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Royal
Pharmaceutical
Society
of Great Britain

Society consults on a code of ethics for pharmacy technicians

As part of a programme of work to enable the Royal Pharmaceutical Society to register pharmacy technicians, the Society and the Association of Pharmacy Technicians UK have started consultation on a proposed code of ethics for technicians.

The Society says that if it registers pharmacy technicians it will need a set of standards that registrants will be expected to meet. The Society's Law and Ethics Committee looked at the possibility of adjusting the Code of Ethics for pharmacists to accommodate technicians as well as well as pharmacists, but agreed that it was more appropriate to develop a separate code. The committee set up a small working party to carry out the detailed drafting, including

members of the Society's Council and two representatives of the technicians' association.

The proposed code, which largely mirrors the pharmacists' code, is set out in a four-page pull-out in the centre of this issue of *The Journal*, along with an introductory explanation and a questionnaire form. Copies of the document will be made available to download from the Society's website (www.rpsgb.org.uk) and a version is also being published by the technicians' association. The closing date for comments is 7 May.

Any queries about the draft code should be directed to David Pruce, Director of Practice and Quality Improvement, at the Society's headquarters (tel 020 7572 2358; e-mail david.pruce@rpsgb.org).

This week

- **Code of ethics for technicians**
The Society and the Association of Pharmacy Technicians UK have started consultation on a proposed code of ethics for technicians (p165).
- **Clinical governance guide**
A Welsh version of Society guidance for clinical governance facilitators has been launched (p165).
- **Science and the public**
An optimistic forecast about the public's understanding of science was given to invited guests at a science reception held at the Society's headquarters (p166).
- **Council election**
The Society is calling for nominations of pharmacists to serve as members of Council for the next three years (p166).

Launch of guidance for clinical governance facilitators in Wales

A Welsh version of Royal Pharmaceutical Society guidance for clinical governance facilitators was launched at a reception hosted by the Society's Welsh Executive on 27 January in Brecon.

Entitled "Beyond the baseline: the role of clinical facilitators working with community pharmacists in Wales", the guidance is based on a report published in July 2003 with an emphasis on the situation in England. The new version is tailored to the Welsh context.

As well as offering support and guidance for clinical governance facilitators, the document the recently developed clinical governance maturity matrix for community pharmacy, which will be supported by an all-Wales database.

Copies of the report, which was written by the Society's clinical governance pharmacist, Catherine Dewsbury, can be downloaded from the Welsh Executive website (www.rpsgb.org/wales).

Guests at the Brecon reception included representatives from Powys Local Health Board, Merthyr LHB, the NHS Wales Business Services Centre and local NHS trusts. Also present were members of the Society's Powys and Mid-Glamorgan branches, which co-hosted the event.

Welsh Executive chairman Andrea Robinson said that the reception provided an



Andrea Robinson (left) and executive member Mair Davies (centre), with Powys LHB representatives Dr Gillian Todd, Jennifer Griffiths and Councillor Rosemarie Harris

excellent opportunity to highlight key areas where the Society can support trusts and LHBs to meet their objectives.

She added: "Trusts and LHBs are currently being invited to submit candidates for the supplementary training programme in Wales. We have been describing some of the service

delivery models that can be developed using pharmacists as supplementary prescribers."

Powys branch chairman Alan Screen, who is the pharmacist member of Powys LHB, said: "This event shows how effective we can be when we join forces to network with local politicians and decision-makers."

Science reception hears of optimism over improving public understanding of science

An optimistic forecast about the public's understanding of science was given to invited guests from the worlds of pharmacy, science and industry at a reception held in the Royal Pharmaceutical Society's headquarters on 2 February.

The message came from Tracey Brown, director of Sense About Science, a trust that aims to advance an evidence-based approach to controversial scientific issues such as biotechnology, genetics, hormones, vaccines and animal testing. Sense About Science is funded through donations from professional and learned societies, companies, trusts, research bodies and individuals.

Ms Brown said that when Sense About Science was established in 2002, she was confronted by pessimism and despair over the difficulty in communicating science to the public. "Now we have more cause to be optimistic," she said. "Many people are involved in communicating science [including pharmacists] and if you give them the tools they will do it well."

"Scientists can also learn lessons from observing what happens to scientists from different disciplines when they are involved in public debate. The scientific community can be mutually supporting."

The 80 people who attended the reception included representatives from academic institutions, government and funding bodies,



Speakers at the reception: left to right, Dr Gill Hawksworth, Tracey Brown and Dr Nicola Gray

the pharmaceutical industry and professional and scientific organisations. The guests were welcomed by the Society's President, Dr Gill Hawksworth, and also addressed by Dr Nicola Gray, chairman of the Society's Science Committee and a member of the voluntary advisory council that supports Sense About Science's board of trustees.

