

## Educational Resource: Prescription Forgeries

Do any of these situations sound familiar?

*Why are pharmacists contacting me about Cotridin prescriptions?*

*Why are there patients I don't recognize on my MD Snapshot-Prescribing and TPP Alberta reports?*

*Patients are telling me their pharmacy is keeping their door locked, even during daytime hours. Why is this?*

*I've just found out that prescriptions have been forged under my name. What should I do?*

*My vehicle was broken into and my prescription pads were stolen. Now what?*

### Prescription Forgeries

The July 2020 TPP Alberta change of codeine-containing syrups from a Type 2 to Type 1 category had an immediate and significant impact on decreasing prescription forgeries, but this was unfortunately short-lived.

By late fall 2020, forgeries for Cotridin using TPP Alberta prescription forms (actual or digitally altered) had jumped. The forgeries are quite sophisticated and are typically faxed to pharmacies, meaning some of the security features of the TPP Alberta form cannot be checked.

Due to the large number of forgeries for Cotridin syrup, many pharmacy staff are now contacting prescribers to confirm the legitimacy of the prescription.

Forgeries of drugs other than Cotridin are also circulating. As a drug class, benzodiazepines are the most commonly forged.

While pharmacy staff are well-attuned to signs that a prescription may be forged, some prescriptions slip through and are dispensed. Alternatively, sometimes the incorrect prescriber is assigned to a prescription.

You may request a TPP Alberta report at any time. Review it and your MD Snapshot-Prescribing report carefully. If there are any errors or concerns, contact TPP Alberta:

Phone: 1-800-561-3899 ext. 4939

Fax: 780-429-1981

Email: [TPP.Info@cpsa.ab.ca](mailto:TPP.Info@cpsa.ab.ca)

Mail: TPP Alberta, 2700-10020 100 Street NW Edmonton, AB T5J 0N3 Canada

## Pharmacy robberies/break-ins

“Alberta pharmacies have increasingly been the target of armed robberies in recent months. Robberies can be traumatic events for pharmacy staff and patients.”<sup>1</sup>

Calgary Police Service said there have been 49 pharmacy robberies across Calgary dating to September 2020. They have established a dedicated investigative team to identify and locate those responsible for causing “significant harm” to pharmacy employees, who were being targeted for robbery of pharmaceuticals and cash.

In a December 2020 interview, police Chief Mark Neufeld identified a rise in pharmacy robberies as the biggest [crime-related effect](#) of the ongoing opioid crisis, including violent incidents involving handguns.<sup>2</sup>

Therefore, for smaller pharmacies in particular, remote locking doors may have been installed. These do not allow anyone to leave or enter the pharmacy immediately after an event or if there is some threat or hazard outside the store that merits locking the doors.<sup>1</sup>

As well, when there is limited staff in a pharmacy, the main entrance may be kept locked at all times; only one customer or patient may be allowed in at a time.<sup>1</sup>

## Steps to take following forged prescriptions using your name:

Health care professionals have professional and ethical responsibilities to take steps to address forgeries to help support appropriate drug use and prevent drug diversion, maintain the integrity of the drug delivery system and lessen related public health risks.

Forgeries may be confirmed by pharmacy staff prior to being dispensed. Due to the sophistication of current forgeries, some may not be identified as such and may be dispensed. You may notice such forgeries through review of your dispense history, e.g., via the Pharmaceutical Information Network (PIN), TPP Alberta reporting or your MD Snapshot-Prescribing.

Regardless of how or when the forgery is detected, the following steps should be completed if a prescription has been forged using your name as the prescriber:

1. Confirm the forgery:
  - a. Get a copy of the forged prescription(s) from the pharmacy.
  - b. Gather details of the forgery, such as:
    - i. Date/time of forgery presentation to the pharmacy
    - ii. Confirmation of patient information:
      1. Have you seen this person?
      2. If so, are patient details correct? Or, are there discrepancies, e.g., patient names, address, Personal Health Number
      3. Other pertinent information.

- iii. Was the 'patient' picking up the prescription or their agent? Agent details?
  - iv. Although this is not a pharmacy requirement, did pharmacy staff request and validate the identification of the person collecting the prescription? Were details recorded?
  - c. Identify any discrepancies from legitimate prescriptions under your name, such as:
    - i. incorrect signature
    - ii. incorrect college registration number
    - iii. prescription for a drug you never prescribe
    - iv. TPP tracking numbers are not yours
    - v. no clinic fax cover sheet sent with the faxed prescription
    - vi. incorrect clinic fax number
    - vii. other prescription or fax details are incorrect
    - viii. etc.
  - d. Document the forgery in your records.
2. Collaborate with the pharmacy that received and/or filled the forgery.
    - a. Share applicable details with the pharmacy staff so that they can identify possible future forgeries under your name.
    - b. Provide direction to the pharmacy staff on the steps you would like taken for forgeries received under your name, such as how to contact you.
    - c. Determine whether the pharmacy will notify:
      - i. The Alberta College of Pharmacy (ACP) (ACP maintains information on prescription forgeries accessible by registered members only);
      - ii. Law enforcement, as applicable.
  3. Notify local law enforcement
    - a. This may not be required if the pharmacy is contacting law enforcement regarding the forgery but can still be completed by the physician.

