



Report of the Task Force on the Control and Accountability of Prescription Medications

Members Present:

John Clay Kirtley (AR), *chair*; Herb Bobo (AL); William Fitzpatrick (MO); Virginia Herold (CA); Gary Karel (SD); Douglas R. Lang (MO); Alice Mendoza (TX); Leo Richardson (SC); and Joanne Trifone (MA).

Others Present:

Edward G. McGinley, *Executive Committee liaison*; Carmen Catizone, Melissa Madigan, Eileen Lewalski, Deborah Zak, *NABP staff*.

Introduction:

The Task Force on the Control and Accountability of Prescription Medications met October 26-27, 2011, at NABP Headquarters. This task force was established in response to Resolution 107-3-11, Control and Accountability of Prescription Medications, which was approved by the NABP membership at the Association's 107th Annual Meeting in May 2011.

Review of the Task Force Charge:

Task force members reviewed their charge and accepted it as follows:

1. Review existing state laws and regulations addressing the control and accountability of prescription drugs, the Report of the Task Force to Review and Recommend Revisions to the Controlled Substances Act, as well as relevant sections of the *Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy (Model Act)*.
2. Recommend revisions, if necessary, to the *Model Act* addressing this issue.

Recommendation 1: NABP Should Amend the Model Act

The task force recommends the following changes to the *Model Act*, including changes to the Model Rules for the Practice of Pharmacy. The revisions recommended by the task force are denoted by underlines and ~~strikethroughs~~.

Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy

Article III Licensing

Section 302. Qualifications for Licensure by Examination.

- (a) To obtain a license to engage in the Practice of Pharmacy, an applicant for licensure by examination shall:
- (1) have submitted a written application in the form prescribed by the Board of Pharmacy;
 - (2) have attained the age of majority;
 - (3) be of good moral character;
 - (4) have graduated and received the first professional degree from a college or school of Pharmacy that has been approved by the Board of Pharmacy;
 - (5) have graduated from a foreign college of Pharmacy, completed a transcript verification program, taken and passed a college of Pharmacy equivalency examination program, and completed a process of communication-ability testing as defined under Board of Pharmacy regulations so that it is ensured that the applicant meets standards necessary to protect public health and safety;
 - (6) have completed a Pharmacy practice experience program or other program that has been approved by the Board of Pharmacy, or demonstrated to the Board's satisfaction that experience in the Practice of Pharmacy which meets or exceeds the minimum Pharmacy practice experience requirements of the Board;
 - (7) have successfully passed an examination or examinations given by the Board of Pharmacy;
 - (8) have undergone a state and federal fingerprint-based criminal background check;
and
 - (9) have paid the fees specified by the Board of Pharmacy for the examination and any related materials, and have paid for the issuance of the license.

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Section 305. Renewal of Licenses and Registrations.

- (a) Each Pharmacist, Pharmacy Intern, Certified Pharmacy Technician, and Pharmacy Technician shall apply for renewal of his or her license annually [or at such interval determined by the Board], no later than the first day of _____. A Pharmacist, Pharmacy Intern, Certified Pharmacy Technician, or Pharmacy Technician who desires to continue or assist in the Practice of Pharmacy in this State shall file with the Board an application in such form and containing such data as the Board may require for renewal of the license. If the Board finds that the applicant has been licensed, and that such license has not been Revoked or placed under Suspension, that the applicant has attested that he or she has no criminal convictions or arrests, has paid the renewal fee, has continued his or her Pharmacy education, if required, in accordance with the rules of the Board, and is entitled to continue in or assist in the Practice of Pharmacy, the Board shall issue a license to the applicant.

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- (c) A Pharmacist shall apply for renewal of his or her registration to Practice Telepharmacy Across State Lines annually [or at such interval determined by the Board], no later than the first day of (month). A Pharmacist who desires to continue in the Practice of Telepharmacy Across State Lines shall file with the Board an application in such form and containing such data as the Board may require for renewal of the registration. If the

Board finds that the applicant has been licensed to Practice Pharmacy in another State and registered to Practice Telepharmacy Across State Lines in this State, that such license and registration have not been Revoked or placed under Suspension, and that the applicant has attested that he or she has no criminal convictions or arrests, has paid the renewal fee and is entitled to continue to engage in the Practice of Telepharmacy Across State Lines, the Board shall issue a registration to the applicant.