Dr Gray said: "The engagement of scientists and the public in honest debate about difficult issues is crucial — we should be partners, not adversaries. Pharmacists are frontline scientists who advise the public about medicines — cutting-edge science in the home, and not without controversy. We welcome the opportunity to work with Sense About Science to promote partnership through serious and thoughtful debate on science issues of the day."

The reception was jointly hosted by the Society and Sense About Science.

Inspectors' preregistration talks: final dates fixed

The final two dates have now been fixed for this year's presentations for preregistration trainees by the Royal Pharmaceutical Society's professional standards inspectors (*PJ*, 6 December 2003, p797).

The Blackburn talk, by Stan Brandwood, will be on Wednesday 24 March, from 9.45am to 12.45pm, at the Learning Centre, Queens Park Hospital, Haslingden Road.

The Cardiff presentation, by Akhtar Malik, will be on Monday 5 April, from 2 to 5pm, in Room E44, Fourth Floor, Aberconway Building, Cardiff University Complex, Colum Drive, Colum Road, Cardiff.

Booking is not necessary and there is no charge for attendance, but any travel costs will have to be met by the trainee or employer.

The Blackburn venue can be reached from the M65 at Junction 5 (Shadsworth/Haslingden) by taking the A6177 towards Blackburn and turning right into the hospital entrance at the fourth roundabout. For those without their own transport, bus service 33 runs to the hospital from Blackburn Interchange (rail and bus interchange).

The Cardiff venue is just north of the city centre. For those arriving by public transport, frequent local trains run from Cardiff Central station to Cathays station on the university campus. Alternatively, bus service 27 leaves for the university every 10 minutes from the bus station next to Cardiff Central (bus stand D3). Parking in university car parks is open only to disabled visitors, but there are public car parks nearby. A campus map, which shows car parks, can be downloaded from the university's website (www.cf.ac.uk).

Details of the other presentations across Britain were sent to preregistration trainees and tutors with the Society's December 2003 preregistration bulletin. An updated version of the information included with that mailing can be downloaded from the preregistration training page of the Society's website.

Any queries about the presentations should be addressed to the individual inspectors, who can be contacted in writing through the Fitness to Practise and Legal Affairs Directorate.

Nominations sought for election to Council

The Royal Pharmaceutical Society is calling for nominations of pharmacists to serve as members of Council (p168). The closing date for nominations is March 18.

The 21 pharmacists on the Council serve three-year terms of office, with seven retiring each year in May. This year sees the retirement of Andy Burr, Sid Dajani, Marshall Davies, Wally Dove, Sally Greensmith, Helen Howe and Ashwin Tanna. Each is eligible for re-election. Their attendance records at Council meetings during the past two years are published this week (p168).

We reproduce this week the Council's policy on Council elections (p168). As a general principle, the Council considers that the election should be conducted so as to give all candidates an equal opportunity of presenting their views. The Council has set out criteria which it believes will prevent any candidate

having an advantage over his colleagues by virtue of his financial resources or other special influence.

The policy document says that sending out statements of policy with the voting papers allows candidates the maximum freedom of expression and is the only practical method of presenting candidates' unedited views to the membership. The Council objects to candidates seeking votes through canvassing or letters to pharmaceutical journals. It does not object to branch or regional newsletters publishing the views of candidates on any topic, provided that all candidates are given an equal opportunity to participate. Similarly, the Council does not object to branches or regions arranging meetings at which candidates express their views, provided that those candidates who cannot attend may have a statement read to the meeting.

Welsh support for new Charter

The Welsh Executive of the Royal Pharmaceutical Society has issued a statement emphasising its support for the Council's petition for a new Charter, which it says will enable the Society to continue to foster and further the development of the profession of pharmacy for the benefit of pharmacists and the public. The executive's declaration follows its meeting in Brecon on 29 January.

News in brief

Error in dispensing morphine tablets leads to Statutory Committee reprimand for pharmacist

The Statutory Committee has reprimanded a pharmacist who dispensed a wrong strength of morphine sulphate tablets, with the result that the patient required medical attention.

At its meeting on 8 May 2003, the committee inquired into the case of Narendra Patel, of 5 Jarvis Park, Sutton Coldfield, West Midlands. Mr Patel is the superintendent of N. D. Chemists Ltd and was the regular pharmacist in charge at one of its pharmacies, at 374–376 College Road, Birmingham.