Edmonton Police Service = Non-Emergency Line 780-423-4567  
<https://www.edmontonpolice.ca/ContactEPS/EPSComplaintLine>

Calgary Police Service = 403-266-1234

RCMP = non-emergency lines

Red Deer 403-406-2300

Grande Prairie 780-830-5701

Wood Buffalo 780-788-4040

Other detachments

<https://www.rcmp-grc.gc.ca/detach/en>

- b. If you would prefer that CPSA/TPP Alberta notify law enforcement, please contact TPP at 1-800-561-3899 ext. 4939 or by email at [TPP.Info@cpsa.ab.ca](mailto:TPP.Info@cpsa.ab.ca).
4. Notify TPP Alberta of the forgery:
  - a. Provide a copy of the forged prescription including details in #1 above.
  - b. TPP Alberta will add a note to your profile regarding the forgery (including whether the forged prescription was filled or not). (Note that forged prescriptions that have been dispensed cannot be removed from Netcare/Pharmaceutical Information Network.)
5. Prevent possible future forgeries by:
  - a. Protecting all prescription forms/pads (TPP and regular) from theft/loss. Never leaving them unattended in your office or examining room or in your vehicle (even if locked).
  - b. Reporting all lost/stolen TPP forms/pads to TPP Alberta and local law enforcement
  - c. Being accessible to pharmacy colleagues for prescription verification
  - d. Providing prescriptions to pharmacies electronically, as possible, e.g., via system-to-system mechanisms such as PrescriberT, faxing the prescription (include a clinic fax coversheet and ensure fax resolution is sufficient for legibility).
  - e. Or, consider contacting the applicable pharmacy by phone to confirm a legitimate prescription (for a TPP or other drug prone to diversion) will be presented by the patient or their agent.
  - f. Regularly checking your prescribing history, e.g., via PIN, TPP Alberta reporting (you can request your prescription history for TPP-monitored drugs at any time);
  - g. Being aware of drugs commonly included in forged prescriptions. Collaborate with pharmacies and other prescribers in your vicinity regarding forgeries.

### **What else could I do to help prevent forgeries?**

#### Support 'problematic substance use' initiatives

Problematic substance use is at the root of prescription forgeries and pharmacy robberies. Prescriptions are forged and pharmacies robbed of narcotics, etc. to support addictions (either personal or to sell to someone else with an addiction). Therefore, the "big picture" approach to mitigating forgeries and pharmacy robberies is to actively participate in initiatives that aim to minimize the harms related to problematic substance use.

Physicians can contribute to community drug strategies by providing treatment and harm reduction.<sup>3</sup>

### **You may find the following information, tools and links helpful:**

The Alberta College of Family Physicians (ACFP) has created the [Peer Simplified Guideline: Managing Opioid Use Disorder in Primary Care](#) including an OUD Care Pathway and Induction Flow Diagram.

Note that approval from CPSA is not required when prescribing **buprenorphine/naloxone**. Nor is registration with TPP Alberta or use of the TPP prescription form (as this combination product is TPP category 2).

**Methadone**, on the other hand, requires CPSA approval when prescribing it for opioid use disorder. <https://cpsa.ca/wp-content/uploads/2020/10/Methadone-Application-for-approval.pdf>

As well, Methadone is a TPP Alberta category 1 drug so registration with TPP Alberta and use of a secure TPP prescription form are required.

Recently, the newer buprenorphine products, Sublocade and Probuphine, have been reclassified as TPP Alberta category 2 products.

**Sublocade** is an extended-release formulation of buprenorphine that is administered monthly via abdominal subcutaneous injection for the management of moderate to severe opioid use disorder. (BCCSU)

The British Columbia Centre on Substance Use bulletin contains information on Sublocade for prescribers and pharmacists: [https://www.bccsu.ca/wp-content/uploads/2020/05/Bulletin-Sublocade\\_0520.pdf](https://www.bccsu.ca/wp-content/uploads/2020/05/Bulletin-Sublocade_0520.pdf).

BC CSU also provides a link to a Sublocade webinar series: <https://www.bccsu.ca/blog/event/webinars-sublocade/>.

It is important to note that the manufacturer of Sublocade requires that all Sublocade prescribers and administrators complete training prior to use of this product: <https://liferay6.cess-labs.com/documents/69080/80600/Sublocade+Certification+Card.pdf/ac34e324-5480-46be-a140-90f53b4440aa?version=1.0>

Sublocade is a Special Authorization benefit of the Government of Alberta's public drug plans. Likewise, the Non-Insured Health Benefits (NIHB) program covers Sublocade as a Limited Use Benefit. Coverage criteria can be found via the following links:

[Alberta Drug Benefit List](#)

[Non-Insured Health Benefits](#)

**Probuphine** is a subdermal implant for the maintenance treatment of opioid use disorder designed to provide continuous blood levels of buprenorphine for up to six months following implant insertion.<sup>4</sup> Probuphine is intended for use in patients who have been stabilized on no more than 8 mg of sublingual buprenorphine daily.