Section 302(a)(8). Comment.

If the applicant does not complete the application process within a period specified by the Board, it is recommended that the state and federal fingerprint-based criminal background check be repeated.

Section 308. Registration of Certified Pharmacy Technicians.

- (a) In order to be registered as a Certified Pharmacy Technician in this State, an applicant shall:
- (1) have submitted a written application in the form prescribed by the Board of Pharmacy;
 - (2) have attained the age of _____;
 - (3) have good moral character;
 - (4) have graduated from high school or obtained a Certificate of General Educational Development (GED) or equivalent;
 - (5) have:
 - (i) graduated from a competency-based pharmacy technician education and training program approved by the Board of Pharmacy; or
 - (ii) been documented by the Pharmacist-in-Charge of the Pharmacy where the applicant is employed as having successfully completed a site-specific, competency-based education and training program approved by the Board of Pharmacy;
 - (6) have successfully passed an examination developed using nationally recognized and validated psychometric and pharmacy practice standards approved by the Board of Pharmacy;
 - (7) have undergone a state and federal fingerprint-based criminal background check;
and
 - (8) have paid the fees specified by the Board of Pharmacy for the examination and any related materials, and have paid for the issuance of the registration.
- (b) No Pharmacist whose license has been denied, Revoked, Suspended, or restricted for disciplinary purposes shall be eligible to be registered as a Certified Pharmacy Technician.
- (c) The Board of Pharmacy shall, by rule, establish requirements for registration of Certified Pharmacy Technicians.

Section 309. Registration of Pharmacy Technicians.

- (a) In order to be registered as a Pharmacy Technician in this State, an applicant shall:

- (1) have submitted a written application in the form prescribed by the Board of Pharmacy;
 - (2) have attained the age of _____;
 - (3) have good moral character;
 - (4) have undergone a state and federal fingerprint-based criminal background check;
 - (5) have paid the fees specified by the Board; and
 - (6) have been documented by the Pharmacist-in-Charge of the Pharmacy where the applicant is employed as having successfully completed a site-specific training program and having successfully completed an objective assessment mechanism prepared in accordance with any rules established by the Board.
- (b) No Pharmacist whose license has been denied, Revoked, Suspended, or restricted for disciplinary purposes shall be eligible to be registered as a Pharmacy Technician.
- (c) The Board of Pharmacy shall, by rule, establish requirements for registration of Pharmacy Technicians.

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Section 308(b) and 309(b). Comment.

The Board may specifically authorize a pharmacist whose license has been disciplined to register as a Certified Pharmacy Technician or Pharmacy Technician under terms and conditions deemed appropriate. ~~The state may decide to perform a criminal background check on individuals seeking to register as Certified Pharmacy Technicians or Pharmacy Technicians.~~

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Article V

Licensing of Facilities

Section 501. Licensing.

- (a) The following Persons located within this State, and the following Persons located outside this State that provide services to patients within this State, shall be licensed by the Board of Pharmacy and shall annually renew their license with the Board:
- (1) persons engaged in the Practice of Pharmacy;
 - (2) persons engaged in the Manufacture, production, sale, or Distribution or Wholesale Distribution of Drugs or Devices;
 - (3) pharmacies where Drugs or Devices are Dispensed, or Pharmacist Care is provided; and
 - (4) pharmacy Benefits Managers.
- Where operations are conducted at more than one location, each such location shall be licensed by the Board of Pharmacy.
- (b) The Board shall establish by rule, under the powers granted to it under Section 212 and 213 of this Act and as may be required from time to time, under federal law, the Criteria that each Person must meet to qualify for licensure in each classification. The Board shall adopt definitions in addition to those provided in Article I, Section 105, where necessary to carry out the Board's responsibilities. The Board may issue licenses with varying restrictions to such Persons where the Board deems it necessary.

- (c) Each Pharmacy shall have a Pharmacist-in-Charge. Whenever an applicable rule requires or prohibits action by a Pharmacy, responsibility shall be that of the owner and/or pharmacy permit holder and the Pharmacist-in-Charge of the Pharmacy, whether the owner and/or pharmacy permit holder is a sole proprietor, partnership, association, corporation, or otherwise.

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- (f) The Board of Pharmacy may deny or refuse to renew a license if it determines that the granting or renewing of such license would not be in the public interest.