The Council of the Royal Pharmaceutical Society had made a complaint alleging that on 8 July 2002 Mr Patel had wrongly supplied MST Continus 30mg tablets instead of 10mg tablets. He had failed to admit the error when the patient's daughter had inquired and had failed to recommend that the patient should seek medical advice. It was further alleged that he had failed to contact the patient's doctor despite knowing that the patient had taken some of the higher strength tablets. In addition, he had put back into stock, and subsequently redispensed, the returned MST tablets.

Geoff Hudson, of Penningtons (solicitors) appeared before the committee to present the facts of the case. Philip Grey, of counsel, instructed by Axis Solicitors, represented Mr Patel, who attended the inquiry.

The committee heard that on 29 June 2002 a locum pharmacist had dispensed a prescrip-

tion for 100 MST Continus 10mg tablets at the College Road pharmacy. Forty 10mg tablets were supplied and an owing slip provided for the balance of 60.

On 8 July, when Mr Patel was the pharmacist in charge, he erroneously dispensed 60 tablets of 30mg strength. He realised his error the following morning and sent a driver to collect the tablets and substitute 10mg tablets. When the driver returned, Mr Patel noticed that eight 30mg tablets were missing from the 60 dispensed. He asked the driver if the patient had been all right and was told she had.

At no stage did Mr Patel telephone the patient or attempt to contact the prescriber. When the patient's daughter telephoned to ask whether the wrong tablets had been dispensed, he had not admitted the error but told her it had simply been a "wrong box" and there was nothing to worry about. The daughter nevertheless contacted the patient's doctor, who visited his patient and had her admitted to hospital for observation.

Subsequently, Mr Patel had admitted his error to the police chemist inspection officer and received an informal caution. Interviewed by one of the Society's inspectors on 4 September 2002, he said he had panicked and had not handled the situation correctly.

Giving the committee's decision, the chairman (Lord Fraser of Carmyllie, QC) said the

Society's complaint related to a single, but serious dispensing error. It was not clear exactly how many tablets the patient had taken, but she had clearly taken more than intended. After the beneficial effect of a good night's sleep, the next day she was "spaced out", in the words of her daughter, later becoming nauseous and breathing slowly. As a result, the patient received an injection from her doctor and was sent for observation to a hospital.

Although Mr Patel had assumed, or ought to have assumed, that she had taken all eight of the missing 30mg strength tablets — ie, 240mg of tablets in 24 hours instead of the prescribed 40mg in 24 hours — he had taken no steps to secure medical advice for her and, worse still, he had lied to her daughter when she had queried the supply.

"His conduct may have been prompted by panic", said the chairman, "but, as I think he recognised himself, that is quite unacceptable conduct in pharmacists". The committee found the Council's allegations established.

In Mr Patel's favour, Lord Fraser continued, he had been completely open about the matter both with the police and the Society's inspector. He had good references. And at the time he had been affected by unfortunate personal circumstances; although that was not an excuse, it had resulted in a loss of confidence.

The committee reprimanded Mr Patel.

Pharmacist dispensed wart ointment instead of nasal cream

The Statutory Committee has adjourned its decision in a case in which a London pharmacist dispensed an ointment for removing warts on a prescription calling for a nasal cream

At its meeting on 6 May 2003 the committee inquired into the case of Obiajulu Ejiofor, of 20 Chestnut Grove, West Norwood, London. A complaint had been received from the Council of the Royal Pharmaceutical Society alleging that Mrs Ejiofor had supplied Posalfilin ointment against a prescription ordering Naseptin cream and had failed to contact the prescriber when alerted to the error. It was also alleged that she had failed to respond to a letter of complaint from the patient.

The facts of the case were presented by Geoff Hudson, of Penningtons (solicitors).

David Aaronberg, of counsel, instructed by Turner & Debenhams (solicitors) represented Mrs Ejiofor, who was present at the hearing.

The committee heard that on 10 April 2002, Mrs Ejiofor had been the proprietor and pharmacist in charge of a pharmacy known as Specky-Tin at 52 Vassall Road, London SW9. On that day, a patient had presented a prescription for Naseptin cream 15g. Mrs Ejiofor had dispensed Posalfilin ointment and labelled

it as if it were Naseptin. She gave it to an assistant to hand to the patient, who was given no advice or information. Posalfilin was a treatment for plantar warts and not suitable for application to the face.

The patient began to use the ointment on the same day and continued for the next five days. As a result, her nose became burned, inflamed and swollen. On 16 April she realised she had not been given Naseptin and returned to the pharmacy. She showed the tube of Posalfilin to Mrs Ejiofor, who took it from her and exchanged it for Naseptin, having peeled off the label from the Posalfilin and applied it to the Naseptin. She advised using cotton wool and water to clean out the nose. The patient said that the medication had also given her a sore throat; Mrs Ejiofor had given her a bottle of Oraldene for that. She had not contacted the prescriber but advised the patient to see the doctor as soon as possible. The patient had written to Mrs Ejiofor on 18 April seeking an apology, but had not received a reply.

