

recognized and sponsored by the AMERICAN PHARMACEUTICAL ASSOCIATION for many years. In the ASSOCIATION, the need for adequate pharmacy laws was first recognized. The ASSOCIATION has long been the foremost champion of sound educational development. It has taken a distinguished part in the establishment and maintenance of high standards for medicinal preparations. It has been always devoted to the development of pharmacy as a potent force in public health. The ideals of this Conference can be no less than the ideals of the AMERICAN PHARMACEUTICAL ASSOCIATION. The ASSOCIATION's environment is peculiarly appropriate to the growth of the ideas which this Conference must nurture and develop.

Secretary Ford submitted his report which also included recent pharmaceutical legislation. Upon motion of Mr. Lemore, seconded by Mr. Funk, the report was accepted with the thanks of the Conference for the work involved.

REPORT OF THE SECRETARY.

BY M. N. FORD.

Since our last meeting, your Chairman has been quite busy directing the Secretary what to do for the good of the Conference.

The October 1930 issue of the JOURNAL, published an abstract of the minutes of our Baltimore meeting and by direction of Chairman Swain, we mailed on December 11, 1930, 282 reprints of the minutes of the Conference to all state board members and others interested in pharmaceutical law enforcement.

On March 6, 1931, the following letter and questionnaire were sent to all the state boards of pharmacy:

Columbus, Ohio, March 6, 1931.

DEAR MR. SECRETARY:

Chairman Swain of the Conference of Pharmaceutical Law Enforcement Officials, has requested me to collect information from all states as to what drugs and preparations may be sold by persons other than registered pharmacists.

In order to compile this important information for the Conference, I would kindly ask you to fill in the enclosed sheets the best you can, with any other information on the subject you deem necessary and return to me as soon as possible.

This being general legislative year, I would like for you to assume the responsibility of forwarding to me, copies of all bills introduced into your legislature having any reference to pharmacy, medicine or public health.

In behalf of the Conference, we shall appreciate your cooperation.

(Signed) M. N. FORD, Secretary.

STATE OF.....

1. What Department of State enforces the following laws:

- a. Pharmacy.....
- b. Poison.....
- c. Narcotic.....
- d. Pure Drug.....
- e. How many Inspectors employed for the above.....
- f. How many inspections were made during the year 1930 for the above.....
- g. How many prosecutions during the year 1930 for the above.....
- h. How many drug stores in the State.....

2. Do places other than Pharmacies sell Patent and Proprietary Medicines.....
3. Do places other than Pharmacies sell Drugs.....
4. Are such places required to have an annual permit or license.....
5. Make an X in front of the following that are not permitted to be sold except in a pharmacy under the supervision of a legally registered pharmacist. (Here followed a list of 200 drugs and medicinal preparations, similar to that in these Minutes of the survey by Dr. Robert P. Fischelis.)

We had a ready response to our request from most of the states and while some of the questionnaires were very incomplete, it gives us an idea as to the extent of pharmaceutical law enforcement in the different states.

Compilation of the result of the questionnaire has been undertaken and the results will show the seeming inactivity of some states in pharmaceutical law enforcement.

The first four questions of the questionnaire were answered as follows:

No. 1 A—	No.	Department of Registration	1
	States.	State Authorities	2
Board of Pharmacy	33	No report from	12
Board of Health	2		
Department of Agriculture	1	States.	No.
Department of Law Enforcement	3	No. 1 E-a	34 have 61
Department of Registration	1	b	34 have 55
Department of Licensing	1	c	34 have 44
No report from	11	d	34 have 51
			10 have no Inspectors
No. 1 B—	No.		8 made no report
	States.		
Board of Pharmacy	30		No.
Board of Health	2	States.	Inspections.
Department of Agriculture	2	No. 1 F-a	37 made 47,392
Department of Law Enforcement	3	b	37 made 45,248
Department of Registration	1	c	37 made 28,534
Department of Licensing	1	d	37 made 43,611
No report from	13		No report from 15 states.
No. 1 C—	No.		No.
	States.	States.	Prosecutions.
Board of Pharmacy	15	No. 1 G-a	34 made 749
Board of Health	5	b	34 made 418
Department of Agriculture	2	c	34 made 1351
Department of Law Enforcement	3	d	34 made 349
Department of Licensing	1		No report from 18 states.
State Narcotic Division	1		
State and Federal Authorities	11	States.	
Prohibition Commissioner	1	No. 1 H—	35 reported 42732 Drug Stores
County Attorney	1		17 made no report
No report from	12	No. 2	40 answered Yes
			12 made no report
No. 1 D—	No.	No. 3	30 answered Yes
	States.		10 answered No
Board of Pharmacy	11		12 made no report
Board of Health	12	No. 4	13 answered Yes
Department of Agriculture	11		25 answered No
Department of Law Enforcement	3		14 made no report

COMMENTS.