- (g) The Board shall establish the standards that a Person must meet for initial and continued licensure under Article V and shall ~~determine those facilities that~~ require initial inspections and periodic inspections thereafter for purposes of licensure or licensure renewal.

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Section 503. Notifications.

- (a) All licensed Persons shall report to the Board of Pharmacy the occurrence of any of the following:
- (1) permanent closing;
 - (2) change of ownership, management, location, or Pharmacist-in-Charge of a Pharmacy;
 - (3) any theft or loss of Drugs or Devices;
 - (4) any conviction of any employee of any State or Federal Drug laws;
 - (5) any criminal conviction or pleas of guilty or nolo contendere of all licensed or registered personnel
 - (6) disasters, accidents, or any theft, destruction, or loss of records required to be maintained by State or Federal law;
 - (7) occurrences of Significant Adverse Drug Reactions as defined by Rules of the Board;
 - (8) illegal use or disclosure of Protected Health Information; or
 - (9) any and all other matters and occurrences as the Board may require by rule.

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Model Rules for the Practice of Pharmacy

Section 1. Facility.

- (a) To obtain a license for a Pharmacy, an applicant shall:
- (1) have submitted a written application in the form prescribed by the Board of Pharmacy;
 - (2) have attained the age of majority;
 - (3) be of good moral character;
 - (4) have undergone a state and federal fingerprint-based criminal background check;
 - (5) have undergone a Pharmacy inspection by the Board; and
 - (6) have paid the fees specified by the Board of Pharmacy for the issuance of the license.
- (b) Minimum requirements for a Pharmacy:

- (1) Each Pharmacy shall be of sufficient size to allow for the safe and proper storage of Prescription Drugs and for the safe and proper Compounding and/or preparation of Prescription Drug Orders.

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- (8) Security.
 - (i) Each Pharmacist, while on duty, shall be responsible for the security of the Pharmacy, including provisions for effective control against theft or diversion of Drugs and/or Devices.
 - (ii) The Pharmacy shall be secured by either a physical barrier with suitable locks and/or an electronic barrier to detect entry at a time when the Pharmacist is not present. Such barrier shall be approved by the Board of Pharmacy before being put into use. Locks and access codes shall be changed in the event of separation of employment of an employee due to any suspected or confirmed Drug-related reason, including diversion, or other acts involving dishonesty.

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Section 2. Personnel.

- (a) Duties and Responsibilities of the Pharmacist-in-Charge
 - (1) No Person shall operate a Pharmacy without a Pharmacist-in-Charge. The Pharmacist-in-Charge of a Pharmacy shall be designated in the application of the Pharmacy for license, and in each renewal thereof. A Pharmacist may not serve as Pharmacist-in-Charge unless he or she is physically present in the Pharmacy a sufficient amount of time to provide supervision and control. A Pharmacist may not serve as Pharmacist-in-Charge for more than one Pharmacy at any one time except upon obtaining written permission from the Board.
 - (2) The Pharmacist-in-Charge has the following responsibilities:
 - (i) Developing or adopting, implementing, and maintaining:

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- (C) policies and procedures for the procurement, storage, security, and disposition of Drugs and Devices, particularly controlled substances and drugs of concern. Quality assurance programs shall be designed to prevent and detect Drug diversion.

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- (iii) Notifying the Board of Pharmacy immediately of any of the following changes:
 - (A) change of employment or responsibility as the Pharmacist-in-Charge;
 - (B) the separation of employment of any Pharmacist, Pharmacy Intern, Pharmacy Technician, or Certified Pharmacy Technician for any suspected or confirmed Drug-related reason, including but not limited to, Adulteration, abuse, theft, diversion, and shall include in the notice the reason for the termination: if it is the employment of the Pharmacist-in-Charge that is terminated, the owner and/or pharmacy permit holder ~~or other Person in charge of the Pharmacy~~ shall notify the Board of Pharmacy;
 - (C) change of ownership of the Pharmacy;

- (D) change of address of the Pharmacy; or
 - (E) permanent closing of the Pharmacy.
 - (iv) Making or filing any reports required by State or Federal laws and rules.
 - (v) Reporting any theft, suspected theft, diversion, or other Significant Loss of any Prescription Drug within one business day of discovery to the Board of Pharmacy and as required by Drug Enforcement Administration (DEA) or other State or federal agencies for Prescription Drugs and controlled substances.
 - (vi) Responding to the Board of Pharmacy regarding any minor violations brought to his or her attention.
- (5) The Pharmacist-in-Charge of a Pharmacy that ships medications by mail or common carrier shall be responsible for the development and implementation of a policies and procedures to:
- a. properly transfer prescription information to an alternative Pharmacy of the patient's choice in situations where the medication is not Delivered or Deliverable;
 - b. require common carrier to conduct criminal background checks and random drug screens on its employees who have access to prescription medications; and
 - c. track all shipments.

