



# OKLAHOMA State Board of Pharmacy

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## Improving Medication Safety in Community Pharmacy: Assessing Risk and Opportunities For Change [OSBP CE Approval #20120928-OK-0063]

### CE Credit Instructions (3.0 hrs):

1. Read the complete document of the ISMP® *Improving Medication Safety in Community Pharmacy: Assessing Risk and Opportunities for Change*. <https://www.ismp.org/resources/improving-medication-safety-community-pharmacy-assessing-risk-and-opportunities-change>
2. Complete the questions below.
3. Mail, fax, or email this test to the Oklahoma State Board of Pharmacy. [Note: Please make sure you provide your correct email address]
4. A graded copy of this test will be emailed back to you in PDF format as verification of your completed CE.
5. Print and keep your CE approval document for 2 years.

### Please print legibly:

Name \_\_\_\_\_ OK DPh License Number \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Email address: \_\_\_\_\_

[OSBP stamp and date received must appear for 3 hours of CE credit.]

### Assessment questions—Circle the answer

#### 1. True or False

When verifying the patient at the pick up window, read them the address or date of birth from the receipt on the bag and ask them to confirm the information.

#### 2. When storing medications that have been involved in errors because of look-alike names or packages:

- a) store both, alphabetically, on fast mover section so they can be seen better
- b) store alphabetically and apply shelf label warnings indicating that they look alike
- c) do not store them alphabetically; store them directly next to each other so both will be equally considered when picking item off shelf
- d) store alphabetically but store one as generic name and store the other under the brand name

#### 3. True or false

Telling patients about medications that can be confused with one another due to similar sounding names is not necessary and only results in scaring them.

#### 4. True or False

Providing education and information specific to staff involved in a medication error is considered to be a powerful error reduction strategy.

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**For questions 5-10 Circle the BEST answer:**

- 5. Implementing a system which integrates the pharmacy computer system with the cash register system and thereby prevents the clerk from "ringing up" the prescription unless documentation of pharmacist final verification has occurred is considered to be which type of error reduction strategy?**
  - a) Fail-safes and constraints
  - b) Forcing functions
  - c) Automation and computerization
  - d) Standardization
  
- 6. Implementing a pharmacy computer system which prevents overriding selected high-alert messages without the user first documenting a notation is considered to be which type of error reduction strategy?**
  - a) Fail-safes and constraints
  - b) Forcing functions
  - c) Automation and computerization
  - d) Standardization
  
- 7. Including the use of both brand and generic names in the drug data selection screen and on patient labels and patient information sheets is considered to be which type of error reduction strategy?**
  - a) Education and information
  - b) Rules and policies
  - c) Reminders and checklists
  - d) Redundancy
  
- 8. Creating a specifically formatted prescription blank to capture pertinent information for receiving telephoned medication orders is considered to be which type of error reduction strategy?**
  - a) Fail-safes and constraints
  - b) Forcing functions
  - c) Automation and computerization
  - d) Standardization
  
- 9. After an error has occurred asking the staff to read and review prescription verification policies and procedures is considered to be which type of error reduction strategy?**
  - a) Education and information
  - b) Rules and policies
  - c) Reminders and checklists
  - d) Redundancy
  
- 10. Utilization of robotic dispensing devices is considered to be which type of error reduction strategy?**
  - a) Fail-safes and constraints
  - b) Forcing functions
  - c) Automation and computerization
  - d) Standardization