Giving the committee's decision, the chairman (Lord Fraser of Carmyllie, QC) said that Mrs Ejiofor had made and admitted a serious dispensing error that could have had severe

consequences. The consequences that had occurred had been, to say the least, unpleasant and painful.

The committee was concerned that the patient's letter should have been received at the pharmacy but not read until the patient came in a week later, angry at the lack of a response.

Lord Fraser said that the misconduct established was such as to render Mrs Ejiofor unfit to be on the register. Had she still owned the pharmacy and wished to continue to work there, the committee would have had serious doubts about allowing her to remain on the register. However, she had sold the premises and was now employed as a locum.

The committee had decided to adjourn the case for a year. At the resumed hearing, references would be required from Mrs Ejiofor's employers during that time. If they were satisfactory and there had been no further dispensing errors or other problems, the likely outcome of the case would be a reprimand. But, warned Lord Fraser, that should not be considered the inevitable outcome. If there were further problems, the only safe course would be to require the removal of Mrs Ejiofor's name from the register.

OFFICIAL NOTICES

Communications to the Royal Pharmaceutical Society should be addressed, unless otherwise stated, to: The Secretary and Registrar, Royal Pharmaceutical Society of Great Britain, 1 Lambeth High Street, London SE1 7JN (tel 020 7735 9141; fax 020 7735 7629). Official Notices also appear in the Notice-Board section of PJ Online (www.pjonline.com/notices).

Council election 2004

Nominations for election as members of Council should be received by the Secretary and Registrar of the Society on or before 18 March 2004. Each nomination in the Council election must be signed by at least 10 members of the Society, of whom at least five must be from the branch of the member nominated.

Nominees who are accepting nomination to the Council are asked to enclose with the nomination form their biographical details, photograph and financial declaration, as indicated on the back of the nomination form.

Nomination forms are available from the Secretary and Registrar or from the "About the Society" section of the Society's website (www.rpsgb.org/society). Nominations can also be made by letter.

Ann Lewis

Secretary and Registrar

Retiring members of Council

The following members of the Royal Pharmaceutical Society's Council are due to retire in May: Andrew Burr, Sultan Dajani, Marshall Davies, Wally Dove, Sally Greensmith, Helen Howe and Ashwin Tanna.

The Council has decided that information should be published concerning attendance by retiring members of Council at regular meetings of the Council in the previous two calendar years. The following information covers the years 2002 and 2003. There were six regular meetings of the Council in each year and therefore 12 possible attendances for each member of Council during the two years. Attendance figures for the retiring members were as follows: Mr Burr, 12; Mr Dajani, 11; Mr Davies, 12; Mr Dove, 12; Mrs Greensmith, 10; Mrs Howe, 10; Mr Tanna, 11;

Council election procedures

The Council has decided that its policy in relation to Council elections should be published each year to enable the membership, in particular candidates in the election, to be fully aware of the Council's current views on the matter. The procedure has

been revised in the light of the motion carried at the annual general meeting in 1994 which encouraged the Council to develop a protocol which would allow what was described as "limited canvassing" and to organise a hustings event.

As a general principle, the Council remains convinced that the membership is best served when each aspect of the election is conducted in a manner that, so far as possible, gives candidates an equal opportunity of presenting their views to the membership.

The following criteria will, in the Council's view, prevent any member having an advantage over colleagues by virtue of financial resources or any other special influence. They represent a relaxation of previous rules and are designed: (a) to encourage more members to vote in the Council election; and (b) to ensure that those members who do vote are as well informed about the candidates as possible.

Canvassing Candidates are expected to refrain from any personal canvassing or from requesting or giving permission for canvassing to be done on their behalf, including on-line canvassing by use of e-mail or internet discussion groups. Candidates who become aware that any person, group or organisation intends to canvass on their behalf will be expected to make every effort to dissuade those concerned from doing so.

These provisions apply from the date that an individual knows he or she is to be a candidate.

Biographical details Biographical details, which are published in *The Pharmaceutical Journal*, are standardised under the following headings: (a) name and town; (b) age; (c) year of registration; (d) academic qualifications; (e) civil honours; (f) professional awards; (g) current positions held; (h) previous positions held (with dates). Both (g) and (h) are subdivided as follows: (i) occupation (branch of pharmacy and position held); (ii) public service positions; (iii) positions held as an officer or member of the governing body or committee of a pharmaceutical organisation, including the local branch of the Society; (iv) positions held as an officer or member of the governing body or committee of any organisation associated with health services, science or pharmaceutical education. Candidates, if they wish, may make further reference to their history or experience in their statements of policy.

