



# Prescription Regulations

A synopsis of federal and provincial laws and regulations governing the distribution of drugs by prescription in British Columbia

CLASSIFICATION	DESCRIPTION	PRESCRIPTION REQUIREMENTS	REFILLS	SALES RECORD	FILES AND RECORDS
<b>Narcotic Drug *</b> Examples: Cesamet, Codeine, Codeine Syrup, Darvon-N, Demerol, Dilaudid, Duragesic, Empracet-30, Frosst 642, Hycomine, Ketamine, Lomotil, Marinol, Morphine, Nabilone, Novahistex-DH, Percocet, Percodan, Talwin, Tussionex, Tylenol No.4, Tylenol with Codeine Elixir.	All single-entity narcotics. All narcotics for parenteral use. All narcotic compounds containing more than one narcotic drug. All narcotic compounds containing less than two other non-narcotic ingredients in a therapeutic dose. All products containing hydrocodone, methadone, oxycodone or pentazocine.	Written or faxed prescription, signed and dated by physician, dentist or veterinarian.  Prescription must include components detailed immediately below.  <b>Note:</b> Schedule 1A drugs cannot be faxed. (exception: licensed facilities)	No refills allowed. All "re-orders" must be new written prescriptions.  Written "part-fill" instruction can be included, specifying the total prescription quantity plus the interval between each "part-fill."  Transfer of "part-fills" and undispensed prescriptions are not permitted.	All prescription sales (except those for dextropropoxyphene) must be recorded in a register or a computer-printed report. The register or computer-printed report must be current and kept for at least three years.	<ol style="list-style-type: none"> <li>Narcotic and controlled drug purchases must be recorded in a book or register and be readily available.</li> <li>Prescriptions for narcotics, controlled drugs and preparations of either may be filed together, but must be separated from all other prescriptions.</li> </ol>
<b>Verbal Prescription Narcotic Drug</b> Examples: Coactifed, Cotridin, Dimetapp C, 282 and 292, Fiorinal C ¼, Fiorinal C ¼, Tylenol No.2 and No.3.	A combination for other than parenteral use containing only one narcotic drug plus two (or more) non-narcotic drugs in a therapeutic dose, except products containing hydrocodone, methadone, oxycodone or pentazocine.	Written, verbal or faxed prescription by physician, dentist or veterinarian.  All prescriptions must include: <ul style="list-style-type: none"> <li>Patient's name, initials, address</li> <li>Prescriber's name, initials, address</li> <li>Name, quantity, strength and form of drug(s)</li> <li>Complete directions for use</li> <li>Date of prescription</li> <li>Date of dispensing</li> </ul>	No refills allowed. All "re-orders" (written or verbal) must be new prescriptions.  Written or verbal "part-fill" instruction can be included, as noted above.  Transfer of "part-fills" and undispensed prescriptions are not permitted.	Prescription sales need not be recorded in a register or computer-printed report, except when an emergency supply is provided to another pharmacist.	<ol style="list-style-type: none"> <li>All prescriptions, whether in writing from the prescriber or received verbally and recorded by the pharmacist, must be filed in sequence according to date and prescription number.</li> <li>All prescriptions must be kept for at least three years from the date that it was last dispensed.</li> <li>All dispensed prescription medication and authorized refills must be recorded on a patient medication profile for each patient.</li> </ol>
<b>Controlled Drug Part 1 *</b> Examples: Dexedrine, Ritalin, Concerta.	Amphetamines and their salts and derivatives, methaqualone, methylphenidate, phendimetrazine, phenmetrazine, pentobarbital, secobarbital.	<ul style="list-style-type: none"> <li>The prescription record of verbal prescriptions must include the identification of both receiving and dispensing pharmacists, if different.</li> </ul>	No refills allowed if original prescription is verbal, however part-fills are allowed.  If written, the original prescription may be refilled if the prescriber has indicated in writing the number of times and interval between refills.  Transfer of undispensed prescriptions and authorized refills are not permitted.  "Refill PRN" is not an acceptable authority for refilling a prescription.	All prescription sales must be recorded in a register or computer-printed report. Register must be current and kept for at least three years.	<ol style="list-style-type: none"> <li>For refills, an additional log or hardcopy bearing the hand-written initials of the pharmacist(s) is required.</li> <li>Each dispensing of a narcotic and control drug part-fill must show the prescription number, date, amount dispensed and the pharmacist's hand written initials.</li> </ol>
<b>Controlled Drug Preparation Part 1</b>	Combination containing only one controlled drug listed immediately above plus one (or more) active non-controlled non-narcotic drug(s).	A pharmacist may receive verbal prescription authorizations either directly from a practitioner or from a practitioner's recorded voice message.	Refills may be authorized on original written or verbal prescription and must indicate the specific number of times and interval between refills.  Transfer of undispensed prescriptions and authorized refills are not permitted.  "Refill PRN" is not an acceptable authority for refilling a prescription.	Prescription sales need not be recorded in a register or computer-printed report, except when an emergency supply is provided to another pharmacist.	<ol style="list-style-type: none"> <li>For methadone prescriptions, all part-fill documentation must be recorded on the back of the original prescription. The methadone part-fill accountability log which the patient and pharmacist both sign at each part-fill may be used for this purpose. If the accountability log is used, a "paper trail" copy of the part-fill must be filed in the daily file.</li> </ol>
<b>Controlled Drug Part 2 *</b> Examples: Nubain, Phenobarbital.	Barbiturates and their salts and derivatives (except pentobarbital and secobarbital), butorphanol, chlorphentermine, diethylpropion, nalbuphine, phentermine, thiobarbituric acid.		Requests for refills beyond those originally authorized necessitate the initiation of a new prescription.		<ol style="list-style-type: none"> <li>For all other narcotic and control drug prescriptions, the part-fills do not have to be on the back of the original prescription provided that the software program allows tracking between the part-fills and the original prescription. A "paper trail" copy of the part-fill prescription must be created and filed on the date of dispensing the part-fill.</li> </ol>
<b>Controlled Drug Preparation Part 2 *</b> Examples: Fiorinal, Tecnal, Bellergal Spacetabs.	Combination containing only one controlled drug listed immediately above plus one (or more) active non-controlled non-narcotic drug(s).				
<b>Controlled Drug Part 3</b> Examples: Andriol, Androderm, Androgel, Delatestryl Injection, Depotestosterone.	Anabolic steroids and zeranol.				

