complex intravenous admixtures in a clean room. There are vast differences in levels and types of training needed, competencies required, and restrictions that should be placed on their activities.

The job description in the current draft of the Rules should be applied only to those grandfathered in. This level of practice as described includes a combination of roles such as bookkeeper, clerk, and stockkeeper with a very minimum of technical pharmacy practice.

Qualifications for the more complex technical practices need to be added to these Rules, since it is in these areas that the need for quality assurance is most vital.

Rules should: a) provide several levels of technical function, or b) exclude those who are really clerks and truly address technical practice. If this cannot be accomplished, then it would be better to totally avoid attempts to set standards for competency or outline scopes of activity and simply require registration of the names---and that for a nominal fee only. I think that "a" can be accomplished, but will take significantly longer to draft than any other part of these Rules.

### 3) Assurance of Competency

Competency requirements should be based on the role or level of technical function. The requirements should be significantly higher for the technician preparing complex solutions (e.g. 15 ingredient mixtures requiring specific order of mixing, specific timing of dilution, calculation of ml of drug required to give a specific mg/liter to run at 70 ml/hr for 24 hours when the drug is labeled in mEq/ml, knowledge of proper pump function, knowledge of proper filter size to avoid breaking the emulsion, skill in maintaining sterile technique, etc.) than for the technician who only occasionally needs to measure a volume of distilled water and add that to a pre-packaged bottle of antibiotic powder. The latter type of technicians should not be burdened with meeting complex requirements not needed for their jobs.

To put some perspective on the complex technical roles: some patients are being trained to mix these complex solutions at home for themselves. Thus such skills are within the realm of tasks that properly trained technicians should be able to accurately complete. However, just as not everyone is a candidate for home mixing of such solutions, not everyone is capable of being a pharmacy technician. Therefore, demonstration of competency is needed.

Consistency should be assured by stating the knowledge, skills, and abilities necessary to function. While not every training manual needs to be exactly the same, there should be certain minimal requirements stated so that compliance is clear. The contents of the manual should not be left to the discretion of a reviewing body which approves the documents on an individual basis. One concern with individual review is that the changing membership of any reviewing body may result in changing standards for technical competence---including the possibility of lower standards in the future.

Math requirements are absolutely necessary---adjusted according to the level of practice, of course.

Time spent working as a technician is insufficient basis as a sole criterion for assuring competency.

Testing could be performed accurately by any West Virginia Registered Pharmacist, but conditions should be stated:

An open request for input should be addressed to all pharmacists in West Virginia, and the draft submitted to them for review and comment. Much of what is needed is already in job descriptions throughout the state and could save you much time and effort.

#### 4) Dress Codes

Coats are a violation of clean room procedures and would impose a danger to patients via contamination of sterile products. They are reserved for professional staff in some institutions since some studies showed that having non-professional staff wear white coats was confusing to the patients. In patient care areas, long sleeves and coat-tails carry contaminants from patient to patient as the sleeves and tails come in contact with potentially infectious substances---an ever increasing concern with the increase in multi-drug resistant bacteria and mycobacteria.

The name tag lettering size specified is excessively large. Most institutions already have photo ID's and/or other identification sufficient that patients can clearly identify people and their roles. Such unusual name tags are usually reserved for students and sales reps to clearly identify them as distinct from trained healthcare workers. To require such a distinct method of identification may result in distrust of the competency of the person so "marked". Name tags identifying the person as a technician should be required, but further specifics should be left to the discretion of the employer.

#### 5) Registration Requirements

The proposed requirements of 2080 hours in 2 years is impossible to meet for the part-time workers, e.g. retirees limited by Social Security requirements to minimal hours or loss of wages, single parents, or people working 2 jobs to make ends meet. Also, it does not guarantee competency.

The fee of \$100.00 is burdensome for someone making minimum wage or little more than that. The initial fee should be nominal and stated in the Rules, with limits placed on the amount of increase in future---including renewal---fees. Ten to 20 dollars should be affordable.

The initial fee could be charged with each attempt to pass the test.

#### 6) Section 4.2

This section should be omitted from these Rules since it is not uniquely related to technical practice.

## 7) Training Periods

Stricter supervision, as already described in the Rules, should be required only for technicians in training. The time limit should be specified---perhaps up to the 2 years already used in the Rules for grandfathering---for the technician to become registered. Technicians in training could be registered by name and practice site for a nominal fee of 1 to 5 dollars. They should be permitted to begin training within a reasonably brief time period, e.g. 5 business days, unless notified otherwise by the Board.

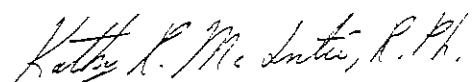
The grandfathering clause should be restricted to those practicing the most basic type of technical practice. Those in more complex practice roles should be required to demonstrate competency regardless of their time in practice.

I wish to emphasize that what I am not advocating is technicians practicing as pharmacists. Pharmacists must verify that the product of the work is accurate, appropriate, safe, etc. as if the pharmacist had done the work herself or himself. What I am advocating is that we not use highly paid and trained professionals---who are desperately needed elsewhere---to accomplish technical support tasks. It is sufficient that the pharmacist verify that the task was completed correctly and document that verification. It unnecessary for a pharmacist to stand constantly over a technician's shoulder, but appropriate supervision is necessary, and safeguards for such are not only possible, but are in use. The challenge lies in putting that on paper in the form of Rules.