A total of forty questionnaires were returned and some of them were very incomplete, therefore, the result from the questionnaire is not what we expected it to be.

The States of Arkansas, Maine, Montana, District of Columbia and Alaska, did not return the questionnaire, but submitted letters of explanation in detail.

The States of Mississippi, Nevada, Rhode Island, Tennessee, Texas, Philippine Islands and Porto Rico, made no reply to our first and final requests.

We would call your attention to the answers given No. 1-*a-b-c* and *d*. The Pharmacy, Poison and Pure Drug laws are enforced in forty states by six different enforcement agencies, while the Narcotic Law is enforced by nine different departments. It is not difficult to determine from the questionnaire, what department has met with the greatest success during the past year in enforcement work. This is judged from the way the questionnaires were returned and answered.

We note 34 states have 61 inspectors for enforcing the pharmacy laws and 47,392 inspections were made in 37 states. This would indicate 3 states had some inspections without employing an inspector. With 61 inspectors and 47,392 inspections, there are only 749 prosecutions reported for violation of the pharmacy laws. This small number of prosecutions would seem to indicate the law is being quite generally complied with, or the inspectors are not doing their duty.

In comparing the number of inspections with the number of inspectors employed, we believe the number of inspections made should reach at least 125,000 instead of 47,392 as reported. To obtain this result however, would mean that the work would be done without political interference and with a desire of the inspectors to do their work.

In the Narcotic enforcement for nine different agencies, there are 44 inspectors employed and they have reported a total of 28,534 investigations with 1351 prosecutions. The Narcotic Law was violated almost twice as often as the combined laws of Pharmacy, Poison and Pure Drug, as reported in the 34 states.

We do not have the data as to who the Narcotic violators are, but comparing reports with that of the Pharmacy and Poison law violations, it would seem violators of the Narcotic Law are not within the drug stores.

Thirty-five states have reported 42,732 drug stores. This number is in proportion to the total number of stores reported in the United States.

The list of drugs and preparations named in question No. 5 total 200 and were selected for the purpose of showing how different the legal requirements are in the several states for the distribution of drugs, medicines and poisons.

You will note that one state has reported Patent and Proprietary Medicines must be confined to the drug store in that state, however, in question No. 2, the same state has indicated that Patent and Proprietary Medicines may be sold by places other than drug stores.

We note also that four states have indicated any U. S. P. drug or preparation must be confined to a drug store. In checking over that list, it will be noted that the same four states have marked U. S. P. drugs that may be sold in places other than pharmacies.

In question No. 3, we have 10 states reporting that no places other than pharmacies, may sell drugs, while the same 10 states have listed under question No. 5, a number of drugs that may be sold by any dealer.

For the above reasons the questionnaire has not furnished us with as complete information as was desired. In our letter to the Boards of Pharmacy, we requested copies of all bills introduced into the legislature, having any reference to Pharmacy, Medicine or Public Health. Complying with this request, we have received information from fifteen states, as follows:

**Connecticut.**—Two bills reported introduced, no copies furnished or titles mentioned.

**Iowa.**—One bill reported introduced and enacted into law. A bill relating to the practice of pharmacy and providing a penalty for violation thereof. The bill more clearly defines a pharmacy and makes both the proprietor of store and owner of a certificate, responsible for the proper display of same. It very boldly provides that all drugs and medicines sold, exposed or offered for sale shall be under the immediate personal supervision of a registered pharmacist at all times.—*Except for Temporary Absence Which Shall Mean Necessary Absence for Meals and Business or Other Necessary Cases While the Pharmacy Is Open for Business.* We believe a discussion on the question of exemptions would be of great interest to the Conference.

**Maryland.**—Your Chairman reports two bills introduced and passed. One to more clearly define a pharmacy and the other to provide for stricter requirements to the examinations and

eliminating the assistant pharmacist examinations. We think the state of Maryland has a wonderful definition for a Pharmacy and we want to quote that section of their law which is as follows:

"Every store or shop or other place where drugs, medicines or medicinal chemicals are dispensed or sold at retail, or displayed for sale at retail, or where physicians' prescriptions are compounded, or which has upon it or displayed within it or affixed to or used in connection with it, a sign bearing the word or words, "Pharmacist," "Pharmacy," "Apothecary," "Drug Store," "Druggist," "Drugs," "Medicines," "Medicine Store," "Drug Sundries," "Remedies" or any word or words of similar or like import, or where the characteristic show bottles or globes filled with colored liquids or otherwise colored, are exhibited or any store or shop or other place, with respect to which any of the above words are used in any advertisement, shall be considered a pharmacy within the meaning of this sub-title."

Now that is one fine definition for a pharmacy, but remember, the state of Maryland was very liberal in their exemptions for they provide the section shall not interfere with the sale by general merchants of patent or proprietary medicines and household or domestic remedies.