Candidates are also asked to declare positions or companies from which they benefit financially. Candidates may decline to give this

information but if so that must be made clear to the electorate. The declaration should be under the following headings: (a) remunerated directorships of companies, public or private; (b) remunerated employments, offices, trades, professions or vocations; (c) the names of companies or other bodies in which the candidate has to his or her knowledge, either alone or with or on behalf of a spouse or infant children, a beneficial interest in shareholdings of a nominal value greater than one-hundredth of the issued share capital.

The above information, with the statement of policy (see item 4), should not exceed 630 words in total.

Residential requirement

Candidates in the election must be members of the Society who are normally resident in Britain, the Isle of Man or the Channel Islands.

Statements of policy Candidates' statements of policy will continue to be sent direct to each member of the Society with the voting papers, thereby allowing candidates the maximum freedom of expression. The Council considers that this is the only practical method of presenting to the membership the unedited views of each candidate.

Contributions to the pharmacy press

The editor of *The Pharmaceutical Journal* will continue the policy of not accepting letters from candidates for inclusion in the issue in which the nominations are published and thereafter until the date of the election. Candidates will be asked to observe the spirit of this policy by not sending letters to other pharmacy journals for issues that will be published after the end of March.

The Council accepts, however, that it is frustrating to candidates if they cannot comment on questions of interest to the profession, which have arisen since a statement of policy was prepared. To overcome this problem and so assist members to make the most informed decision possible when voting, the Council has agreed that the editors of *The Journal* and other pharmacy publications will be invited to pose up to three questions to each candidate standing for the Council election. The questions will be topical and the candidates' replies will be published in the respective journals. The timing of publication will, with advantage, be as close as possible to the mailing of the voting papers and obviously will be after the nominations for election have been published in *The Journal*. Questions asked will be at the discretion of individual editors and each response will be restricted in length to ensure fairness. Candidates will be given a

deadline by which to respond and the editors will naturally reserve the right to edit the responses, normally in consultation with the candidate.

"House" and member

organisation magazines It is recognised that candidates might wish to make an announcement regarding their intention to run for the Council election in the official magazine of any organisations of which they are a member or employee. There will be no objection to the publication of news announcements in "house" magazines, member organisation magazines and newsletters published by member organisations or the Society's membership groups, provided the following conditions are observed: (a) the announcement is of a factual nature, and supplies no more details than candidate's name, place of residence, age and current connection with the organisation concerned; (b) the announcement is published free of charge; (c) if there is more than one candidate making an announcement, each candidate is given the same amount of space in the magazine; (d) if a photograph is to be published with the announcement it is a recent one of modest size; (e) candidates undertake to bring to the attention of the editor of any "house" or member organisation magazine or newsletter that might be interested in his or her candidature, the section of the procedure relating to these publications and ask that there be no contravention of the policy in respect of his or her candidature.

A letter, accompanied by the procedure document, will be sent by the office, on the day candidates are announced, to editors of "house" and member organisation magazines and newsletters, seeking an assurance of compliance with the policy.

It will be possible for announcements of this nature to be published at any time leading up to an election following official announcement of the candidates. There will also be no objection to magazines of this kind undertaking a similar exercise as that described for *The Pharmaceutical Journal* and other pharmaceutical publications. The editors may therefore pose up to three questions to all candidates standing for the Council election, following the same procedures and subject to the same conditions.

Branch and regional newsletters

Similarly, there is no objection to branch and regional newsletters publishing the views of candidates on any particular topic, provided certain criteria are observed. All candidates in the election should be given an equal opportunity to participate up to a stated maximum

number of words, and the views expressed by candidates should be printed without editorial comment or amendment, except in the latter case where publication might lead to libel action. It would not be equitable if a branch or regional committee newsletter asked for support for one or more candidates, particularly for geographical reasons.

Adherence of candidates to the rules As previously stated, the rules are intended to ensure that each candidate has an equal opportunity of presenting policies to the electorate. Adherence to these rules is a matter of accepting this policy and abiding by the rules as a matter of personal integrity. In the past there have been complaints that some candidates have not adhered to the spirit of the rules.

Candidates standing for the Council election will be required to sign a declaration confirming: (a) their agreement to abide by the Council election procedures and (b) that they will do everything possible to ensure that others do not, on their behalf, act in conflict with the rules.