In summary, we have worked extremely hard to increase acceptance of the professional practice of pharmacists. The Rules as currently drafted would force highly trained, experienced, and well paid professionals to leave pharmaceutical practice in order to accomplish the more routine, physical, and technical tasks associated with that practice. Although the cost constraints in healthcare are usually very difficult to handle, they have had the advantage of encouraging more appropriate roles for pharmacists---much to the benefit of the patients. Even so, the battle is not over and pharmacists still have a long way to go before their professional skills, experience, and training are fully utilized. I truly believe that the current draft of the Rules would outlaw technical practice as it now exists, with the result of endangering the health and safety of many people who now rely on us---as evidenced by studies showing both cost savings and improved therapy when pharmacists are practicing pharmaceutical care.

Thank you for this opportunity to comment. I hope you find my recommendations useful. Drafting appropriate Rules for an area of healthcare so broad in scope and so rapidly changing is a tremendous challenge. However, it does provide an opportunity to protect the interests of all West Virginians by supporting quality, cost-effective, and safe pharmacy practice in all its aspects. I look forward to seeing the next draft.

Yours truly,

A handwritten signature in cursive script that reads "Kathy R. McIntire, R.Ph.".

Kathy R. McIntire, R.Ph.



## Board of Pharmacy

Phone (304) 558-8558  
Fax (304) 558-0572

Office  
236 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

Mr. Theodore D. Henry  
Director of Pharmacy  
St. Mary's Hospital  
2900 First Avenue  
Huntington, West Virginia 25702

Dear Mr. Henry:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

Betty Jo Payne  
Office Administrator

bjp

February 14, 1996

Sam Kapourales, President  
West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, W.V. 25301

Dear Mr. Kapourales,

I am writing in concern of some extremely important issues related to the legislative rules for the registration of pharmacy technicians. I have discussed the proposed legislation in the original format with many pharmacists and I have provided my opinion toward these rules to those pharmacists who have attended various meetings where the rules were discussed. We were all attempting to provide insight and assistance in drafting the final legislation that will meet the needs of our patients and our profession without negatively effecting the performance of our responsibilities. There are a few issues that prevent this legislation from meeting the needs of all effected people. These issues are:

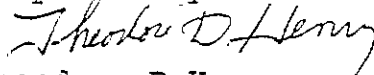
1. The lack of addressing the issue that pharmacy technicians prepare intravenous admixtures under the supervision of registered pharmacists. This must be addressed and must be an approved part of the final legislation. Without technicians assisting pharmacists in the endeavor, it would be impossible to continue to provide intravenous admixtures services as they exist today in most hospitals. We worked long and hard to provide pharmacy based admixture programs to insure safer and more effective services to our patients, and we do not want to jeopardize this situation. We are also attempting to have pharmacists use their valuable knowledge by getting more directly involved in patient care by doing the following: patient counseling; pharmacokinetic dosing; education programs; and various types of therapeutic monitoring. This can only be accomplished if many routine duties are performed by technicians under the direct supervision of a pharmacist. Our technicians have a long and well proven track record of safety and accuracy or we would not be using them. Our licenses cover these people and we do not take our professional responsibilities to our patients or our livelihood lightly.
2. The hours of experience required to meet registration requirements are excessive according to my thirty years of experience in training technicians. We completely train our technicians in all phases of their duties in six months or 1040 hours.
3. The technician identification issue can be effectively handled using conventional name tags that provide the persons name and the words pharmacy technician. I believe that anyone who needs to know the role of a

person in a pharmacy would be close enough to read any standard name tag. We have worked very hard to provide dress codes in our pharmacy to allow our personnel to look professional and differentiate roles. This has lead us to select different colors for pharmacists and technicians. These colors allow our personnel to be identified as pharmacy personnel as they travel the hospital. It would be quite difficult for us to adopt different colors and would possibly conflict with colors established by other hospital services. I would hope that colors for technician dress and the size of lettering on name tags would be excluded from the legislative rules.

4. I am pleased that technicians with two years of experience are being considered for exclusion from testing. I would strongly favor that technician testing in the future be accomplished by using the standardized national technician examination rather than the N.A.R.D. examination. This will allow for greater standardization and continuity by adopting the nationally recognized testing procedure.
5. The fees for registration and examination should be considered at a lower rate. These people are not highly paid personnel and a \$100.00 fee is quite severe. Testing of new technicians could be accomplished at the work place under properly supervised conditions, which could eliminate the need for this added workload by the Board of Pharmacy.

In closing I would like to state that I appreciate all of the time and effort that went into developing these legislative rules and I am simply expressing my opinion to allow consideration toward modifying the above stated issues. Without change, these legislative rules in their present form will certainly create problems for all of us. Thank you for allowing me to provide my thoughts toward these very important rules of pharmacy conduct. If I can be of service, please call on me at any time.

Respectfully submitted,



Theodore D. Henry  
Director of Pharmacy  
St. Mary's Hospital  
2900 First Avenue  
Huntington, WV 25702

wvboard



## Board of Pharmacy

Phone (304) 558-3558  
Fax (304) 558-0572

Office  
238 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

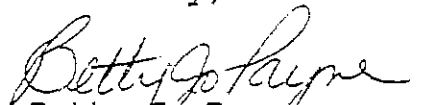
Mr. Roy Kemp  
Program Director  
Carver Career and Technical Education Center  
4799 Midland Drive  
Charleston, West Virginia 25306

Dear Mr. Kemp:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp



**Carver Career and Technical Education Center**  
*West Virginia School of Excellence*

---

February 19, 1996

Samuel Kapourales, President  
State Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

Dear Mr. Kapourales:

Please accept our comments on the proposed legislative rules for the training and registration of pharmacy technicians.

