

THE JOURNAL OF THE
CERTIFIED PHARMACIES.

As the demand for a high-grade milk has given us "certified" milk, so the demand for high-grade, competent and reliable pharmacies—pharmacies where a physician may send his prescriptions with the assurance that they will be compounded conscientiously—promises to lead to the establishment or recognition of "certified" pharmacies. The pharmaceutic profession no less than the medical profession has long recognized that many who are licensed to conduct a "drug store" are not equipped to compound prescriptions. While it is generally conceded that the amount of real drug business is not sufficient to furnish a livelihood for more than an extremely small portion of those engaged in it, there is an opportunity for a limited number to conduct high-class pharmacies, and many schemes have been proposed for establishing some sort of dividing line between ordinary drug stores and real pharmacies.

The plan of examining pharmacies and issuing licenses to those which meet the requirements, urged by M. I. Wilbert some ten years ago, was recently again proposed at a joint meeting of the Medical Society of the County of New York and the New York branch of the American Pharmaceutical Association, and it was decided that a committee to consist of ten members from each society should draw up regulations or requirements for the "certification" of pharmacies."

At this meeting one of the speakers made the point that a physician knows the reliable pharmacies in his own neighborhood but is entirely at sea when away from home, and that there should be some method of certifying to pharmacies at which physicians can have absolute confidence that their prescriptions will be compounded correctly and with the skill and care of the properly trained pharmacist whose business is conducted in accordance with medical and pharmaceutic ethics.

While the establishment of requirements for such certifications should be carefully considered, the need of a dividing line between the druggist whose energies are chiefly devoted to the sale of cigars, chewing-gum, soda-water and patent medicines, and the pharmacist to whom one may safely entrust the compounding of prescriptions is so urgent that we shall look forward to the outcome with much interest. We are reminded at this time that physicians have long attempted through consultations and discussions—generally informal—to gain information regarding the qualifications of pharmacists in the various parts of the town or city in which they practice.—*Journal A. M. A.*

TWO KINDS OF PHARMACIES CAN SUCCEED.

Has it ever occurred to you, dear reader, that we could have two kinds of pharmacies in this country and have them both successful? Suppose we had a standard for such stores as desired to fill physicians prescriptions, these stores to be known by some readily recognizable sign, prominently displayed for the benefit of the public, this class of store to be known as a "Prescription Pharmacy" and its medicines to be "certified" as being absolutely right for human consumption,

physicians to have a list of these stores posted conspicuously in their offices, and patients told to go to any one of them they chose—naturally the nearest one.

The certification of these stores would be under the control of the State or National Board of Pharmacy, and possibly a fee would be charged for examination. Inspectors would be free to come and go in such places, much as they do in examining National Banks, and no pharmacist would be allowed to maintain his license or fill prescriptions who failed to live up to the requirements of the Board of Examiners.

The second class of stores would be known as "drug stores," and would have the right to sell drugs and chemicals and everything else they pleased. In other words, they would be merchants running large or small department stores, depending on location, etc. They might even be allowed to have a prescription department, but the chances are the requirements would be so strict that the "drug store" would gladly turn this portion of the business over to the "certified pharmacy."

Now, we know what you are going to say. You rise to remark that a scheme of this kind is not new; that it has been in vogue for years in Europe and that it is not applicable to this country because we cannot have the same guarantee of protection of territory in this "land of the free" as the pharmacist abroad has. True, but nevertheless we believe the plan as outlined would work satisfactorily in the United States.

If the "department pharmacy" would give up its prescription department, and add, say a floral department, in its stead, and the "prescription pharmacy" would give up its sundries (aside from those belonging to a prescription store) would not both be better off? Think of the worry off the mind of the fellow who hates the prescription business anyway and wishes he had never seen a prescription; also the care off the shoulders of the ethical cuss who hates to sell candy and cigars, but feels he has to, to make a living.

A plan of this kind would hardly be applicable to the country stores, but we believe some such scheme is feasible for all towns of 10,000 inhabitants and over.—*Pacific Drug Review*.

PHARMACY A COMMERCIAL PROPOSITION.*

WILLIAM A. HOWE.

The writer, after fifteen years' work as proprietor of a drug store, has come to the conclusion that pharmacy is not so much a profession as it is a purely commercial proposition, with long hours to work, and sometimes, for small profit.

From my own experience and what I have seen in a limited way, there seems to be something radically wrong in the conditions surrounding the practice of pharmacy. We all know it is almost impossible to get good registered clerks at salaries which the ordinary store is able to pay. Neither can we blame the

*Read before the O. S. P. A.