

Community pharmacy

Definition:

A community pharmacy, often referred to as retail pharmacy or retail drug outlets, is places where medicines are stored and dispensed, supplied or sold.

Community pharmacy practice means any place under the direct supervision of a pharmacist where the practice of pharmacy occurs or where prescription orders are compounded and dispensed other than a hospital pharmacy or a limited service pharmacy.

History of Pharmacy in India:

- The pharmacy practice scenario and especially community pharmacy practice during pre-independence era was highly unregulated and there were no restrictions on the practice of pharmacy in India. The standardization of pharmacy education was introduced in 1945.
- The Indian Pharmaceutical Congress Association had its first annual conference in 1948.
- The Pharmaceutical Association was the first pharmaceutical society of India started in 1923 and was renamed as The Pharmaceutical Society of India after 2 years.
- In 1932, pharmacy education was started at Banaras Hindu University, and introduced a Bachelor's of Pharmaceutical Chemistry and was first university to start a 3-year bachelors program in pharmacy.
- In 2008, Pharm.D (Doctor of Pharmacy) 6 year program has been introduced by PCI (Pharmacy Council of India).
- The minimum qualification required to practice pharmacy is a Diploma in Pharmacy. A pharmacist's presence is legally required during the dispensing and selling of medicines.

Development Of Community Pharmacy Practice:-

- 1. Good pharmacy Practice Compliance.**
- 2. Skill Development : Pharmacist Assistants**
- 3. Availability art and other essentials medication.**
- 4. Quality pharmaceutical care.**

Role of Indian Pharmaceutical Association

- The public perception of community pharmacy and the pharmacist was very weak.
- The general population considers community pharmacists as drug traders. But gradually the community pharmacy is awakening with the steady efforts of Indian

Pharmaceutical Association (IPA) and many other organizations and eminent pharma professionals.

Patient counseling and evaluating

Dialogues between patients and physicians regarding the indication, proper use and potential adverse effects of non-prescription drugs (NPDs) should be different as compared, when if the physician has written the prescription. In the era, the cost considerations are greater than ever, NPDs should be considered and referred when appropriate, as alternatives to prescription drugs.

Role and Responsibilities of Pharmacist

(I) Central Pharmacists Responsibilities

A. Dispensing area

1. Ensures that established policies and procedures are followed.
2. Checks for the accuracy of doses prepared (a) Intravenous admixtures (b) Unit dose
3. Provides for proper drug control (a) Ensures that drugs are stored and dispensed properly (eg. Investigational drugs) (b) Ensure that all state and federal drug laws are followed
4. Ensure that good techniques are used in compounding intravenous admixtures and extemporaneous preparations

B. Patient-care area

1. Supervision of drug administration.
 - (a) Reviews and interprets each unit doses and intravenous (IV) admixture medication order to ensure that it is entered accurately into the unit-dose or IV- admixture system.
 - (b) Reviews each patients drug administration form periodically to ensure that all doses are being administered and charted correctly.
2. Reviews all doses missed, reschedule the doses as necessary and signs all drugs not given notices.
3. Ensures that new drug administration forms are transcribed accurately for continuity of drug therapy and that drug charges are assessed correctly. (a) Confirms periodically that administered doses are noted correctly on the patient chart.

C. Direct patient care Identifies drug brought into the hospital by patients.

Obtain patient medication histories and communicates all pertinent information to the physician. 1. Assists in drug-product and entity selection.

2. Assists the physician in selecting dosage regimens and schedules and then assigns drug administration times for these schedules (pharmacokinetic service).

3. Monitors patient s' total drug therapy for- (a) Effectiveness/ ineffectiveness (b) Side-effects (c) Toxicities (d) Allergic drug reactions (e) Drug interaction (f) Appropriate therapeutic outcomes.

D. General responsibilities

1. Provides education to

- (a) Pharmacists, pharmacy externs, clerks, students, residents and other students.
- (b) Nurses and nursing students.
- (c) Physicians and medical students.

2. Provides drug information to physicians, nurses and other healthcare personnel.

Code of Pharmaceutical Ethics

As adopted by Pharmacy Council of India under chapter-I: General Introduction, The profession of pharmacy is noble in its ideals and pious in its character. Apart from being a career for earning livelihood it has inherent in it the attitude of service and sacrifice in the interests of the suffering humanity.

In handling, selling, distributing, compounding and dispensing medical substances including poisons and potent drugs a pharmacist is, in collaboration with medical men and others, charged with the onerous responsibility of safeguarding the health of people, as such he has to uphold the interests of his patrons above all things.

The lofty ideals set up by Charaka, the ancient Philosopher Physician and Pharmacist in his enunciation : "Even if your own life be in danger you should not betray or neglect the interests of your patients" should be fondly cherished by all Pharmacist.

Government restricts the practice of Pharmacy to those who qualify under regulatory requirements and grant them privileges necessarily denied to others. In return Government expects the Pharmacist to recognise his responsibilities and to fulfill his professional obligations honorably and with due regard for the well being of Society. Standards of professional conduct for pharmacy are necessary in the public interest to ensure an efficient pharmaceutical service.

Every pharmacist should not only be willing to play his part in giving such a service but should also avoid any act or omission which would prejudice the giving of the services or impair confidence in any respect for pharmacists as a body.

The nature of pharmaceutical practice is such that its demands may be beyond the capacity of the individual to carry out or to carry out as quickly or as efficiently as the needs of the public require. There should, therefore at all times, be a readiness to assist colleagues with information or advice.