Carver Career and Technical Education Center has taken a leadership role in the training of Pharmacy Technicians in the State. Our graduates have filled technician positions in local retail, home-care, long-term care, rural health and hospital pharmacies. The support we have received from the pharmacy community provides a strong indication of our success. Our placement rate and the number of graduates who have passed the Voluntary National Certification Exam are other indications. For those reasons, and because we have been granted accreditation from the American Society of Health-System Pharmacists, we believe that we have a model program that could be duplicated throughout the state and should be considered as a Board-approved program. If the Board would not consider our program as a fulfillment of the total training requirement, we would at least ask that the Board grant our graduates six months credit toward the required On-Job-Training.

Toward this end, we would appreciate being placed on the agenda for the Board of Pharmacy meeting here in Charleston on March 18 and 19. Please advise us of the time we should be present and the amount of time we will have to address this request.

Respectfully,

Roy Kemp  
Program Director



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
236 Capital Street  
Charleston, West Virginia 25301

March 28, 1996


Mr. Kenneth G. Jozefczyk, M.S., R.Ph.  
Director, Pharmaceutical Services  
West Virginia University Hospitals  
Medical Center Drive  
Morgantown, West Virginia 26506-8045

Dear Mr. Jozefczyk:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp



WEST VIRGINIA UNIVERSITY HOSPITALS

January 28, 1995

Sam Kapourales  
West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

RE: Legislative Rules: Registration of  
Pharmacy Technicians

Dear Mr. Kapourales:

The purpose of this letter is to provide comments to the West Virginia Board of Pharmacy concerning Legislative Rules (15 C.S.R. 7) related to the training and regulation of pharmacy technicians. My emphasis in reviewing these rules is on their impact on hospital pharmacy.

15-7-3.2 "An applicant for registration as a pharmacy technician shall complete 2,080 hours of on-the-job training..."

**Comment:** The Board's concern with assuring that the technician receives adequate training is appreciated. A well developed training program, however, could achieve the Board's intent in a much shorter period. I would suggest that this period should not exceed 1,040 hours.

15-7-3.3 It is my understanding that the examination will be at least partially based on the NARD training manual.

**Comment:** In our practice setting, pharmacy technicians have no exposure to the types of things covered in the NARD manual. It is analogous to basing the exam on the ASHP training manual, which would be unfair to pharmacy technicians in a retail setting. I suggest eliminating the section of the exam dealing with the NARD training manual.

15-7-4 Duties and restrictions

**Comments:** "Admixing sterile products under the supervision of a pharmacist", needs to be added. Removing this function from pharmacy technicians would virtually cripple most hospital pharmacies.

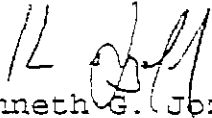
National Certification Exam

**Comments:** The Board has stated that requiring this exam would be unfair and poorly received. I agree. However, I suggest that the Board accept the National

Certification Exam for Pharmacy Technicians, in lieu of the on-the-job training requirement or the West Virginia examination or both. The national exam is comprehensive and has been well tested. Hiring pharmacy technicians that have passed the exam gives the pharmacist, in any setting, assurance that individual has the knowledge necessary to perform as a pharmacy technician.

Thank you for the opportunity to comment on these rules. If I can be of any assistance to the Board in clarifying my comments, please do not hesitate to call me at (304) 598-4148.

Sincerely,



Kenneth G. Jozefczyk, M.S., RPh  
Director  
Pharmaceutical Services

/kj



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
236 Capitol Street  
Charleston, West Virginia 25301

March 28, 1996


Mr. James A. Kranz  
Vice President, Professional Activities  
West Virginia Hospital Association  
100 Association Drive  
Charleston, West Virginia 25311-1571

Dear Mr. Kranz:

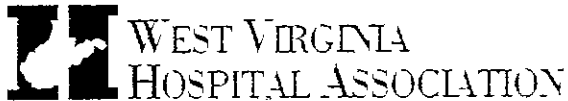
The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp



100 Association Drive  
Charleston, WV 25311-1571  
(304) 344-9744  
FAX: (304) 344-9745

February 23, 1996

Mr. Sam Kapourales, President  
West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

Re: Legislative Rules  
15 C.S.R. 7 Title 15  
West Virginia Board of Pharmacy  
**REGISTRATION OF PHARMACY TECHNICIANS**

Dear Mr. Kapourales:

The purpose of this letter is to provide comments regarding the proposed rules for the registration of pharmacy technicians. On behalf of its 65 member hospitals, the West Virginia Hospital Association is providing you with these comments pertaining to these proposed rules. We have two major areas of concern, they are:

#### **§ 15-7-3.2 Pharmacy Technician Training Program**

The original intent of registering pharmacy technicians was to test for competency, and to have all pharmacy technicians registered with the Board for identification purposes. The rules read quite different from that.

It would appear that you are setting up a two-year training program and licensure program rather than a competency test. No information has been provided regarding what the Board would consider an approved training program. The rules state that the applicant for registration as a pharmacy technician shall complete "2080 hours of on-the-job training within the pharmacy under the direct supervision of a pharmacist within a 24 month period." These required hours would be longer than any of the licensed/registered professionals that work in health care today. As an example, the intern period for a pharmacist is 2000 hours, RNs and Radiologic Technologists are less than 2000 hours.

