Organizing a pharmacy to improve its efficiency can have very much the same effect that automating a pharmacy has on its efficiency.   Organizing the drug stock is one area where this is especially true and can save as much time and effort as partial automation can in preparing scripts.Simply adding a free standing cabinet or a wall mounted cabinet located immediately adjacent to the pill counting workstation(s) that is capable of storing the top 200 most popular drugs (which are counted) can reduce the overall time spent filling scripts by a significant amount. Is this too good to be true?

If the top 200 drugs account for 50% to 60% of scripts filled by pill counting (and they typically do), and the time spent filling those scripts can be reduced by time savings in fetching and returning the supply bottles to and from the primary drug storage location, significant savings can be achieved. A typical pharmacy may have 1500 drugs in its active formulary and 1300 will remain in the primary storage location.

Most non-robotic forms of pill counting automation produce counting times of approximately 20 to 25 seconds for most scripts, with large time savings compared to manual counting coming on scripts with higher pill counts (like 60 or 90). This time does not include the time spent in fetching and returning the supply bottle, which is typically in the 15 to 30 second range (and produces tired legs, aching backs, and sore feet). There are, however, some problems to be solved.

The script sheet must contain information which tells the person responsible for fetching the drug where the drug is located. The PMS (Pharmacy Management System) usually handles this chore as part of its basic capability. The drugs must be arranged on the shelves so that they are easily found (most often alphabetically) and returned. If there are multiple workstations for pill counting a system for indicating that a supply bottle is in use must be established (frequently a marker of some sort). The PMS usually deals with out of stack situations.

There are modern cabinets where LED lights are used to indicate the location of a drug that is required for a script and where a drug should be returned. These cabinets all require some sort of an interface into the PMS. The software can be expensive if the system was not designed for the required function.

It may seem strange that a pharmacy can improve its pill counting efficiency by something like

25% by simply relocating the top 200 drugs in its active drug formulary so that they are easily available at the pill counting workstation(s). The bang for the buck is large and the effort is small.