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- (c) If any action of the Pharmacy is deemed to contribute to or cause a violation of any provision of this section, the Board may hold the owner and/or Pharmacy permit holder responsible and/or absolve the Pharmacist-in-Charge from the responsibility of that action.

Section 2(a)(2)(i)(C). Comment

As part of a quality assurance program designed to prevent and detect drug diversion, the Pharmacist-in-Charge is encouraged to ensure polices and procedures are in place that address the following:

- inspection of shipments;
- receipt verification oversight and checking in shipments;
- reconciliation of orders;
- inventory management including:
 - determination of Medications that need to be monitored and controlled beyond existing systems such as controlled substances and drugs of concern; and
 - conducting quarterly reconciliations at a minimum but shall be more frequent up to perpetual, depending on the potential for or incidence of diversion for a particular drug.

The Pharmacist-in-Charge, if the practice setting warrants, may also consider implementing diversion prevention and detection policies and procedures that address the following:

- periodic reviews of employee access to any secure controlled substance storage areas, which may include:

- alarm codes and lock combinations;
- passwords;
- keys and access badges; and
- video surveillance systems.

Section 2(a)(32)(iii). Comment.

If states require the Pharmacist-in-Charge or other Person in charge of the Pharmacy to submit information regarding the separation of employment of licensees, especially in circumstances of suspected or confirmed abuse, theft, or diversion of Drugs, states should also be aware of confidentiality and employment laws that may restrict the release of information and be cautioned that the release of such information may create a liability for the reporting Pharmacy.

In instances where the Pharmacist-in-Charge and the owner and/or pharmacy permit holder are the same person and that person is no longer employed or designated as the Person in charge, then the Board must take action to cease operation of the Pharmacy.

Boards of pharmacy are strongly encouraged to require that pharmacy owners and/or permit holders have policies and procedures in place to conduct initial and random drug screenings of all employees that have access to prescription drugs including controlled substances.

Model Rules for Pharmacy Interns

Section 1. Licensure.

Every individual shall be licensed by the Board of Pharmacy before beginning Pharmacy practice experiences in this State. A license to practice Pharmacy as a Pharmacy Intern shall be granted only to those individuals who:

- (a) are enrolled in a professional degree program of a school or college of pharmacy that has been approved by the Board and satisfactorily progressing toward meeting the requirements for licensure as a Pharmacist; or
- (b) are graduates of an approved professional degree program of a school or college of Pharmacy or are graduates who have established educational equivalency by obtaining a Foreign Pharmacy Graduate Examination Committee™ (FPGEC®) Certificate, who are currently licensed by the Board of Pharmacy for the purpose of obtaining practical experience as a requirement for licensure as a Pharmacist; or
- (c) are qualified applicants awaiting examination for licensure or meeting Board requirements for re-licensure; or
- (d) are participating in a residency or fellowship program; and
- (e) have undergone a state and federal fingerprint-based criminal background check.

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Background:

The task force identified and discussed at length the serious and growing concern of drug diversion in pharmacies. The task force proposed revisions to the *NABP Model Act* to address some of the immediate concerns presently occurring and endangering the public health. Of particular concern is the increased incidence of pharmacy personnel, especially unlicensed or

unregistered staff, having access to prescription medications, including controlled substances, and diverting them through various means to themselves or the public. Members voiced concern that security and inventory control provisions, including the ordering and receiving of controlled substances, lacked specific safeguards to prevent diversion and as such recommended that the pharmacist provide additional oversight as well as requiring the pharmacist to perform certain inventory functions including the reconciliation of orders. Along those lines, members also agreed that criminal background checks should be required for all pharmacy owners and/or pharmacy permit holders, pharmacy staff, including pharmacists, pharmacy technicians, pharmacy interns, and any other staff that has access to prescription medications, including controlled substances as a first approach to prevent against diversion.