Healthcare professionals performing insertions and/or removals of Probuphine must have successfully completed a live training program. A prerequisite for participating in the live training program involves performance of at least one qualifying surgical procedure in the previous 3 months. More details on the qualifying procedures and training can be found in the product monograph or by calling 1-844-483-5636. Probuphine is available only through a controlled distribution process.<sup>5</sup>

Probuphine is a Special Authorization benefit of the Government of Alberta's public drug plans as well as a Limited Use benefit under NIHB. Coverage criteria can be found via the following links:

[Alberta Drug Benefit List](#)

[Non-Insured Health Benefits](#)

**Footnote:**

In the circumstance of a forgery, prescription information would not be regarded as "health information" within the meaning of this term in the *Health Information Act* (HIA). The patient name, address and PHN may be false. Additionally, if a prescriber did not write the prescription, then a "health service" as defined in the HIA has not been provided. Therefore, a copy of a forged prescription can be provided to the police at their request as well as to other applicable parties, e.g., TPP Alberta, health professional regulatory colleges.<sup>1</sup>

**Appendices:**

**1. Coverage criteria**

**Sublocade**

Alberta Drug Benefit List:

For the management of moderate to severe opioid use disorder in patients clinically stabilized on 8 mg to 24 mg per day of sublingual (SL) buprenorphine for a minimum of 7 days and to be used in combination with counseling and psychosocial support.

The patient should be under the care of a healthcare provider with experience in the diagnosis and management of opioid use disorder and who has been certified to administer subcutaneous buprenorphine extended release injection.

Buprenorphine extended release injection must be administered subcutaneously in the abdominal region by a healthcare provider.

Patients will be limited to receiving one syringe per prescription at their pharmacy.

Special authorization may be granted for six months.

This product is eligible for auto-renewal.

Non-Insured Health Benefits:

For the management of moderate to severe opioid use disorder in adult patients who have been inducted and clinically stabilized on a transmucosal buprenorphine-containing product; and Patient must be induced and stabilized on an equivalent of 8 mg to 24 mg per day of transmucosal buprenorphine for a minimum of 7 days.

Note:

- the prescriber has experience in the diagnosis and management of opioid use disorder and certified under Sublocade Certification Program.
- Sublocade must be administered subcutaneously in the abdominal region by a healthcare provider.  
Sublocade should be used as part of a complete treatment plan that includes counselling and psychosocial support.
- client will be added to the Client Safety Program (CSP).

### **Probuphine**

Alberta Drug Benefit List:

For the management of opioid dependence in patients clinically stabilized on no more than 8 mg of sublingual buprenorphine, for the preceding 90 days, in combination with counseling and psychosocial support.

The patient should be under the care of a health care provider with experience in the diagnosis and management of opioid use disorder and has been trained to implant the buprenorphine subdermal implant.

Patients will be limited to receiving one kit per prescription at their pharmacy. Special authorization may be granted for 24 months.

Non-Insured Health Benefits:

For the management of patients with opioid use disorder, in combination with psychosocial support:

- patient is stabilized on a dose of no more than 8 mg per day of sublingual buprenorphine/naloxone for the preceding 90 days; and
- patient is under the care of a health care provider with experience in the diagnosis and management of opioid use disorder; and
- the prescriber has been trained to implant the buprenorphine subdermal implant.

Approval is for a maximum of four lifetime doses. One package of 4 implants is approved at every 6 months (e.g. four times X package of 4 implants)

**2. Resources:**

**Sublocade**

Product Monograph: [https://pdf.hres.ca/dpd\\_pm/00048406.PDF](https://pdf.hres.ca/dpd_pm/00048406.PDF)

Articles:

<https://www.cadth.ca/sites/default/files/cdr/clinical/sr0579-sublocade-clinical-review-report.pdf>

<https://www.ncbi.nlm.nih.gov/books/NBK546256/> (June 2019)

**Probuphine**

Product Monograph: [https://pdf.hres.ca/dpd\\_pm/00056235.PDF](https://pdf.hres.ca/dpd_pm/00056235.PDF)

Articles:

[https://cadth.ca/sites/default/files/cdr/clinical/SR0550\\_Probuphine\\_CL\\_Report.pdf](https://cadth.ca/sites/default/files/cdr/clinical/SR0550_Probuphine_CL_Report.pdf)

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5521298/> (2017)

**3. References**

- i. Alberta College of Pharmacy: <https://abpharmacy.ca/articles/your-pharmacies-been-robbed-now-what>
- ii. Calgary Herald March 10, 2021: <https://calgaryherald.com/news/crime/police-charge-two-in-connection-with-pharmacy-robberies-ask-for-help-identifying-more-suspects>
- iii. <http://pharmacyu.ca/5-tips-for-reducing-the-risk-of-pharmacy-robberies/>
- iv. <https://www.cadth.ca/dv/ieht/buprenorphine-implant-treatment-opioid-use-disorder>.
- v. Product Monograph Probuphine [https://pdf.hres.ca/dpd\\_pm/00056235.PDF](https://pdf.hres.ca/dpd_pm/00056235.PDF)