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Submission date: 27-Oct-2020 10:44PM (UTC+0300)

Submission ID: 1428402914

File name: Prescription_of_Controlled_Drugs.edited.docx (14.14K)

Word count: 407

Character count: 2400

Prescription of Controlled Drugs

Physicians frequently get patients who are looking for medication to assist in reducing their main complaint. Therefore, as a physician, one has the obligation of examining and recommending the necessary medication. There are five dissimilar extents of preparing for medication (I-V) with extent I being the tightest control and extent V being the least restrictive. For that reason, physicians must comprehend the properties and mechanisms of the medication before prescribing. Also, the pharmacist has to know any interactions the patient had with other drugs (Osborne, 2017). on the other hand. for a physician or a pharmacist to distribute a controlled substance, the prescription has to have the patient's name as well as address, drug name together with strength, date of issue, quantity prescribed, dosage form, a signature of the prescriber, direction of use and number of refills.

There are several ways an APRN can protect their DEA number. First, register with the Controlled Substance Prescription Monitoring Program (CSPMP) assisting in keeping track of DEA number by way of database. Secondly, locking up prescription pads since they contain the DEA number counts. Also, using pads that contain watermarks since it's harder to forge. Lastly, checking one's credit report for uncommon conduct under your identity comes in.

Prescription errors are common but are preventable. Some errors may result in no harm at times while others may result in severe harm and sometimes death (Lucchetta et al., 2018). Thus, preventing these errors is critical in ensuring patients' safety. There are several options one can take to prevent prescription error. They include implementation of tools used to guide prescriptions, uplifting patient's safekeeping through a multidisciplinary team, with pharmacists participating, inclusion of computerized alert systems in the medical field and educating prescribers on prudent prescribing. According to ¹ **Institute for Safe Medication Practices** Canada

(2017), an example of prescription error was in 2017, in Canada having tryptophan prescribed instead of baclofen which led to a loss of life of a child.

References

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