#### **§ 15-7-4 Duties and Restrictions**

Under the described duties and restrictions for the pharmacy technician, it would appear that these new rules could prohibit pharmacy technicians or technician trainees from preparing I.V. admixtures. "Reconstitute - restoration of original form of medication previously altered for preservation and storage by the addition of a specific quantity of distilled water or provided diluent requiring no calculations." "Weigh or measure specific ingredients for the pharmacist to use in an extemporaneous compounding." These two statements clearly could eliminate the ability for a pharmacy technician to assist in the preparation of I.V. admixtures. This however, would appear to be in conflict with the West Virginia Pharmacy Practice Act. According to Section 30-5-3 of the practice act, subsection (b) reads, "Registered pharmacy technicians may assist in the preparation and

## REGISTRATION OF PHARMACY TECHNICIANS

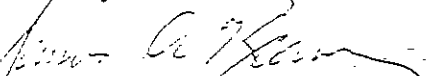
Page 2

Dispensing of prescriptions or prescription refills including, but not limited to, reconstitution of liquid medications, typing and affixing labels under the direct supervision of a licensed pharmacist." There certainly seems to be a conflict between the proposed rules and current West Virginia pharmacy law. The impact on patient care in West Virginia would be disastrous, and would have a devastating affect on the ability to deliver services.

### SUMMARY

The rules as currently written are very vague and do not seem to address the potential economic impact on health care providers to meet these standards. The West Virginia Hospital Association conducted a survey of seven randomly picked hospitals and the impact to those seven hospitals alone would add \$1.2 million to their payroll. At a time when hospitals are trying to become more cost effective in the delivery of health care, we can not afford to take such a step backward. Thank you for reading, and addressing our concerns. Together we can make for a healthier West Virginia.

Sincerely,



James A. Kranz  
Vice President, Professional Activities



## Board of Pharmacy

Phone (304) 558-0558

Fax (304) 558-0372

Office  
238 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

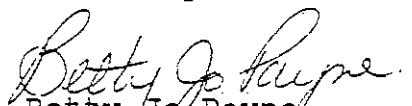
Mr. Thomas E. Menighan, R.Ph.  
OPTION Care  
1308 4th Avenue  
Huntington, West Virginia 25701

Dear Mr. Menighan:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp

OPTION CARE  
1308 4TH AVENUE  
HUNTINGTON, WV 25701  
304 525-1222  
FAX: 304 525-6591

February 22, 1996

Sam Kapourales, President  
West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

Re: Legislative Rules for Registration of Pharmacy Technicians

Dear Sam:

Please accept this letter as my comments regarding proposed rules to govern pharmacy technicians. In general, I am supportive of additional structure for technicians, as I believe they are critical in assisting pharmacists provide quality care at a reasonable cost. I applaud the Board for setting a high standard for West Virginia's technicians and I appreciate the opportunity to comment.

Pharmacy technicians are the responsibility of the pharmacists they assist and specifically, the Pharmacist-in-Charge at their place of employment. Thus, I believe it is the responsibility of the pharmacist-in-charge to insure his or her technicians are suitably trained. I did not think the new pharmacy practice act required mandatory registration and I do not favor it. The pharmacy practice act was intended to empower pharmacists to be more active with patients. Our citizens would be just as well served with voluntary certification via internal training or through participation in various technician certification programs available through state and national organizations.

#### Paragraph 15-7-3. Training Program.

As noted above, training programs for technicians are available and evolving rapidly from several sources. Flexibility should be given to pharmacies as to which program their technicians participate in, since different programs may offer better training for retail techs than IV techs or vice versa. Under provision 3.4, an approval process is suggested for training manuals. Since many pharmacies have developed their own manuals, often in response to rigorous JCAHO requirements, the board should not limit approval to only one or two manuals.

#### Paragraph 15-7-4. Duties and Restrictions.

These provisions are generally empowering, however, I am concerned about the lack of empowerment for technicians working in practice settings other than retail. In today's practice, hospital and other IV technicians commonly mix TPN, antibiotics, chemotherapy, and other drugs in ways that require skills in aseptic technique and calculations. These valuable services would seem to be precluded by the proposed rules. I am uncomfortable with verbal assurances that technicians in these environments will be allowed to continue doing the work they have been trained to do. In short, if the board will allow them to compound IV solutions, then the regulations should reflect that empowerment.



## Board of Pharmacy

Phone (304) 558-3558  
Fax (304) 558-0572

Office  
236 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

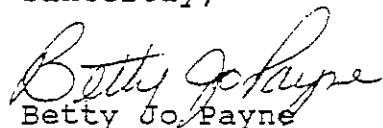
Ms. Dianna L. Ringer, Ms. Linda Frederick, Ms. Renee Riley,  
Ms. Debra Sommer and Ms. Jan Mitchell  
Monongalia General Hospital  
Morgantown, West Virginia 26505

Dear Pharmacists:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp

February 19, 1996

West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

RE: Registration of Pharmacy Technicians - 15 C.S.R. 7, Title 15, Series 7

Dear Sir/Madam:


We would like to take this opportunity to comment on the proposed rules regarding the registration of pharmacy technicians. We have grave concerns about this legislation. If passed in its present form, we believe that it would have a devastating impact on pharmacy and would only increase health care costs. Our comments are as follows:

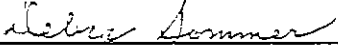
- 1) We disagree with the requirement of 2080 hours of "on the job" training. We think it is excessive considering the degree of direct supervision of the technician by a licensed pharmacist. We thought that the intent of registering pharmacy technicians was to test for competency and to be able to identify all pharmacy technicians within the state. The **2080 hours of "on-the-job" training in a 24 month period** is longer than the intern period for a pharmacist or nurse.
- 2) According to the new rules for the pharmacy technician, it could be interpreted that the tech would be prohibited from compounding I.V. admixtures. Technicians play a major and valuable role in hospital pharmacy in the preparation of I.V. admixtures. If they were prevented from fulfilling this duty, we believe that this would have a **negative effect on patient care in West Virginia, and a detrimental impact on the dollars necessary to provide quality care to our people.** Pharmacists would have to replace the technicians at a much higher cost to the hospital. They would also have to be reassigned from their responsibilities of monitoring patient drug therapy, patient assessment, patient education, and monitoring for adverse drug reactions and drug interactions.
- 3) The duties that are outlined for the pharmacy technician relate more so to the technician that works in retail pharmacy. **They fail to include the duties that are characteristic to hospitals and nursing homes.** They need to be updated to reflect the duties of the hospital pharmacy technician, etc.

