NEW BUSINESS

(To be submitted and introduced by Delegates only)

Introduced by: ________________________ Board of Trustees ____________
(Name)

___March 20, 2020___ _____________________
(Date) (Annual Meeting Contact Number)

Board of Trustees ____________
(Organization)

Subject: Inappropriate and Unethical Prescribing / Ordering of Medications and Medical Supplies for Own Use

Motion:
1. In the face of a declared emergency situation, APhA condemns the inappropriate or unethical anticipatory ordering and prescribing of medications and medical supplies by healthcare professionals for personal use or use by colleagues, family members and patients, and encourages regulatory bodies to adopt and enforce regulations and guidance against this activity and the exacerbation of product shortages.

2. APhA supports pharmacists practice autonomy and utilization of their professional judgement in the stewardship of pharmaceuticals and medical supplies.

Background:
As soon as the media and government reported shortages of medical supplies and the testing of medication treatments for coronavirus, such as hydroxychloroquine, physicians and other healthcare professionals began prescribing or ordering large quantities of these items for personal use or use by colleagues and family members, further exacerbating the supply of these items. Many of these requests were to stockpile these products in anticipation of a need, not to address a current issue. This activity could hamper access of these medications and supplies to patients who need them for continuity of care. This proposed policy is not directed at healthcare practitioners obtaining reasonable amounts to ensure availability if they develop a need, but what we are seeing is activity that one could equate to as “insider trading.” Reports from pharmacists has dramatically increased regarding tensions between pharmacists and prescribers in these situations.

Current APhA Policy & Bylaws:

Drug Supply Shortages and Patient Care
2012
1. APhA supports the immediate reporting by manufacturers to the U.S. Food and Drug Administration (FDA) of disruptions that may impact the market supply of medically necessary drug products to prevent, mitigate, or resolve drug shortage issues and supports the authority for FDA to impose penalties for failing to report.

2. APhA supports revising current laws and regulations that restrict the FDA’s ability to provide timely communication to pharmacists, other health care providers, health systems, and professional associations regarding potential or real drug shortages.

3. APhA encourages the FDA, the Drug Enforcement Administration (DEA), and other stakeholders to collaborate in order to minimize barriers (e.g., aggregate production quotas, annual assessment of needs, unapproved drug initiatives) that contribute to or exacerbate drug shortages.

4. APhA should actively support legislation to hasten the development of an efficient regulatory process to approve therapeutically equivalent generic versions of biologic drug products.

5. APhA encourages pharmacists and other health care providers to assist in maintaining continuity of care during drug shortage situations by: (a) creating a practice site drug shortage plan as well as policies and procedures, (b) using reputable drug shortage management and information resources in decision making, (c) communicating with patients and coordinating with other health care providers, (d) avoiding excessive ordering and stockpiling of drugs, (e) acquiring drugs from reputable distributors, and (f) heightening their awareness of the potential for counterfeit or adulterated drugs entering the drug distribution system.

6. APhA encourages accrediting and regulatory agencies and the pharmaceutical science and manufacturing communities to evaluate policies/procedures related to the establishment and use of drug expiration dates and any impact those policies/procedures may have on drug shortages.

7. APhA encourages the active investigation and appropriate prosecution of entities that engage in price gouging and profiteering of medically necessary drug products in response to drug shortages.

(JAPhA NS52(4) 457 July/August 2012)(Reviewed 2017)

**Phone numbers will only be used by the New Business Review Committee in case there are questions for the delegate who submitted the New Business Item Content.**

New Business Items are due to the Speaker of the House by **February 19, 2020** (30 days prior to the start of the first House session). Consideration of urgent items can be presented with a suspension of the House Rules at the session where New Business will be acted upon. Please submit New Business Items to the Speaker of the House via email at hod@aphanet.org.