

I rarely read. In medical journals I only read the articles on the use and the results of the new drugs and preparations, and the section, Council on Pharmacy and Chemistry in the *American Medical Association Journal*, except the articles by the physicians that I know personally, and those I always read and discuss with the writers.

In the State journals there is usually at least one article by a local man whom each of you in your locality will know. We are not expected to be familiar with the symptoms for diagnosing or the treatment of diseases, as that is beyond our field. We should read articles in all popular lay magazines pertaining to our profession, and that of medicine as well, such as articles under the caption, "Medicine" in *Time* and such articles as "Diagnosing the Doctors" which recently appeared in the *American Magazine* and were reprinted in *Reader's Digest*, pertaining to "Socialized Medicine;" and the very interesting article on the "Survey of the Cost of Medical Care" which was published in *Harper's Magazine* and very widely read by laymen as well as by the members of the medical profession, and which caused a tremendous amount of discussion. We must be sufficiently informed upon such controversial subjects. With the division in the medical ranks we must be able to see both sides of the question and be able to discuss this with some degree of understanding when the subject is presented.

FAIR PRICING OF PRESCRIPTIONS.*

BY EDWARD S. ROSE.¹

The primary reason for a state to license a registered pharmacist is his or her ability to properly fill the prescriptions of a licensed physician, dentist or veterinarian. Other requirements such as knowledge and ability to properly prepare or dispense official preparations and poisons would seem secondary to the filling of prescriptions, though of decided import to the patient as a matter of public health.

The training in a college of pharmacy may properly prepare one for the filling of a prescription but may not satisfy his mind as to the proper or fair price to ask for a prescription.

There are three essentials for conducting a successful prescription department, namely: *first*, an ethical and honorable means of attracting prescriptions to the pharmacy; *second*, the proper filling and packaging of the prescription; and *third*, a price for the prescription that is fair to the patient, the physician and the pharmacist. The writer wishes to confine his comments to the third essential.

Three charges should enter into the fair pricing of a prescription and when properly accounted for there does not seem to be any ethical or well-founded reason for additional charges. These charges are for materials, professional service and share of general store overhead, and if fairly arrived at can be justifiably defended before the customer, physician and the conscience of the dispensing pharmacist.

Many pharmacists are timid about pricing prescriptions; they are inclined to underestimate their professional standing and their responsibility to the public

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health of their community. Other pharmacists may over estimate their worth in too high charges for prescriptions, and a few are just naturally unscrupulous and ask exorbitant prices. Surely a necessary requisite for the dispensing pharmacist is to convince himself of his proper professional place in the community.

Some state that the price of an identical prescription should be the same within a small degree of variation, say 10 per cent, no matter where filled in the United States. Comparing a small town in Iowa and a large city, Philadelphia for the purpose of discussion, where the pharmacy of each place is conducted by a graduate as well as a licensed pharmacist, the price for the prescription, if properly filled, should be the same within a slight variation. The writer is somewhat in accord with that thought, for an identical prescription should have but one value and that should be a fair value. If there is a wide variation in the prices of an identical prescription filled in the two places mentioned, it can be as likely due to low pricing in the Iowa town as to a possible exorbitant pricing in a large city.

Should a prescription be considered as other articles of commerce which cost approximately the same price no matter where bought in the United States? Or, should an identical prescription have several values? No doubt the general public believes the price should be approximately the same no matter where filled.

Costs of material and container, if purchased from reputable manufacturers, are approximately the same; average overhead runs the same, namely 28 per cent, 16 per cent for labor and 12 per cent for general overhead; the other item that enters into the pricing of a prescription, namely, professional service, does vary with different localities due to the individual pharmacists setting different values for their services. If a proper and fair charge could be arrived at for this item of professional service, then it should follow that it is fair to assume that the price for an identical prescription should be approximately the same anywhere in the United States.

Just a word about additional charges made by some pharmacists because of small dosage, the patient's ability to pay more, transient business, larger cities, etc. If a prescription has already been fairly priced, the writer does not see the logic for these additional charges. If a pharmacist makes some reduction in the price of a prescription because of the patient's inability to pay, that should be considered a worthy charitable act.

Prices for filling prescriptions do vary greatly over the United States. The writer communicated with 75 pharmacies scattered over the country, who give special attention to their prescription departments, 65 of whom very graciously supplied information sought. Prices for eight typical prescriptions were asked for with the result of a total low pricing of \$9.10 and \$15.10 for the high, making a variation of 66 per cent based on the low pricing. Perhaps reason for this wide variation is the fact that 40 pharmacies of the 65 indicated that they used their own methods of pricing prescriptions.

The writer suggests that perhaps a method of pricing prescriptions that would give an average price would be a fair one to consider. With that thought in mind he wishes to present a method of pricing prescriptions which he originally read at the meeting of the Iowa Academy of Pharmacy held in Iowa City, Iowa, March 25th of this year. This method appeared in *Drug Topics* in the issue of August 8th.