Recommendation 2: NABP Should Encourage Boards of Pharmacy to Incorporate Existing Model Act Language Pertaining to the Reporting of Separation of Employment for Suspected or Confirmed Drug-Related Reasons

The task force recommends that NABP encourage the boards of pharmacy to incorporate, if they have yet to do so, existing *Model Act* language pertaining to the reporting of separation of employment of any pharmacist, pharmacy intern, pharmacy technician, or certified pharmacy technician for any suspected or confirmed drug-related reason, including but not limited to, adulteration, abuse, theft, or diversion, and shall include in the notice the reason for the termination.

Background:

The task force expressed the concern that licensees, particularly pharmacy technicians, can easily obtain new employment after being terminated or having resigned from a pharmacy due to a drug-related incident such as suspected or confirmed abuse, theft, or diversion of drugs. Members agreed that this behavior could be prevented and the risk of diversion decreased, if these types of incidences were reported to the boards so that appropriate disciplinary action could be taken to ensure that these individuals would no longer have access to prescription drugs, including controlled substances.

Recommendation 3: NABP Should Recommend that Colleges and Schools of Pharmacy Increase the Emphasis on Ethical and Legal Responsibilities Related to the Position of Pharmacist-in-Charge

The task force recommends that NABP recommend to colleges and schools of pharmacy to increase the emphasis on the ethical and legal responsibilities related to the pharmacist-in-charge (PIC) position during relevant pharmacy law or pharmacy management courses.

Background:

The task force discussed the increased prevalence of newly graduated pharmacists accepting PIC positions and the fact that many were being called in before the boards for reasons indicating a lack of knowledge and awareness about the duties and responsibilities of being a PIC. Members decided that providing this information to pharmacy students in the pharmacy law or pharmacy management class would better prepare pharmacists to capably assume PIC positions or at the very least impress on students that being a PIC is a major responsibility and perhaps gaining some experience before undertaking such a role is prudent.

Recommendation 4: NABP Should Encourage Boards of Pharmacy to Require Continuing Education for Pharmacists-in-Charge Pertaining to Legal Responsibilities of this Position

The task force recommends that NABP encourage state boards of pharmacy to require PICs to complete at least three hours of continuing education every renewal period detailing the additional legal duties and responsibilities of the PIC position.

Background:

The task force noted that all PICs assume a legal responsibility to manage the pharmacy and practice in a safe and secure manner. As previously mentioned the task force noted that many PICs are newly graduated and licensed and assume the legal responsibilities of this position without being adequately prepared or having an understanding of what is at stake. The task force recommended that NABP encourage boards of pharmacy to require continuing education programs for PICs addressing their legal responsibilities, including diversion prevention, and suggest that they be no less than a total of three hours in duration per renewal period.

Recommendation 5: NABP Should Encourage Pharmacy Associations and Employers to Develop Educational and Training Programs Focusing on the Ethical and Legal Responsibilities of the Pharmacist-in-Charge

The task force recommends that NABP encourage pharmacy associations and employers to develop educational and training programs that focus on the ethical and legal responsibilities of the PIC.

Background:

The task force again expressed concern over the lack of education and training for PICs and determined that a multi-faceted approach would best suit this necessity. Members also discussed the ethical dilemmas that many PICs face and the need for this issue to be addressed appears to be more important in today's society. Members agreed that training on ethical and legal responsibilities should begin in pharmacy school and continue throughout a pharmacist's career.

Recommendation 6: NABP Should Strongly Encourage Pharmacy Employers to Conduct Initial and Random Drug Screening on All Employees Who Have Access to Prescription Drugs and to Require Common Carriers Utilized by the Pharmacy to Deliver Patient Prescriptions to Conduct Such Drug Screenings on their Employees

The task force recommends that NABP strongly encourage pharmacy employers to conduct initial and random drug screens on all employees who have access to prescription drugs and to require any common carriers utilized by the pharmacy to deliver prescriptions to their patients to conduct initial and random drug screens on their employees.

