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LCHC is a project of the Tides Center,  
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501(c)(3) and 509(a)(1) of the Internal  
Revenue Code.

**Kenneth H. Schell, PharmD**  
President  
California Board of Pharmacy  
1625 N Market Blvd, N219  
Sacramento, CA 95834

**RE: California Code of Regulations Section 1707.5 Relating to Patient-Centered  
Prescription Container Labels**

Dear Dr. Schell and Members of the California Board of Pharmacy:

Since 1992, the Latino Coalition for a Healthy California (LCHC) has been a major voice for improving and protecting the health of all Californians. As the leading voice on Latino health, we have assisted decision-makers throughout the state to develop policies, services and the social, economic, and environmental conditions that improve the health of Latinos.

In 2007 LCHC sponsored SB 472 (Corbett) to ensure that prescription labels would be designed in a manner appropriate to the diverse cultural and linguistic landscape of California and thereby aid in, *“reducing medication-related errors and increasing health care literacy regarding prescription drugs and prescription container labeling, which can increase consumer protection and improve the health, safety, and well-being of consumers.”* We applaud the work done by the Board thus far to meet the objectives and requirements of SB 472. It is in this spirit that we offer the following comments.

With regard to §1707.5 (b), requiring the publication of translations of directions for use on the Board’s website in “at least five languages other than English”, we would offer the following: translations should be available on the Board website in all Medi-Cal Managed Care threshold languages. This would apply to § 1707.5 (c) as well; exemplars of complying labels should be provided in these threshold languages. This is necessary to provide the greatest assistance to California’s pharmacists as it takes into consideration regional differences in language diversity.

Section 1707.5(a)(1) provides that certain information be printed in no less than 12 point font. We recommend that each information category be given a value in accordance with its importance, and the font size should reflect this value. For example, the name of the medication could be in 14 point bold, instructions (including others specified in this subsection), in 12 point, and non specified less important information could be in 10 point standard or bold. Space on each label is limited given the constraints of the dimensions of each bottle. Every effort should be made to ensure that the most important information is made the most

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visible. As well, care should be taken in deciding which sans serif font is used as not all 12 point fonts read alike.

The people of California deserve to have a prescription labeling policy that addresses their diversity and recognizes that everyone deserves the opportunity to understand what they are putting into their bodies. It is regulations like this that will help to protect consumers from unnecessary labeling mistakes or misunderstandings due to linguistically inappropriate labeling.

If you have any questions about these comments, please do not hesitate to contact our policy analyst Mr. Chad Silva at (916) 448 3234, Extension 12.

Very truly yours,

A handwritten signature in black ink, appearing to read "Al Hernandez-Santana". The signature is fluid and cursive, with the first name "Al" being particularly prominent.

Al Hernandez-Santana  
Executive Director, Latino Coalition for a Healthy California

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