

March 19, 2013

**VIA ELECTRONIC MAIL & FAX**

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Matter Case No. M-2013-19:

Dear Patrick:

I am writing on behalf of and as counsel for Amro Saadi Abu-Hallawah.

Mr. Abu-Hallawah is a pharmacist at Fred Myer pharmacy in Tacoma, Washington. He has been so for more than four years.

I am writing to ask that the matter of Mr. Abu-Hallawah involving patient counseling for a veterinary prescription which is proposed for informal disposition, including a probationary sanction and surrender of preceptor registration, and which would be reported to the professional data banks<sup>1</sup> be reconsidered, and that Mr. Abu-Hallawah be allowed to voluntarily perform any acts requested by the Board, including supplemental CME directed towards veterinary medications, as a means of bringing this matter to just cloture. I make this request cognizant of the discretion of the Board of Pharmacy and its concern for due patient care.

I make this request for a number of reasons.

First, there are collateral consequences that such a disposition would present which are unique to Mr. Abu-Hallawah. Mr. Abu-Hallawah, 31 years of age, is a native and citizen of the country of Jordan who is here with his wife and two children as a professional worker

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<sup>1</sup> Health Integrity and Protection Databank (45 CFR Part 61) and National Practitioner Databank (45 CFR Part 60).

Mr. Patrick Hanley  
<March 19, 2013>  
Page 2

in H-1B status approved by U.S. Citizenship and Immigration Services, sponsored by his employer, Fred Meyer.

Any negative conditions placed on Mr. Abu-Hallawah's pharmaceutical license, including probationary status reported by databanks, could trigger re-assessment of his immigration status and result in revocation of his current H-1B status as a foreign professional worker in the United States. H-1B status is reserved for "specialty occupation" workers employed in U.S. occupations which require a bachelor's degree or higher. For occupations which require U.S. practitioners to possess a State or local license, such as Mr. Abu-Hallawah's job as a pharmacist, 8 CFR § 214.2(h)(4)(v)(A) dictates that the foreign worker must possess the required unrestricted license to be qualified for H-1B status. If restriction occurs, 8 CFR § 214.2(h)(11)(i)(A) provides that a reporting requirement to the U.S. Department of Homeland Security (DHS) may result. Any negative repercussions affecting an H-1B pharmacist's license can be interpreted by DHS as a "material change" in H-1B eligibility pursuant to 8 CFR § 214.2(h)(2)(i)(E). Adverse action or negative conditions placed on an H-1B worker's license can trigger proceedings which may result in revocation of the worker's H-1B status, as well as revocation of the H-4 status of all his dependent family members in the United States. This would be an extraordinary penalty considering the events at issue.

Second, and equally important, I believe the merits of this matter would support a lesser disposition.

The facts of the matter are not really in dispute. Mr. Abu-Hallawah received a prescription for Diazepam for a canine. The prescription issued by a veterinarian prescribed a dose of 20-40 mg every 8 hours as needed for anxiety.

As the statement by Mr. Abu-Hallawah indicates, as part of his patient consultation, he discussed the prescription with the owner of the dog. He indicated that the dose would be high for humans, but that he did not have available to him precise dosing standards for pets. Mr. Abu-Hallawah knew that dogs have a higher metabolism. He tried to call the veterinarian but received no response due to the late hour. He told the patient to follow the dosing instruction provided by the veterinarian, as he believed it would be safe to follow the veterinarian's dosing, but to telephone the doctor in the morning to confirm the dosage. He also left an instruction for the morning pharmacist to call the veterinarian. The next day, Mr. Abu-Hallawah spoke to the doctor who confirmed the appropriateness of the dosage. Mr. Abu-Hallawah also told the patient that a risk of overdose was respiratory failure. This is accurate and was appropriately conveyed by Mr. Abu-Hallawah to the patient. Mr. Abu-Hallawah never told the owner to use a lesser dose or that the subject dose would "kill the dog". Nor did he tell the owner that the doctor's prescription was "inaccurate". He told the owner to follow the dose but to also call the veterinarian and that the pharmacy would as well. In other words, he never countermanded the dosing instruction of the veterinarian, or suggested that a lower dose be used, he simply expressed to the patient it was a high dose for

Mr. Patrick Hanley  
<March 19, 2013>  
Page 3

humans, and that he did not have the dosing standards for canines, and urged further contact with the veterinarian.

Clearly, the pharmacist has a duty to counsel the patient. That is what is provided for by WAC 246-869-220. The rule does not specify the degree of counseling that is required, and rather, leaves it to the pharmacist's due discretion. In pertinent part, the rule provides:

(3) For each patient, the pharmacist shall determine the amount of counseling that is reasonable and necessary under the circumstance to promote safe and effective administration of medication and to facilitate an appropriate therapeutic outcome for that patient from the prescription.

This is what occurred in this instance.

Mr. Abu-Hallawah is a conscientious, well-intentioned pharmacist. He was trying to do his best to protect and advise the patient. We acknowledge that it would have been better had Fred Meyer had the dosing standards for animals readily available, but it was not. As an aftermath of this event, Fred Meyer has considered the issue and provided additional instruction to staff pharmacists and also placed an icon link on the computer screens making such information immediately accessible.

This matter, if it proceeds in its current posture, will visit undue consequence upon Mr. Abu-Hallawah and constitute a threat to his continued status and his vocation. Surely, considering the nature of the underlying matter and facts, it can be addressed in some way that does not create such hazard.

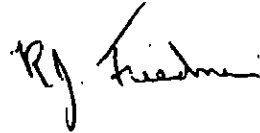
Everything in life is a learning experience. Mr. Abu-Hallawah certainly has learned, and the chain pharmacy's protocols have changed as a result. This is what we want to happen. As to Mr. Abu-Hallawah, we respectfully propose that disposition be deferred and that he voluntarily complete 16 hours of CME (4 times the amount currently required by the stipulation) in the area of veterinary care and counseling. In addition, we propose that he write an open letter for publication by the Washington State Pharmacy Association advising pharmacies of the need to have animal dosing standards available, as counsel's survey of several area pharmacies who dispense veterinary medicines revealed they do not have such compendia. We believe this is a fair and balanced result.

I thank you for the opportunity to present this matter for discussion, and look forward to having additional conversation. And I thank you and the Board in advance for your further consideration of this matter.

Mr. Patrick Hanley  
<March 19, 2013>  
Page 4

Very truly yours,

LANE POWELL PC

A handwritten signature in black ink, appearing to read "R.J. Friedman". The signature is written in a cursive style with a prominent initial "R".

Ronald J. Friedman

RJF:jle

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