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## **CANADIAN PHARMACY LAW**

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This release features updates to Chapter 7: Practice Issues and Chapter 9: Selected Court Cases. As well there are updates to Federal legislation and by-laws as well as legislation and by-laws in Nunavut, Ontario, Prince Edward Island, Quebec and Saskatchewan.

### **Highlights**

- **Money and Pharmacists** — While the profession of pharmacy has certainly moved beyond merely counting tablets and labeling vials, the business of pharmacy has remained focused on money. Pharmacists are the medication experts, help manage patients' complex health conditions, understand diagnostic parameters such as laboratory results, and even prescribe and administer medications. Unfortunately, monetary remuneration for these services in many cases remains linked to a dispensing fee. As such, overbilling is a common complaint seen in many discipline cases. Often, the impetus may be greed, but perhaps sometimes it may be an attempt to finance

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professional services provided to patients. Within the profession of pharmacy, the role of a pharmacist should be less linked to business but rather to patients' well being. See *Saskatchewan College of Pharmacy Professionals v. Ankit Karbhari*, (June 29, 2018), 2018 SKCPPDC 3 (CanLII).

- **Pharmacist's Duty of Protect Patient Privacy** — Whether it is health records scattered in a back alley as in *M.A.S. v. L.G.*, (October 18, 2018), Doc. 17-CRV-0686 (ON HPARB), or a pharmacy technician looking at electronic patient information when there was no professional requirement to do so as in *Nova Scotia College of Pharmacy v. Young*, July 30, 2018, available at [www.nspharmacists.ca](http://www.nspharmacists.ca), or a conflict over health records which lead to a complaint as in *N.H. v. N.M.*, 2018 CanLII 115794 (ON HPARB), privacy is paramount when it applies to patient health information. A pharmacist has a fiduciary duty towards their patients and acts as a trustee of their patients' health information. News reports abound regarding health care professionals inappropriate use of patient health information, but when health information is treated in a cavalier manner or even “fought over”, pharmacists are dismissing the privacy and confidentiality with which patient information must be treated.