

A CLOSER LOOK 5.2: Drug Enforcement Administration Numbers

Pharmacists can verify the legitimacy of the DEA number found on a prescription by the following method: Each number has two letters followed by seven digits. The first letter is always A or B, based on when the number was issued (A is earlier than B). The second letter is the first letter of the prescriber's name. The seven digits have a mathematical relationship that is always followed. Try the formula to see whether BW1342586 is a valid DEA number:

Add the first, third, and fifth numbers. In this case, $1 + 4 + 5 = 10$

Now add the second, fourth, and sixth numbers: $3 + 2 + 8 = 13$

Double the sum just calculated: $13 \times 2 = 26$

Add this to the first sum: $26 + 10 = 36$

Take the last digit in that sum (36, the first digit is 3, the last digit is 6).

The final digit in this DEA number must be 6.

If the final digit in this number were anything but a 6, the DEA number would be fraudulent.

- **Patient's name, address, and date of birth.** Be sure that the current address of the patient appears on the prescription form; write it on the form if it is not there already, and check with the patient to be sure it is correct. Including the patient's birth date on the prescription helps the pharmacist ensure that the drug and dosage prescribed are appropriate for the age group of this patient.

The second type of information on the prescription that relates to the dispensing of the medication includes **Rx** or the **superscription**, which means "take thou" and is an abbreviation for prescription or treatment; **inscription** (name of drug, dosage, and quantity to be dispensed); directions for taking the drug (**signature**); refill numbers (**subscription**); a notation about whether a generic drug can be used; and the signature of the prescriber (Fig. 5-1).

- **Inscription (name of drug, dosage, and quantity to be dispensed).** The drug name must be clearly identified. The prescriber may write the generic or brand name on the order. The prescriber also notes whether a generic drug can be substituted for a brand name drug. This information may be indicated with a checked box, or it may be written out as "do not substitute" or "dispense as written" if the prescriber prefers the brand name drug. As noted in Chapter 4, insurance companies and health maintenance organizations (HMOs) usually prefer paying for the less-expensive drug. However, some patients are allergic to dyes or fillers found in certain generic drugs. For these patients, the brand name drug is the best choice.

The dosage is a crucial piece of information. Make sure that the strength of the drug is clearly indicated. Missing a decimal point or a zero (e.g., 25 mg instead of 2.5 mg or 0.25 mg instead of 25 mg) can harm a patient. Again, the Institute for Safe Medication Practices covers the appropriate and inappropriate use of decimals (www.ismp.org). If a dose seems inappropriate, check your drug resources before giving the patient the prescription, and if the dose still does not seem right, check it with the prescriber.

The quantity to be dispensed is indicated by a number after a pound sign (#). In addition, this number should be written out. Adding a zero at the end or a 1 in front of a number is simple, but a number that is also written out is not so easily changed. For an acute problem, the drug may be given for only a short time. Thus, perhaps only a 1-week or 1-month supply is given. A patient with a chronic condition may require a 90-day supply and three refills to continue the drug treatment for 1 year.

- **Signature.** The signature is from *signetur*, a Latin word for "write on the label." It instructs the patient when and how to take the drug. Prescribers use standardized abbreviations when