The material sent to candidates and the declaration mentioned above will clearly state the period during which the protocols for this procedure will be in force which will normally be from the end of March until the date of the election.

Any candidate who appears to breach the signed declaration will be required to give an explanation to the President and the Council as to why they allowed a breach of the protocol to occur. This will apply to

a candidate whether or not elected to the Council.

Hustings The Council has given careful consideration to the proposal that the Society should organise a hustings event. Poor attendance at past meetings was taken into account and the fact that the election procedure allows branches and regions to organise hustings events. The Council accepts that such meetings give a limited number of members an opportunity to hear the candidates' views in person and to ask them questions, but considers that it is extremely difficult to arrange and conduct a centrally organised event which would be fair to all candidates and would therefore not be a cost-effective use of the Society's resources.

For these reasons the Council has decided that the Society centrally should not organise a hustings event.

The Council will not, however, object to outside organisations as well as regions or branches arranging events of this kind if they so wish provided all candidates are given an equal opportunity to present their views. There will be no restriction on the reporting of hustings events by the pharmaceutical press. Travelling distances may make it difficult for all candidates to attend such meetings. The Council considers that if a candidate cannot attend, he or she should have an opportunity of submitting a statement, equal in length to the opening statements of candidates who are able to attend, to be read by the chairman or some other appropriate person.

'Medicines, ethics and practice': February list of amendments

In the first issue of each month, *The Journal* updates the guidance on the legal status of medicines published in the 27th edition (July 2003) of 'Medicines, ethics and practice: A guide for pharmacists'.

The amendments are given in bold type when added to the list and repeated each month in light type. A product's legal status can be obtained by consulting first the latest amendment list and then the guide. The abbreviations used in the list are explained in the key to

annotations in the body of the guide (p29 and p75).

Users of the guide should note that changes to the reclassification procedure for medicines mean that the legal status of a product now becomes part of its marketing authorisation rather than being determined by the active substance listed in secondary legislation. Because a change of legal status will be conferred only on products that are the subject of an application for reclassification, users of the guide should refer to the entry for

the specific proprietary product and not rely only on the entry for the active substance. Since the POM Order remains in force, entries for active substances will remain in the guidance but will include cross references wherever proprietary products have been reclassified. Further guidance or clarification on the status of individual products can be obtained from manufacturers or from the Medicines and Healthcare products Regulatory Agency (tel 020 7273 0523; e-mail info@mhra.gsi.gov.uk).

Human medicines

Alka Rapid crystals GSL
Alomide Allergy ophthalmic solution P
Anthisan Bite and Sting cream GSL
Anthisan Plus spray entry should read: Anthisan Plus spray GSL
4-Androstene-3,17-dione CD Anab POM
5-Androstene-3,17-diol CD Anab POM
Avandamet tablets POM
Beclometasone/ Beclomethasone dipropionate entry — replace "P" at end of entry with "please refer to proprietary names for classification granted under the marketing authorisation (see Beconase products)"
Beconase Allergy nasal spray entry should read: Beconase Allergy nasal spray P
Beconase Hayfever nasal spray entry should read: Beconase Hayfever nasal spray GSL
Canesten AF Once Daily P
Canesten Complete P
Cetraben emollient bath additive GSL
Cetraben emollient cream GSL
Co-codamol eff entry should read: Co-codamol 8/500 effervescent CD Inv P

Co-codamol entry should read: Co-codamol 8/500 pack sizes 32s CD Inv P; greater than 32s CD Inv POM
Co-codamol 30/500 preparations CD Inv POM
Dihydroetorpine CD POM
Duac Once Daily Gel POM
Emend capsules POM
Emtriva capsules POM
FemTab POM
FemTab Sequi POM
FemTab Continuous POM
Forsteo injection POM
Fuzeon injection POM
Gammahydroxy-butyrate [GHB] CD benz POM
Gonapeptyl Depot POM
Humira injection POM
4-Hydroxy-n-butyric acid CD Benz POM
InductOs POM
Keloc SR tablets POM
Ketoconazole entry — replace "P" at end of entry with "please refer to proprietary names for classification granted under the marketing authorisation (see Nizoral products)"
Lemsip Flu 12Hr P
Lemsip Max Cold and Flu Direct GSL
Metvix cream POM