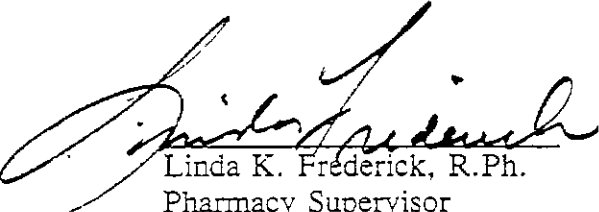
4) The potential restrictions that would be placed on technicians as a result of these new rules would only serve to force the pharmacists back into distribution functions. We have been fighting for years for the implementation of the pharmaceutical care model of practice for the pharmacists and these rules would have a negative impact on patient care. (see #2)

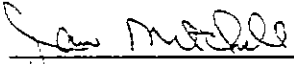
We feel that the rules as written are vague and don't address the potential economic impact to providers of health care to be able to meet these standards. We are hopeful that the rules will be revised with input from the professional organizations that represent the various kinds of pharmacy practice in West Virginia.

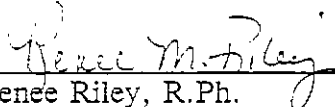
Respectfully submitted,

  
Dianna L. Ringer, R.Ph.  
Director of Pharmacy  
Monongalia General Hospital  
Morgantown, WV 26505

  
Debra Sommer, R.Ph.  
Staff Pharmacist  
Monongalia General Hospital  
Morgantown, WV 26505

  
Linda K. Frederick, R.Ph.  
Pharmacy Supervisor  
Monongalia General Hospital  
Morgantown, WV 26505

  
Jan Mitchell, R.Ph.  
Staff Pharmacist  
Monongalia General Hospital  
Morgantown, WV 26505

  
Renee Riley, R.Ph.  
Staff Pharmacist  
Monongalia General Hospital  
Morgantown, WV 26505



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
236 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

Mr. Jefferey A. Lackman  
Director of Pharmacy  
Fairmont General Hospital  
1325 Locust Avenue  
Fairmont, West Virginia 26554

Dear Mr. Lackman:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
236 Capital Street  
Charleston, West Virginia 25301

March 28, 1996


Mr. Gary R. Sims  
Vice-President  
Drug Emporium  
1601 Kanawha Blvd., West, Suite 100  
Charleston, West Virginia 25312

Dear Mr. Sims:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp



Discount Emporium, Inc.

# Drug Emporium®

DISCOUNT EMPORIUM, INC. #1  
DRUG EMPORIUM  
3 MALL ROAD  
BARBOURSVILLE, WV 25304  
TELEPHONE (304) 736-0874

DISCOUNT EMPORIUM, INC. #2  
DRUG EMPORIUM  
1603 KANAWHA BLVD. W.  
CHARLESTON, WV 25312  
TELEPHONE (304) 345-3921

DISCOUNT EMPORIUM, INC. #3  
DRUG EMPORIUM  
5101 MACCORKLE AVE., S.E.  
CHARLESTON, WV 25304  
TELEPHONE (304) 925-7099

ACCOUNTING OFFICE  
DRUG EMPORIUM  
1601 KANAWHA BLVD. W., SUITE 100  
CHARLESTON, WV 25312  
TELEPHONE (304) 345-4836

**FROM:** Drug Emporium

**TO:** West Virginia Pharmacy Board

**DATE:** February 26, 1996

**SUBJECT:** Legislative Rules - Registration of Pharmacy Technicians

1. We take exception to paragraph 15-7-3, Pharmacy Technician Training Program, subparagraph 3.1.

A. We recommend the following should be substituted as 3.1.:

A prospective pharmacy technician trainee may begin their initial orientation and evaluation by a licensed Pharmacist while their application forms are being processed by the Board. A pharmacy technician trainee must register with the board and make application within 14 days of starting to work in the pharmacy. Any hours worked during this interim period will be applied toward the 2,080 hour requirement upon the successful completion of the registration process.

2. It is felt that many potential trainees are "weeded" out in the first two weeks of training/evaluation in the pharmacy and this would reduce unnecessary paperwork at the beginning of this process.

3. Thanking you in advance for your consideration.

I am,

Sincerely,

Gary R. Sims  
Vice President



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
235 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

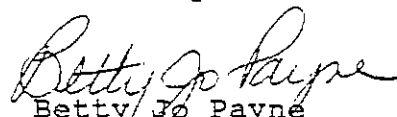
Mr. Lou Carter, Director of Pharmacy  
Bluefield Regional Medical Center  
500 Cherry Street  
Bluefield, West Virginia 24701

Dear Mr. Carter:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp

BLUEFIELD REGIONAL MEDICAL CENTER  
500 CHERRY STREET  
BLUEFIELD, WEST VIRGINIA 24701  
PHARMACY DEPARTMENT (304)-327-1190

