



**DEPARTMENT OF
COMMERCE**

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Dockets Management Branch (HFA-305)
Food & Drug Administration
5630 Fishers Lane, Room 1061
Rockville, MD 20852

Subject: FDA Proposed Rules for Medication Bar Coding and Safety Reporting

Thank you for allowing this period of time for written comments.

The South Dakota Board of Pharmacy is very concerned about medication errors, and applauds the FDA endorsement of bar coding as one approach to identify potential medication errors. Reporting of medication errors is also very important for study of future recommendations to prevent errors that occur in any delivery system.

I would ask the FDA to address a major problem of medication errors. Statistics show the number one cause of medication errors (up to sixty percent) originate with the prescriber.

The cause most often identified is the practitioner's handwriting, which leads the pharmacist to misinterpret the prescription and enter the wrong medication into a computer system. From there, the error sometimes goes undetected for months.

Sound-alike names is the next leading cause of medication errors. This is a problem that the FDA could prevent from the very beginning when approving new drugs for market.

Copies of NCR paper used for the practitioner's chart orders are often very difficult to read. On top of that, NCR written orders poorly transmitted to the pharmacies by some hospital scanners make orders even more difficult to read.

To correctly address the problem of medication errors, the government will need to stop the politics and address the real culprits causing medication errors. Bar coding is a tool, not a solution, and is only effective if the correct drug is entered by the pharmacist.

Sincerely,

Dennis M. Jones, R.Ph.
Executive Secretary
South Dakota Board of Pharmacy

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