Minijet Morphine CD POM
Minoxidil entry — delete first "P" and replace "P" at end of entry with "please refer to proprietary names for classification granted under the marketing authorisation (see Regaine products)"
Modisal preparations entry should read: Modisal XL tablets P
Monit tablets entry should read: Monit tablets P
Monit SR tablets entry should read: Monit SR tablets P
Monit XL tablets P
Morphine (Minijet) CD POM
Motilium preparations entry should read: Motilium suppositories POM
Motilium suspension POM
Motilium tablets POM
Motilium 10 tablets P
Niaspan tablets POM
Nicotinell liquorice coated gum GSL
Nicotinell extra strength mint lozenges GSL
Nicotinell TTS entry should read: Nicotinell TTS GSL
NiQuitin CQ mint lozenges GSL
Nizoral (Johnson & Johnson MSD) Anti Dandruff shampoo GSL
19-Nor-4-androstene-3,17-dione CD Anab POM

19-Nor-5-androstene-3,17-diol CD Anab POM
Olmotec tablets POM
Panadol Actifact tablets pack size 14 GSL
Presinex nasal spray POM
Regaine topical solution entry should read: Regaine Regular Strength topical solution GSL
Relestat eye-drops POM
Remifentanil CD POM
Salicylic acid entry — delete maximum strengths in sections 2 (corn plasters) and 10 (wart plasters)
Stalevo tablets POM
Stilnoct tablets entry should read: Stilnoct tablets CD Benz POM
Subcuvia injection POM
Sudafed Congestion Relief capsules, non-drowsy GSL
Testogel gel CD Anab POM
Tixyplus suspension P
Ultiva entry should read: Ultiva injection CD POM
Veno's for Kids GSL
Ventavis POM
Zamadol Melt tablets POM
Zispin SolTabs POM
Zolpidem tartrate entry should read: Zolpidem tartrate CD Benz POM
Zyprexa IntraMuscular POM

Statutory Committee decisions

Set out below are the outcomes of recent inquiries heard before the Statutory Committee of the Royal Pharmaceutical Society.

On Monday 26 January 2004, in the application for restoration of **Rajendra Gulubchand Shah**, of 8 Bush Hill Road, Kenton, Harrow, Middlesex, the committee resolved to direct that at this time the name of Mr Shah should not be restored to the Register of Pharmaceutical Chemists. The committee further resolved to adjourn the application for restoration until 27 May 2004.

In the application for restoration of **Fraser Oswin Smith**, of 71 Crowhill Road, Bishopbriggs, Glasgow, the committee resolved to direct that the name of Mr Smith should be restored to the Register of Pharmaceutical Chemists.

In the inquiry into the case of **Clive Ivor Hodgson**, of 55 Hemingford Gardens, Leven Park, Yarm, Cleveland, the committee, having found that the misconduct alleged was not such as to render Mr Hodgson unfit to be on the Register of Pharmaceutical Chemists, resolved to take no further action in the case.

On Tuesday 27 January, Wednesday 28 January and Thursday 29 January 2004, in the inquiry into the case of **Khushdil Hamoodi Fakir** and **Khushdil H. Fakir Ltd**, of 2 Cannon Hill Road, Balsall Heath, Birmingham, **Emmanuel Boateng Gambah**, of 29a Frederick Road, Edgbaston, Birmingham, and **Sabrina Fakir**, of 12 Upland Road, Selly Park, Birmingham, the committee resolved to adjourn the inquiry until 9.30am on Thursday 8 April 2004.

On Thursday 29 January 2004, in the resumed inquiry into the case of **Chandrakant Ramand Patel**, of 486A Caledonian Road, London N7, the committee, having previously found the alleged misconduct established, resolved to reprimand Mr Patel.

M. B. Pawluczyk (Mrs)

Secretary to the Statutory Committee

Erasures from Register on direction of Statutory Committee

The name of the following person was erased from the Register of Pharmaceutical Chemists on 20 January 2004 following the direction of the Statutory Committee at its meeting on 20 October 2004: **John Kent Harrison** (registration number 82125), of 60 Chesterton Park, Cirencester, Gloucestershire.

The names of the following persons were erased from the Register of Pharmaceutical Chemists on 23 January 2004 following the

direction of the Statutory Committee at its meeting on 23 October 2003: **Anthony Shane Collins** (registration number 72661), No KW 5643, HMP Maidstone, 36 County Road, Maidstone, Kent; **Atul Gordhandas Kantaria** (registration number 70324), of 3 Chalk Farm Parade, London NW3; **Samina Sheikh** (registration number 82995), of 87 Draycott Avenue, Harrow, Middlesex.

Ann Lewis

Secretary and Registrar

DIARY

Local meetings

Events listed below are meetings of branches of the Royal Pharmaceutical Society. Details of future meetings notified to *The Journal* appear in the Diary section of PJ Online (www.pjonline.com/diary)

Monday 9 February

Bromley "An update on palliative care" by Margaret Gibbs (pharmacist, St Christopher Hospice, Sydenham). Postgraduate Centre, Queen Mary's Hospital, Frogal Lane, Sidcup. Buffet 7pm, meeting 8pm. (*Corrected entry.*) **Eastbourne** Eastbourne Downs Pharmacy Forum. St Mary's Board Room, Eastbourne District General Hospital. 7.30pm.

