STATEMENT OF PROFESSIONAL STANDARDS ON ELECTRONIC PRESCRIPTIONS

evelopment of electronic technology has the potential to improve productivity and the quality of patient care within health care systems. Properly designed and appropriately used, electronic prescribing systems can reduce medication errors, ensure security and improve desired outcomes of medicinal therapy. While systems can provide efficiencies, they may also create the potential for third parties to tamper with prescription details. Standards for systems should be designed with the purpose of supporting physicians and pharmacists in the provision of efficient, high quality care.

FIP supports the use of electronic technology to improve current hand or type-written prescriptions and recognises that electronic prescribing initiatives would benefit from standards that are uniform within a given health care system. Patient confidentiality and prescriber intention and

verification must be ensured. Systems must maintain the integrity of prescriptions communicated by a prescriber, on behalf of a patient, to the pharmacy of that patient's choice.

To secure the safeguards summarised above, the FIP is of the opinion that the following principles must be observed when setting national standards for safe medicinal therapy when electronic prescriptions are used.

- A prescription must, as a minimum, contain information on patient identity, age and gender, medicinal product, strength, dosage and quantity, directions for the patient, and prescriber identity.
- The system must allow the patient to ensure that the prescription is directed to the pharmacy of his or her choice.
- The system must give the pharmacist access to such information about the patient as is necessary to enable the pharmacist to judge the correctness and appropriateness of a selected medicinal therapy.
- Systems that collect or manage data from prescribing and dispensing activities, to be used for commercial purposes, must guarantee patient and prescriber confidentiality and that the dispensing pharmacy and pharmacist cannot be identified.
- Systems must prevent third parties from interfering with the content of the prescription.

 Systems must allow for authentication of prescriber and pharmacist identity.

In addition,

- Systems should provide for inclusion of diagnosis and/or intended use when desirable within a healthcare system
- Systems should, where appropriate, include provision for confirming an individual's entitlement to benefits within a health care scheme