

ASHP Guidelines for Pharmacists on the Activities of Vendors' Representatives in Organized Health Care Systems

For purposes of this document, vendors' representatives are defined as agents who promote products and provide information and services to health care providers on behalf of manufacturers and suppliers. The narrow focus of this document is on those vendors who serve and interact with settings with respect to drug products, drug-related devices, and other equipment, supplies, and services purchased by pharmacies.

Each individual setting should develop its own specific policies and procedures relating to the activities of vendors' representatives. Such policies and procedures should supplement and complement applicable federal, state, and local laws and regulations (for example, statutes that address prescription drug-product sampling). The ASHP Guidelines on Pharmacists' Relationships with Industry, the ASHP Guidelines for Selecting Pharmaceutical Manufacturers and Suppliers, and setting-specific conflict-of-interest policies may be helpful in the development of policies and procedures.^{1,2} The policies and procedures should be developed by the setting's pharmacy and therapeutics committee (or equivalent body) and approved by higher authorities in the setting as required. Depending on the individual setting, policies and procedures may be useful in the following areas.

1. *A defined scope of applicability.* The vendors' representatives to which any policies and procedures apply should be defined by the individual setting. For example, if the policies and procedures are applicable only to drug-product vendors' representatives and not to those promoting medical–surgical supplies, packaging equipment, or drug administration devices, this should be clearly stated.
2. *Orientation of representatives.* In some individual settings, vendors' representatives receive an orientation packet upon their initial visit to the setting. Such a packet might contain a copy of the setting's policies and procedures, a medical staff directory, and the formulary. Some settings provide a formal orientation program that includes meeting key individuals and touring the setting.
3. *Directory.* In some individual settings, a file of current vendor-contact information is maintained in the pharmacy. A form for recording such information might include the following:
 - The vendor's name and address;
 - The name, address, telephone number, and answering service number (if any), and drug-product assignment (purview) of each representative;
 - The name, address, and telephone number of the representative's manager;
 - The names, telephone numbers, and emergency telephone numbers of the vendor's directors of distribution, sales, and product information (titles may vary); and
 - The names and telephone numbers of the vendor's medical director and research director (titles may vary).
4. *Availability of vendor-contact information to professionals in the setting.* In some individual settings, the pharmacy department provides the setting's professional staff with the information in item 3, upon request.
5. *Registration while on premises.* In some individual settings, vendors' representatives register with the pharmacy department or other designated department upon each visit to the setting. At such time, the vendors' representatives document the time, purpose, and location of their appointments. In many settings, during the registration process, the representative is provided with a dated name badge to be prominently worn along with the representative's current vendor-supplied name tag (if any).
6. *Locations permitted.* In some individual settings, restriction (if any) from patient care and pharmacy storage and work areas in the setting are specified in the policies and procedures. Meetings with professional staff are conducted in areas convenient to staff and generally in non-patient-care areas.
7. *Appointments and purposes.* In some individual settings, representatives are encouraged to schedule appointments with appropriate pharmacy department staff to
 - Provide information useful for product evaluation. Representatives might be asked to include balanced scientific literature (journal reprints, for example) on drug-product safety and efficacy, as well as documentation of likely cost benefits.
 - Provide timely information on the vendor's products and services.
 - Facilitate procurement and crediting transactions.
 - Obtain and provide information necessary to support the setting's formulary system.
 - Facilitate informational activities for the pharmacy staff and other health care professionals with respect to the vendor's products.
8. *Exhibits.* In some individual settings, the pharmacy department provides opportunities for vendors' representatives to distribute informational material by arranging for organized, scheduled exhibits. Policies and procedures about the times, places, content, and conduct of such events are established.
9. *Dissemination of promotional materials.* In some individual settings, there are policies and procedures about the dissemination (by vendors' representatives) of information on formulary and nonformulary products, including the designation of appropriate categories of recipients of the information (e.g., attending physicians, department chairmen, house staff physicians). Representatives may be asked to promptly provide the pharmacy department with copies of all informational and promotional materials disseminated in the setting. The Food and Drug Administration (FDA) prohibits

the advertising and promotion of drug products for uses not reflected in FDA-approved product labeling (“unlabeled uses”).³ Pharmacists and other health care professionals should be aware of these laws and regulations when evaluating the content of promotional materials.

10. *Samples.* In some individual settings, there are policies and procedures with respect to product samples. ASHP urges that the use of drug samples within the institution be eliminated to the extent possible.^{4,5}
11. *Noncompliance.* In some individual settings, policies and procedures exist to address noncompliance with the policies and procedures by either vendors’ representatives or professional staff.

Each setting should have policies and procedures concerning research to be conducted on its premises. Pharmacists and vendors’ representatives should clearly differentiate research from sales and promotional activities, applying appropriate policies and procedures accordingly.⁶ Generally, scientific research involving drug products is coordinated through research departments of product manufacturers rather than through sales and promotional representatives.

References

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4. American Society of Hospital Pharmacists. ASHP guidelines: minimum standard for pharmacies in institutions. *Am J Hosp Pharm.* 1985; 42:372–5.
5. Greenberg RB. The Prescription Drug Marketing Act of 1987. *Am J Hosp Pharm.* 1988; 45:2118–26.
6. American Society of Hospital Pharmacists. ASHP guidelines for pharmaceutical research in organized health-care settings. *Am J Hosp Pharm.* 1989; 46:129–30.

This guideline was reviewed in 1998 by the Council on Professional Affairs and by the ASHP Board of Directors and was found to still be appropriate.

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