**Maine.**—Two bills reported introduced. One is a pre-requisite bill and provides for annual registration of pharmacies and increasing the examination fee. The other bill is to amend the Narcotic Act. No copies of bills received and no report as to disposition.

**Montana.**—One bill reported introduced. We were not furnished a copy of the bill and have no report as to final disposition. I understand it is sort of a restrictive sales bill.

**Missouri.**—A prerequisite bill was reported introduced.

**New Hampshire.**—One bill reported introduced to place the enforcement of the Narcotic Law with the Board of Pharmacy. No copy of bill or report of disposition.

**New Jersey.**—Two bills were introduced and both failed to pass. One bill proposed to penalize the manufacturer, wholesaler or other dealer in drugs, medicines or poisons who sells such products to general merchants for resale with full knowledge that it is unlawful for the general merchant to sell them under the Pharmacy Act.

The other bill provided for the annual registration of Pharmacies and more clearly defined a Drug Store or Pharmacy. Both bills had the support of the State Association and the Board of Pharmacy.

**Ohio.**—No legislation was attempted by the profession. One bill was enacted into law providing for proper labeling of caustic acids and alkalies or corrosive substances

A bill was introduced to deny the Ohio State Pharmaceutical Association the privilege of recommending five names each year to the Governor for appointment of one on the Board of Pharmacy. The bill received no consideration except to stay with the committee to which it was referred. The bill is said to have originated from a grocers' association.

Bills were introduced for amendment to the Narcotic Law, the statute controlling radiator alcohol and the prohibition law, all of which were defeated. The only legislation enacted affecting the druggist was a tax on cigarettes.

**New York.**—Two bills were introduced; one to restrict the sale of Barbituric Acid and the other to restrict to registered pharmacists for resale, all United States Pharmacopoeia or National Formulary Preparations. Copies of bills were furnished, but we have no report as to final disposition.

**North Dakota.**—A bill to license general dealers to sell drugs when more than five miles from a pharmacy, was passed. The act provides the Board of Pharmacy shall from time to time add to or eliminate from the approved list of simple household remedies that may be sold by general dealers.

**Oklahoma.**—One bill was introduced and killed in the House of Representatives. It provided for registration of all who had been duly licensed by the governing board of pharmacy of the State of Oklahoma and provided for general reciprocity.

**South Dakota.**—One bill was passed to provide for annual registration of Drug Stores, at a fee of ten dollars and effective July 1, 1931; it also regulates the ownership of Pharmacies and prescribes penalties for violations.

Another bill provides for graduation from a four-year pharmacy course with one-year drug store experience for admission to State Board examinations.

**Washington.**—Nineteen bills were introduced having some reference to pharmacy, medicine or public health. Six of these bills were pertaining to pharmacy and the only one passed that did not receive the Governor's veto was a bill relating to registration of pharmacists and assistant pharmacists, by providing for a minimum two-year course from a College of Pharmacy, approved by the Director of Licenses.

The Washington Legislature also passed two Narcotic bills that failed to escape the Governor's veto; the bills provided for the regulation and distribution of narcotic drugs and proposed commitment of drug addicts for treatment and by appropriating \$100,000.00 to carry on the rehabilitation work.

The state of Washington was the only state that gave us a complete report by sending copies of bills and reporting final action on same.

**West Virginia.**—This state reports plenty legislation has been introduced, but happily none has passed. No bills have been furnished and we cannot report what the legislation was about, except for one bill to regulate the sale of barbiturates which will probably pass.

Legislation was attempted in 17 other states from which we have had no report.

All correspondence in behalf of the Conference has been properly taken care of during the year and copies filed for future reference.

Respectfully submitted,  
M. N. FORD, *Secretary*.

#### REPORT OF THE TREASURER.

As a result of the good work of your Finance Committee, Messrs. Robert P. Fischelis of New Jersey, C. T. Gilbert of Connecticut, and F. H. King of Ohio, we have received the following contributions of \$5.00 each, making a total of \$190.00 from the following States: Ohio, Maine, North Carolina, Pennsylvania, West Virginia, Connecticut, New Hampshire, Missouri, New Jersey, Kansas, Indiana, Idaho, Kentucky, Arizona, North Dakota, New York, New Mexico, Maryland, Montana, Oklahoma, Tennessee, Wisconsin, Delaware, Colorado, Iowa, Oregon, Michigan, Vermont, Virginia, Arkansas, Alabama, Florida, Georgia, District of Columbia, South Dakota, South Carolina, Minnesota, Nevada.

Total disbursements \$23.62; leaving a cash balance on hand July 30, 1931 of \$166.38.