WEST VIRGINIA BOARD OF PHARMACY  
236 CAPITAL ST.  
CHARLESTON, WV 25301

FEB. 20, 1996

DEAR SIRs,

IN REGARDS TO THE LEGISLATION ADDRESSING THE REGISTRATION OF PHARMACY TECHNICIANS, THERE IS ONE QUESTION FOR WHICH I AM UNABLE TO OBTAIN A DEFINATE ANSWER:

ACCORDING TO MY READING OF THE SECTION OF THE LEGISLATION DEALING WITH "GRANDFATHERING", 2080 HOURS OF WORK OVER A PERIOD OF 2 YEARS IS REQUIRED TO MAKE A CANDIDATE ELIGABLE FOR REGISTRATION UNDER THE GRANDFATHER CLAUSE. ALSO IF A CANDIDATE HAS 2080 HOURS (OR EXCESS) OF EXPERIENCE GAINED IN A TIME PERIOD OF LESS THAN 2 YEARS BUT EXCEEDING 1 YEAR HE/SHE IS STILL ELIGABLE FOR REGISTRATION BY "GRANDFATHERING".

IS THIS CORRECT? IF NOT PLEASE CLARIFY.

REGARDING THE FOLLOWING 2 TOPICS OF CONCERN:

- 1) UNSPECIFIED TRAINING AND DURATION OF TRAINING FOR PHARMACY TECHNICIANS.

IT PRESENTLY SEEMS THAT THE TRAINING REQUIRED TO SUCCESSFULLY COMPLETE THE TEST FOR REGISTRATION IS GEARED PRIMARILY TOWARD RETAIL DRUG STORES. RECENTLY, I SHARED OUR TECHNICIAN TRAINING PROGRAM, INCLUDING THE TESTS, WITH MR. ROBERT DAVIS, INSPECTOR FOR THE STATE BOARD, AND HE SEEMED TO FEEL THAT IF INCORPORATED INTO A STANDARD OF TRAINING FOR RETAIL TECHNICIANS, IT COULD AT LEAST BE A MODEL FOR A TRAINING PROGRAM FOR BOTH HOSPITAL AND RETAIL ESTABLISHMENTS. I HAVE GIVEN MR. DAVIS A COPY OF OUR PROGRAM FOR YOUR SCRUTINY.

- 2) CONFLICT BETWEEN THE PRESENT PHARMACY ACT AND THE PROPOSED RULE WHICH MAY DISALLOW PHARMACY TECHNICIANS TO PREPARE IV ADD MIXTURES.

THIS WOULD OF COURSE INCREASE INDIVIDUAL INSTITUTIONAL COSTS AND BE IN DIRECT OPPOSITION TO LOCAL, STATE AND FEDERAL DIRECTIONS IN THE AREA OF HEALTH CARE COST REDUCTION.

I WOULD PROPOSE THAT ANY FACILITY INVOLVED IN THE PREPARATION OF IV ADMIXTURE BE REQUIRED THE FOLLOWING:

- DOCUMENTATION OF TRAINING OF PERSONNEL INVOLVED IN THE PREPARATION OF IV ADMIXTURES.
- DOCUMENTATION OF, AT LEAST, ANNUAL INSERVICE AND/OR

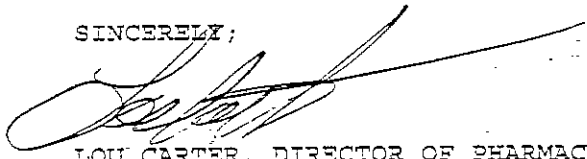
UPGRADE OF ORIGINAL TRAINING.

- DOCUMENTATION OF, AT LEAST, ANNUAL COMPETENCY ASSESSMENT OF THE PERSONNEL INVOLVED IN THE PREPARATION OF IV'S.

PRESENTATION OF THIS DOCUMENTATION COULD THEN BE A PART OF THE FACILITY'S ANNUAL STATE BOARD INSPECTION.

I RESPECTFULLY SUBMIT THE ABOVE SUGGESTIONS AND FEEL THAT THEY WOULD AID IN A RELATIVELY SMOOTH TRANSITION IN THE REGISTRATION AND DEFINITION OF DUTIES OF PHARMACY TECHNICIANS.

SINCERELY;



LOU CARTER, DIRECTOR OF PHARMACY  
BLUEFIELD REGIONAL MEDICAL CENTER  
500 CHERRY ST.  
BLUEFIELD, WV 24701  
(304)-327-1190

Jefferey A. Lackman  
Director of Pharmacy  
Fairmont General Hospital  
1325 Locust Avenue  
Fairmont, WV 26554

Dear West Virginia Board of Pharmacy,

Attached please find copies of the West Virginia Hospital Association's comments regarding proposed rules for registration of Pharmacy technicians. These have been signed by members of my staff – technicians and Pharmacists – to demonstrate their support for the WVHA's comments.

I, too, urge you to reconsider these changes. My concerns are similar to the WVHA's comments, but I will add my own words. I have been a Pharmacist in West Virginia since late 1995. I graduated from Purdue University's School of Pharmacy in 1982. In the last 14 years I have seen many changes in our profession, the same changes you have seen. I have left retail Pharmacy and moved to hospital Pharmacy. I have seen the focus of the practice of Pharmacy change more and more to cost containment, drug information, education along with dispensing. I am not certain that Pharmacy will survive as we know it unless we can change the perception of what we do and why we do it.