The ideas for this method suggested themselves from the data collected in this survey of the 75 pharmacies.

Because of the many specialities and proprietaries prescribed by physicians, many of which are priced too high by the manufacturers, no simple set scheme could be devised that would appear fair to all concerned.

For compounded prescriptions a general scheme is applicable in most instances, but for specialities and proprietaries exceptions from the general scheme do seem advisable. In the cases of proprietary capsules, liquids, ointments, pills, powders, salts, suppositories, tablets that are high priced, if the cost is doubled and to it added other costs of dispensing, the final charge to the patient is too high and unfair. In the case of specialities and proprietaries that for various reasons are dispensed in the original packages, many of recognizable design, it is obviously inadvisable to double the cost of material. In the case of items such as the liver and vitamin products it appears advisable to make the charge somewhere near the Fair Trade price, otherwise the cost to the patient is excessive.

The writer wishes to briefly discuss a fair and proper charge for professional service. It is placed at \$3.00 an hour which is the amount agreed upon in most published methods of pricing prescriptions. This charge should be adequate in consideration of the many expenses the pharmacist is subjected to because of the prescription department, a few of which are: registration fee, narcotic license fee, alcohol permit fee, cost of required reports, necessary official books, certain special equipment and breakage thereof, prescription blanks, liability insurance, drug publications, membership in professional associations, the amortization of expense of obtaining professional training. A charge of \$3.00 an hour is not unfair, as it appears to the writer, no matter in what part of the United States the pharmacist may live.

The method for Fair Pricing of Prescriptions is as follows:

General Scheme.—Three charges: Materials, plus Professional Service, plus Overhead.

For Materials.—Double the cost of material and container, with a minimum of..... \$.10

For Professional Service.—Charge at the rate of \$3.00 an hour, with a minimum charge of..... \$.15

For Overhead.—A charge of 12 per cent of final price of prescriptions; to obtain it add one-eighth which is approximate; minimum charge of..... \$.10

Minimum price for a prescription is 35 cents; this amount was the average suggested in the survey.

Exceptions to the above General Scheme:

A. For high-priced specialities add 50 per cent to cost of materials:

If capsules, pills, tablets and the like, where they cost 5 cents or more each.

If liquids, ointments, powders, salts that cost 15 cents or more per ounce.

If suppositories that cost 10 cents or more each.

To the above charge for material add minimum professional service and overhead charges.

B. For broken packages of well-known specialities and proprietaries that do not come under Exception A, double the cost of material and container and add minimum professional service and overhead charges.

C. For original packages of well-known specialties and proprietaries add 50 per cent to the cost and add minimum professional service charge, if product is transferred to prescription container then it comes under Exception B.

D. In some instances such as liver and vitamin products, it is suggested to use Fair Trade prices and add minimum professional service charge.

Suggestions in connection with the above method of pricing:

Minimum cost of any single ingredient.....	2 cents
Minimum charge for container.....	5 cents

Base charges on the cost of the nearest sized package purchased of the material in question or package bought by the average pharmacy.

For cost of official and non-official preparations made by the individual pharmacist use the cost of a standard pharmaceutical house or double the cost of materials and add labor at \$1.50 per hour.

In measuring and weighing materials calculate as follows:

If liquids.....	15 ounces to the pint.
If solids.....	7 drams to the ounce,

and for smaller packages allow a 10 per cent loss.

Professional Service Charge.—For ready reference in compounding prescriptions the individual pharmacist may prepare a short schedule for capsules, ointments, powders, etc., or the following scheme is suggested as simple and dependable.

All classes of prescriptions to have a minimum charge of 15 cents for one ingredient; add 5 cents for each additional ingredient, and then add a filling-folding-mixing charge as follows: Capsules, 20 cents for each 12; liquids, 10 cents; ointments, 15 to 25 cents; powders, 25 cents for each 12; bulk powder, 15 cents; collyria, emulsions, infusions, suppositories and other time-consuming preparations, 10 cents and for the additional time in preparing charge at the rate of \$1.50 an hour. An example of Professional Service Charge for 12 capsules of two ingredients, 15 cents plus 5 plus 20, total 40 cents.

It is advisable to figure the price of every prescription and to do so in the prescription department. A good container and a clean package makes it easier to obtain a legitimate price for a prescription.

The fair pricing of prescriptions will bring about a friendly feeling between the patient, physician and dispensing pharmacist, and should result in a better prescription practice.

THE USE OF THE SEITZ FILTER.*

BY OLIVER W. YOUNG.¹

The Seitz germ proof filter is used to replace the Berkfield bacteriological filter. It has a place in modern Pharmacy, and all progressive pharmacists should know what it is and how to use it.

The filter has three main parts. The bottom is a circular piece of metal terminating in a metal tube the shape of a chemical funnel and has a removable wire mesh to support the filter disc. The disc is made up of fibrous material packed hard

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