London headquarters

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Scottish department

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Welsh executive

Headquarters of the Society's Welsh Executive 029 2041 2800; fax 029 2041 2810; e-mail wales@rpsgb.org.uk

Information centre

Book loans and information Library (loans, photocopies) 020 7572 2300; e-mail library@rpsgb.org.uk; Technical information, 020 7572 2302; fax 020 7572 2499; e-mail techinfo@rpsgb.org.uk

Legal information

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Nottingham "CBRN [chemical, biological, radiological or nuclear agents], smallpox and SARS [severe acute respiratory syndrome]" by Jonathan Harris (assistant regional director of public health, Department of Health, East Midlands). School of Pharmacy, University of Nottingham. Buffet 7.30pm, meeting 8pm.

Tuesday 10 February

Bolton Annual general meeting. Education Centre, Royal Bolton Hospital. Buffet. 7.30 for 8pm. **Bradford** Annual general meeting, followed by "Current issues in pharmacy" by Gill Hawksworth (President, Royal Pharmaceutical Society). John Stanley Bell Lecture Theatre, D Floor, University of Bradford. Buffet. 7.30 for 8pm. **Leicestershire** "Medicines management and the National Service Framework for Older People" by Alison Ewing (Vice-President, Royal Pharmaceutical Society). Leicester College, Freemans Park Campus. 7.30 for 7.45pm. Hot buffet. Places limited: contact Ian Bell (tel 0116 271 5057; e-mail ribc.bell@care4free.net) **Mid Glamorgan East** "Prescribing in pregnancy and breastfeeding". Heritage Park Hotel, Trehafod. Hot buffet 6.45pm, meeting 7.30pm. **Moray and Banff** "Epilepsy model schemes" by Annamarie McGregor

(director, pharmaceutical care model schemes development team). Laichmoray Hotel. 7pm.

Oxfordshire "Advising on dental health" by David Thomas (consultant in dental public health, Oxfordshire). George Pickering Postgraduate Centre, Level 3, John Radcliffe Hospital, Headington. Light refreshments. 7.30 for 8pm.

South Cheshire "The extended role of the pharmacist" by Juanita Westbury and Janet Kenyon (pharmacists, Central Cheshire Primary Care Trust). Delamere Suite, Fourways Inn (A556), Oakmere, Northwich. Meal 7.15pm, meeting 8pm.

Southampton "Drug induced arrhythmias and pharmacogenetics" by Andrew Boshier (clinical research fellow, Portsmouth). Drug Safety Research Unit. Buffet 7.30pm, meeting 8pm.

Sunderland "Chemistry of the brain: seeking solutions to neurological diseases" by Professor George Lees. Tom Cowie Lecture Theatre, Sunderland. 7 for 7.30pm.

West Surrey "Osteoporosis: current treatment" by Clare Batten (osteoporosis lead, North West London Hospitals NHS Trust) and annual general meeting. Burchatts Farm, Guildford. Hot buffet 7.30pm, meeting 8pm.

Wednesday 11 February

Barnet "Evidence-based counter prescribing" by Angela Alexander (chairman, College of Pharmacy Practice). Postgraduate Medical Centre, Barnet General Hospital. Food available 7.15pm, meeting 8pm. **Bath** "Youth and pharmacy" by Nicola Gray (member of the Royal Pharmaceutical Society's Council). 8 West, University of Bath. 7.30pm. **Scunthorpe** "The future of the branch" (discussion with meal). Arties Mill. 7.30pm.

West Cumberland "Treatment of diabetes" by Eileen Breslin (diabetes nurse, West Cumberland Hospital). Hundith Hill Hotel, near Cocker mouth. 7.15 for 7.30pm. Followed by bar supper.

Thursday 12 February

Glasgow and West of Scotland 43rd Todd Lecture: "Glasgow's new Centre for Population Health" by Professor Sir John Arbuthnott (chairman, Greater Glasgow NHS Board). SIBS Lecture Theatre 101, John Arbuthnott Building, 27 Taylor Street, University of Strathclyde. 7.30 for 8pm.

Weald of Kent Annual general meeting and "Error reporting/risk management" by Professor David Cousins (head, safe medication practice, National Patient Safety Agency). Ramada Jarvis Hotel, Pembury, Tunbridge Wells. Buffet 7.30pm, meeting 8pm.

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