I am concerned that preventing technicians from mixing IV's can potentially make Pharmacy a "problem" in many hospitals as we seek to increase our budgets to cover the use of Pharmacists to mix, or withdraw Pharmacists from clinical Pharmacy duties on nursing units. I can only imagine the difficulty I would have in explaining either of these events to hospital administrators. The technicians who currently work with me have been excited to recently be involved in their training to mix IV's. No technician can just walk in and mix. We have a program involving ASHP material, one on one instruction with a Pharmacist, and very soon an exam to check on skills. As technicians learn to prepare IV admixtures, it frees at least one Pharmacist to have more time on the floors to make clinical interventions which save money and improve patient care. Our clinical intervention program has documented thousands of dollars in reduced costs for our patients. We will always maintain Pharmacists in the Pharmacy, but I see them moving into a role of coordinating and supervising technicians.

Recently, one of our technicians passed the National Pharmacy Technician Certification Exam. I am very impressed with the amount of knowledge she gained in preparing for this exam. Perhaps a West Virginia version of such an exam is an alternative to the proposed rules. Alternatively, I am certain that a number of Pharmacists could be pulled together in a task force to create or adapt a certification exam and/or choose training materials or programs. I would gladly offer my services to such a task force, if the Board saw fit to create one.

I understand why you propose these rules, and respect your desire to implement them. I also urge you to consider modifying them so that West Virginia will always be able to receive the highest quality Pharmacy service.



Sam Kapourales, President

Page 2

February 22, 1996

**Paragraph 16-7-5. Identification of Technicians.**

This paragraph seems to contain an obvious error regarding lettering size. Name tags that are 3 ½ by 2 ½ inches are appropriate. Lettering of that size would result in badges over two feet in length.

In summary, I believe the board has done a responsible job of writing regulations for pharmacy technicians. I continue to support voluntary certification and management by a pharmacist-in-charge, rather than mandatory registration and board-conducted competency exams. My biggest concern, however, is the lack of language empowering technicians in IV compounding facilities. Thank you for the opportunity to comment. I would be happy to work with you to provide specific language to address the issues I've raised.

Respectfully,

A handwritten signature in cursive script, appearing to read "T. Menighan", followed by a horizontal line.

Thomas E. Menighan, R.Ph.  
Partner



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
236 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

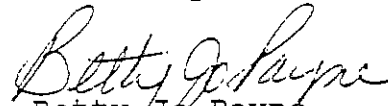
Mr. Stephen L. Chesser, R.Ph.  
Associate Director  
Department of Pharmaceutical Care Services  
St. Joseph's Hospital  
Parkersburg, West Virginia 26102-0327

Dear Mr. Chesser:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp

February 20, 1996

Mr. Sam Kapourales, President  
West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

Re: Legislative Rules  
15 C.S.R. 7  
TITLE 15  
WEST VIRGINIA BOARD OF PHARMACY  
SERIES 7  
REGISTRATION OF PHARMACY TECHNICIANS

Dear Mr. Kapourales:

Upon review and consideration of the proposed rules regarding registration of pharmacy technicians, I feel there are several areas of concern which will need to be addressed. Although overall good in their intention, there are several rules which may be counterproductive to contemporary hospital pharmacy practice and the provision of pharmaceutical care. Some of these are highlighted as follows:

**Rule 15-7-3.2 Pharmacy Technician Training Program**

The requirement of 2080 hours of "on-the job training" exceeds the number of internship hours required before a pharmacist is eligible for licensure in the state of West Virginia. There simply is not adequate justification for this requirement in view of the duties performed by the majority of technicians while under the direct supervision of a licensed pharmacist. In the face of staffing reductions, there are more part-time employees in hospitals now than ever before. This rule is actually discriminatory from that standpoint alone. After months of discussion, there remains to be any clarification as to what types of training are acceptable from the Board's viewpoint. Also, by failing to acknowledge training and experience of technicians from other states or programs, we limit ourselves in the quality of personnel which we might have otherwise employed.

**Rule 15-7-4 Duties and Restrictions**

The definition of compounding appears restrictive to mainstream institutional pharmacy practice. In the event that technicians are not permitted to prepare intravenous admixtures as per their ability and level of pharmacist-supervised training, all pharmacy services will suffer in both home healthcare agencies and hospitals where IV admixture services are provided. The personnel budget for our department at St. Joseph's Hospital would not permit the number of pharmacists required to perform all of the required IV preparation. This would likely result in curtailing or eliminating some services altogether.

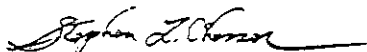
**Rule 15-7-7 Fees**

The rule requiring a \$100 administration fee for a simple competency examination is excessive and not in line with the practice of any other state in country. This point requires no further mention.

I am deeply concerned with the effect these proposed rules will have on my department and on the profession of pharmacy as a whole. Might it not be better to come to a consensus through discussion and compromise with input from all professional pharmacy organizations rather than adopting rules which not only lead to economic detriment, but ultimately sacrifice good patient care? I truly hope these rules are thoughtfully evaluated and revised prior to final enactment.

Thank you for your consideration

Respectfully yours,



Stephen L. Chesser, R.Ph.  
Associate Director  
Department of Pharmaceutical Care Services  
St. Joseph's Hospital  
Parkersburg, WV 26102-0327  
(304) 424-4647



## Board of Pharmacy

Phone (304) 558-0558  
Fax (304) 558-0572

Office  
236 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

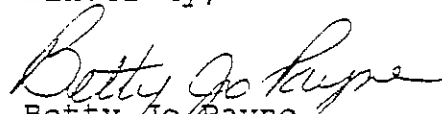
Mr. C. Rodney Godwin, R.Ph.  
Director of Pharmaceutical Services  
St. Joseph's Hospital  
Buckhannon, West Virginia 26201

Dear Mr. Godwin:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp



## Board of Pharmacy

Phone (304) 538-0558  
Fax (304) 538-0572

Office  
236 Capital Street  
Charleston, West Virginia 25301

March 28, 1996

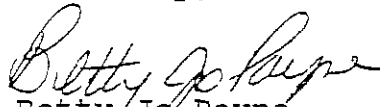
Mr. Jerry K. Kelley  
P. O. Box 208  
Red House, West Virginia 25168

Dear Mr. Kelley:

The West Virginia Board of Pharmacy reviewed your written comments to the proposed legislative rules regarding registration of pharmacy technicians at their meeting on March 11, 1996, in Charleston, West Virginia. After thorough review of all written comments, including yours, the Board has made necessary changes as evidenced by the attached proposed rules.