Revised April 2010

\* Some (but not all) products in this category may also be included in the list of drugs monitored by the Controlled Prescription Program (CPP), the requirements for which exceed the requirements for this classification.



# Prescription Regulations

CLASSIFICATION	DESCRIPTION	PRESCRIPTION REQUIREMENTS	REFILLS	SALES RECORD	FILES AND RECORDS
<b>Targeted Drug Substances (Part 1)</b>	All benzodiazepines, their salts and derivatives (but not including clonazepam, flunitrazepam, olanzapine), clonazepam, ethchlorvynol, ethinamate, fencamfamin, fenproporex, mazindol, mefenorex, meprobamate, methyprylon, pipradol.	Written, verbal or faxed prescription by physician, dentist or veterinarian.  Podiatrists may prescribe benzodiazepines.  Requirements of a prescription as on page one.	Refills may be authorized on original written or verbal prescription and must indicate the specific number of times and interval between refills.  Transfer of authorized refills is only permitted once in the lifetime of the prescription.  "Refill PRN" is not an acceptable authority for refilling a prescription.  Requests for refills beyond those originally authorized necessitate the initiation of a new prescription.	Prescription sales need not be recorded in a register or computer-printed report, except when an emergency supply is provided to another pharmacist.	Same as point 1, 3, 4, 5 and 6 on page 1.  Prescriptions for targeted drug substances are filed with the Schedule F prescriptions.
<b>Other Prescription Drugs (Schedule F)</b>	All other drugs listed as Schedule I in the <i>Drug Schedules Regulation</i> to the <i>Pharmacy Operations and Drug Scheduling Act</i> (which contains all drugs in Schedule F to the Regulations to the <i>Food and Drugs Act of Canada</i> , plus a number of others).	Written, verbal or faxed prescription by physician, dentist, veterinarian, podiatrist, nurse practitioner (within scope) or midwife (limited schedule for midwives)  Requirements of a prescription as on page one.	Refills may be authorized on original written or verbal prescriptions and must indicate the specific number of times and interval between refills.  "Refill PRN" is not an acceptable authority for refilling a prescription.	Prescription sales need not be recorded.	Same as points 3, 4, 5 and 6 on page 1.
<b>Controlled Prescription Program (CPP) Drugs</b>	All drugs listed as Schedule 1A in the <i>Drug Schedules Regulation</i> to the <i>Pharmacy Operations and Drug Scheduling Act</i> .	Written prescription on an approved two-part form.  Fax transmission is not allowed in community pharmacies (exception: licensed facilities)  More than one medication or strength of medication can be included on one Controlled Prescription Program form, provided the orders are legible.  The prescription expires after midnight of the fifth day following the date of issuance by the prescriber, unless the prescription is for methadone.	No refills permitted.  Written "part-fill" instruction can be included (as for narcotics).  Transfer of "part-fills" and undispensed prescriptions are not permitted.	CPP prescriptions for straight narcotic drugs and Schedule G, Part I drugs (Controlled Drugs Part 1) must be recorded in a register or a computer-printed report.	Same as points 1, 2, 3, 4, 5 and 7 on page 1.  Each dispensing of a narcotic and control drug part-fill must show the prescription number, date, amount dispensed and the pharmacist's hand written initials.  For methadone prescriptions, all part-fill documentation must be recorded on the back of the original prescription. The methadone part-fill accountability log which the patient and pharmacist both sign at each part-fill may be used for this purpose. If the accountability log is used, a "paper trail" copy of the part-fill must be filed in the daily file.  For all other narcotic and control drug prescriptions, the part-fills do not have to be on the back of the original prescription provided that the software program allows tracking between the part-fills and the original prescription. A "paper trail" copy of the part-fill prescription must be created and filed on the date of dispensing the part-fill.  The patient's or agent's signature must be obtained on the "Pharmacy Use Only" section of the CPP form.

A pharmacist must not dispense a prescription more than one year from the prescribing date, except for oral contraceptives which may be dispensed for up to two years. HPA Bylaw, Community Pharmacy Standards of Practice s.9(5).

Refill Authorization Documentation – Refill prescription authorizations may be added to the original prescription instead of creating a new prescription when:

1. A computerized transaction log is maintained, or
2. A new prescription number is assigned and a new hard copy prescription is prepared.