Background:

The task force emphasized the important role that initial and random drug screens play in the deterrence of employee theft and diversion and agreed that both boards of pharmacy and employers should require them. Members discussed various methods of conducting drug screens, such as an employer requiring employees to provide urine samples during their shift so as to

prevent any tampering, and determined that drug screening was an extremely powerful and effective tool in discovering and preventing diversion.

Recommendation 7: NABP Should Develop Resources and Programs to Assist Boards of Pharmacy in Educating and Assisting Pharmacists and PICs Regarding their Legal Responsibilities to Maintain Security and Prevent Drug Diversion

The task force recommends that NABP develop resources and programs that will assist boards of pharmacy in educating and assisting pharmacists, particularly PICs, to understand their legal responsibilities and how to properly execute them in order to maintain pharmacy security and prevent employee theft and drug diversion.

Background:

The task force conveyed many anecdotal accounts of “victims” of diversions in which the PIC had absolutely no idea that inventory was being compromised and controlled substances were being diverted, sometimes by the supposedly least likely person. Members agreed that providing a “tool box” of strategies for boards to assist pharmacists and PICs in preventing diversion was a good proactive approach. Such tools for boards could include continuing education or continuing professional development programs or an assessment tool for determining PIC competence (which could be administered “open book” if so desired by the board). Such tools for pharmacists and PICs could include model policies and procedures, recommendations regarding employee access to paper and electronic records, recommendations regarding physical access to prescription drugs, information on how to determine which drugs should be reconciled by perpetual inventory and how to implement such, how to conduct an audit, utilizing in and out reporting, implementing individualized ordering, staff warning signs, and real life case studies that PICs can utilize as teaching aids.

Recommendation 8: NABP Should Request Harmonization of Qualifications for Entry into Colleges and Schools of Pharmacy and Pharmacy Technician Education Programs

The task force recommends that NABP work with the American Association of Colleges of Pharmacy (AACCP), the Accreditation Council for Pharmacy Education, and other interested stakeholders to harmonize the entry qualifications for colleges and schools of pharmacy and pharmacy technician education programs so as to prohibit the admission of those individuals who would never qualify for licensure.

Background:

The task force noted the ongoing and increasing problem of the admission of individuals into pharmacy schools and colleges as well as pharmacy technician education programs absent a background check and other inquiries that would identify reasons that would prohibit an individual from being granted licensure/registration. Members discussed instances in which upon an individual’s application for a pharmacy intern license, a past offense that would bar that individual from ever being granted a pharmacist license is discovered. Members also discussed the bevy of pharmacy technician schools that entice individuals to complete their programs without ever explaining to them that certain convictions or arrests will make it impossible for them to ever become licensed or registered. It was suggested that perhaps educational programs

should utilize the same background questions as the boards of pharmacy on their applications for admission to ensure consistency in the information received.

Recommendation 9: NABP Should Encourage the NABP/AACP District Meeting Chairs to Include the Topics of Drug Diversion and Prescription Drug Abuse in the Programming for Joint Sessions with the Boards and Colleges and Schools of Pharmacy

The task force recommends that NABP encourage the district meeting chairs to include in the programming the topics of drug diversion and prescription drug abuse for the boards and colleges and schools of pharmacy joint sessions and consider inviting a representative from the US Drug Enforcement Administration to speak on this topic.

Background:

Members again stressed the importance of education and agreed that it should be a multi-faceted approach, whereby boards and colleges and schools of pharmacy should coordinate their efforts to emphasize the importance of being aware of the incidence of drug diversion and how to prevent it.

Recommendation 10: NABP Should Issue a Statement of Concern Regarding Drug Diversion and Prescription Drug Abuse that Incorporates the AWARD_XE Program

The task force recommends that NABP issue a public statement denoting the problem and the immediate need to address and encourage other stakeholders to take a proactive role in combating drug diversion and prescription drug abuse that incorporates the AWARD_XE program.

Background:

The task force strongly agreed that the pervasiveness of drug diversion and prescription drug abuse are significant concerns and endanger the public health. Prescription drug abuse is the primary source of death in 17 states as indicated by statistics overshadowing automobile accidents and gunshot incidents. NABP staff provided information on the AWARD_XE program and its various tools for boards of pharmacy, pharmacists, and patients alike to assist them in becoming aware of drug abuse and what they can do to prevent its incidence. Members adamantly concurred that this serious issue is epidemic in nature and recommended that NABP take swift and decisive steps to curb this trend.