The Board would like to sincerely thank you for your participation in the rule-making process.

Sincerely,

  
Betty Jo Payne  
Office Administrator

bjp



**HOUSE OF DELEGATES**  
WEST VIRGINIA LEGISLATURE  
BUILDING 1, ROOM M-212  
1900 KANAWHA BLVD., EAST  
CHARLESTON, WV 25305-0470  
PHONE (304) 340-3200

JERRY K. KELLEY  
BOX 208  
RED HOUSE, WV 25168  
PHONE (304) 586-2277

January 30, 1996

Committees:  
Constitutional Revision  
Finance  
Industry & Labor

Mr. Samuel Kapourales  
Chairman  
Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

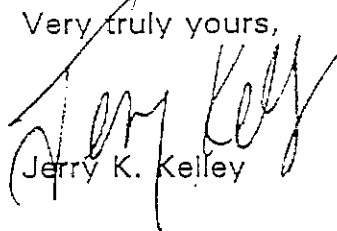
Dear Mr. Kapourales:

This is to request that successful completion to Pharmacy Technician Program at the Carver Career Center apply toward qualification requirements to take the pharmacy technician examination.

This provision may be requested to be effected under the rules promulgated by the Board. If this is the case, I request that the provision be made in the next scheduled rule change. If a rule change is not required, I would request the provision be made as soon as possible and practical.

Thank you for your time and attention to this matter,

Very truly yours,

  
Jerry K. Kelley

JKK:ebc

C. Rodney Godwin  
51 King School Road  
Buckhannon, WV 26201  
February 21, 1996

West Virginia Board of Pharmacy  
236 Capitol Street  
Charleston, WV 25301

Re: Legislative Rules,  
15 C.s.R.7  
TITLE 15  
WEST VIRGINIA BOARD OF PHARMACY  
SERIES 7  
REGISTRATION OF PHARMACY TECHNICIANS

Dear Sirs:

The purpose of this letter is to comment on the proposed rules for registration of pharmacy technicians. The major revisions to the Pharmacy Practice Act by the 1995 Legislature had the intent of recognizing and registering pharmacy technicians in the state of West Virginia as a vital part in the pharmaceutical care both in retail and in the hospital setting. I do not feel that the proposed rules have addressed the role of technicians in the hospital setting. If this omission is to become the standard of practice, a great discredit is being done to those who practice pharmacy in the hospital setting and a great financial burden will be placed on health care in West Virginia.

s 15-7-3.2 Pharmacy Technician Training Program

The requirement of 2080 hours on "on-the-job" training exceed the requirements that a pharmacist must complete for licensure. These hours must be accomplished in a 24 month period. Many employees that only work part-time will never be able to meet this requirement.

The Board plans to use the training manual published by the National Association of Retail Druggists (NARD). This association is only oriented to the retail practice of Pharmacy. I question the validity of the training for technicians in hospital, home care, or nursing home practices. These omissions are not the intent of the Legislature.

s 15-7-4

Under the described duties and restrictions for the pharmacy technicians, it would appear these new rules could prohibit pharmacy technicians or technician trainees from preparing intravenous medications and nutrition preparation (I.V. admixtures). "Reconstitute- restoration of original form of medication previously altered for preservation and storage by the addition of a

specified quantity of distilled water or provided diluent requiring no calculations." "Weigh or measure specific ingredients for the pharmacist to use in an extemporaneous compounding." These two statements clearly could eliminate the ability for a pharmacy technician to prepare I.V. solutions or admixtures. This however, would be in conflict with the West Virginia Pharmacy Practice Act according to Section 30-5-3 of the practice act, subsection (b) reads, "Registered pharmacy technicians may assist in the preparation and dispensing of prescriptions or prescription refills including, but not limited to, reconstitution of liquid medications, typing and affixing labels under the direct supervision of a licensed pharmacist." There would appear to be a conflict between the proposed rules and the current West Virginia pharmacy law. If passed, these rules could end preparation of I.V. solutions by technician. The economic consequences of this would be devastating to the health care cost in the state of West Virginia. It has been estimated that the cost would be in the area of \$8 million dollars. This was not the intent of the Legislature.

s 15-7-5 Identification of Technicians and Technician Trainees

Most hospitals have established photographic ID badges. The requirement of lettering 3 1/2 inches by 2 1/4 inches makes the lettering larger than most ID badges. Did the Legislature intend to require all hospital to change their ID badges just to identify a pharmacy technician?

s 15-7-7 Fees

If all the training is being accomplished in the work sight, the Pharmacist in Charge should administer the examination. The fee of \$100.00 seems excessive as compared to the cost of taking the licensure examination.

I feel that we need to examine the need to include all area of pharmacy practice before these rules are accepted. This will negate the need to quickly start changing the rule and cause much more confusion than is needed or wanted.

Respectfully Submitted,



C. Rodney Godwin, R.Ph.  
Director of Pharmaceutical Services  
St. Joseph's Hospital  
Buckhannon, WV  
(304) 473-2051