M. N. FORD, *Treasurer*.

C. T. Gilbert, Chairman of the Finance Committee, submitted the report of the Committee. Upon motion of Mr. Funk, seconded by Mr. Jones, the report was accepted and ordered printed. The report follows:

#### REPORT OF THE FINANCE COMMITTEE.

Your Committee appointed to solicit contributions of \$5.00 each from the various Boards of Pharmacy, to provide a fund for carrying on the activities of this organization, begs leave to report as follows:

On June 20, 1930, we sent to every Board member listed in the National Association of Boards of Pharmacy Proceedings a letter calling attention to the work of this Conference. We suggested that each Board make a contribution of \$5.00 from its regular funds to sustain the work of the Conference, and if this was not possible under the rules of the Board, we suggested that the individual members each contribute a sufficient sum to bring the contribution of their Board to \$5.00.

By October 1930, we had received contributions of \$5.00 from twenty-three states.

On November 20, 1930, we sent a follow-up letter to the Secretaries of the twenty-six Boards which had not responded to the first letter. Eight additional contributions of \$5.00 were received as a result of this letter.

On May 18, 1931, we sent a third communication to the eighteen Boards that had not yet contributed, and five additional contributions of \$5.00 were received as a result of this letter.

This gives a total of thirty-six contributions of \$5.00, or \$180.00, and leaves thirteen Boards who have ignored our requests for assistance. Of the thirteen, only one Board refused point-blank to make a contribution, and their argument was based on the fact that we have

already too many associations in the field, and that another organization to carry on the work that this body has been doing is unnecessary.

While we regret that we are unable to report one hundred per cent coöperation, we feel that the voluntary contributions amounting to \$180.00, and representing almost three-fourths of the Boards of Pharmacy of the United States, are an indication that the work of this Conference has been of value and that its future efforts are looked forward to with interest.

Respectfully submitted,  
C. T. GILBERT  
F. H. KING  
ROBERT P. FISCHELIS.

Upon motion of Mr. Bingham, seconded by Mr. Funk, the Committee on Finance was to be continued.

In the absence of Mr. Winne, his paper on Practical Benefits from Annual Registration was read by Mr. Rowland Jones. The paper was discussed by Messrs. Walton, Hankins, Bingham, Mather, Gilbert, Dargavel and Ford. Upon motion duly seconded, the paper was referred for publication.

#### PRACTICAL BENEFITS FROM ANNUAL REGISTRATION.

BY A. L. I. WINNE, SECRETARY, VIRGINIA BOARD OF PHAMMACY.

The first thought that occurs with reference to the annual registration of pharmacists and pharmacies by boards of pharmacy is probably that of its revenue-producing angle. That is an important slant to most boards in states in which the annual re-registration is in practice. It is an important feature in my own state of Virginia. There we work under a budgetary system, and the board of pharmacy is allotted a fixed sum upon which to operate, yet we are expected to be approximately self-supporting. Our fees for examinations, reciprocity and annual re-registration constitute the bulk of our income. So, the annual registration is of importance to us from that viewpoint.

There are other considerations, however, to the annual registration of pharmacists, assistants, pharmacies or any other class in a state where registrations may be required. We have found the system valuable in getting at least a check on the men registered in the state, many of whom will have had a change of address during the year. We have a peculiar law in Virginia that requires the applicant for any sort of a license, and pharmacy annual registration is a mere form of licensure, to have paid his poll tax in the state for the year next preceding the last tax year, if it was assessable against him for that year. That brings in revenue to the state, indirectly, of course, and not through the board of pharmacy, but nevertheless into the state's treasury. Not many states have such a provision.

We have in Virginia a system of registering the pharmacies as well as the men who practice in them. This also brings in some revenue, but aside from that is a valuable feature of board administrative work. In order for a pharmacy to secure a permit to operate for the calendar year a permit must be obtained by filing an application in which is set forth under oath the name of the store, its location, its ownership, the name of the registered pharmacist in charge and the names of any other pharmacists or assistants employed in that store. The hours the place is customarily open for business are set forth and the hours the several pharmacists are on duty. There is a variety of circumstances stated, but ordinarily, where two or more pharmacists are employed they will be shown to alternate in the usual manner. In the one-man stores the pharmacist must show that he is on duty such hours as his place of business is open for business. He does not get a permit until he subscribes to this under oath. If he fails to take out a permit he is subject to fine for operating without a permit. We find sometimes that the pharmacist, in order to get a permit, compromises with his conscience and stretches his statements. But it is nevertheless impressive in most instances when a man deliberately fills in a statement and goes before a public notary and states that it is the truth, and further that it may be checked up on him, and that he may be confronted in court with the document that he has subscribed to, he having fixed his own hours of his own free will. It is embarrassing to the pharmacist when this is done, and they have a hard time explaining how they came to "slip a cog."

This system is very valuable to us for another reason. No person, registered or otherwise, may engage in the drug business until they have received a permit. The pharmacist acts on