

**POLICY STATEMENT(S):**

A pharmacist may dispense a drug contrary to the terms of a prescription (adapt a prescription) if the action is intended to optimize the therapeutic outcome of treatment with the prescribed drug and meets **all** of the following elements of a protocol to adapt a prescription:

**1. Individual competence**

- a. Pharmacist has appropriate knowledge and understanding of the condition and the drug being dispensed in order to adapt the prescription.

**2. Appropriate information**

- a. Pharmacist has sufficient information about the specific client's health status to ensure that adapting the prescription will maintain or enhance the effectiveness of the drug therapy and will not put the client at increased risk.

**3. Prescription**

- a. Pharmacist has a prescription that is current, authentic, and appropriate.

**4. Appropriateness**

- a. Pharmacist determines whether adapting the prescription is appropriate in the circumstances.

**5. Informed consent**

- a. Pharmacist must obtain the informed consent of the client or client's representative before undertaking any adapting activity.

**6. Documentation**

- a. Pharmacist must document in the client's record any adaptation of the prescription, the rationale for the decision, and any appropriate follow-up plan.

**7. Notification of other health professionals**

- a. Pharmacist must notify the original prescriber (and the general practitioner if appropriate) as soon as reasonably possible (preferably within 24 hours of dispensing) and this must be recorded in the client's record or directly on the prescription.

**Note: PPP-58 is not a stand-alone document and must be read with the Orientation Manual and the Amendment to the Orientation Manual. For a pharmacist to use PPP-58 they will be required to sign the PPP-58 Declaration Form.**

## **BACKGROUND:**

### **Protocol for medication management (adapting a prescription)**

This professional practice policy enables pharmacists to maximize their full educational and professional competencies by providing authorization to adapt existing prescriptions. This policy is not mandatory and the decision whether to adapt a prescription is at the discretion of the individual pharmacist.

To guide decisions with respect to adapting a prescription, where a specific hospital board - or College of Pharmacists of BC - Board approved protocol does not exist, the pharmacist must refer to all applicable legislation and standards. This includes, but is not limited to, the Health Professions Act, Pharmacy Operations and Drug Scheduling Act, the Regulation and Bylaws of the College of Pharmacists of BC made pursuant to these Acts, the Health Care (Consent) and Care Facility (Admission) Act, the Framework of Professional Practice, the Code of Ethics and Professional Practice Policies. This specific policy (PPP-58) does not apply to controlled drug substances and cancer chemotherapy agents.

The Framework of Professional Practice (FPP) is the standards of pharmacy practice in British Columbia. In adapting a prescription the pharmacist must follow the FPP Role 1 *Provide pharmaceutical care*. Role 1 elements include:

- Function A – Assess the client’s health status and needs
- Function B – Develop a care plan with the client
- Function C – Support the client to implement the care plan
- Function D – Support and monitor the client’s progress with the care plan
- Function E – Document findings, follow-ups recommendations, information provided and client’s outcomes

### **Benefits of professional practice policy**

The benefits to clients are to:

- a) Optimize drug therapy leading to improved client health outcomes
  - 1) Better therapeutic responses.
  - 2) Reduced drug errors.
  - 3) Fewer adverse drug reactions/interactions.
- b) Have an effective and efficient health care system
  - 1) Minimize delays in initiating and changing drug therapy.
  - 2) Make the best use of human resources in the health care system.
- c) Expand the opportunities to identify people with significant risk factors.
- d) Encourage collaboration among health care providers.

### **Supporting documents**

- [Amendment to PPP-58](#)
- [Orientation Guide – Declaration Form](#)
- [PPP-58 Orientation Guide](#)
- [Pharmacist Prescription Adaptation Documentation and Notification Form](#)
- [Sample letter/fax introducing PPP-58](#)
- [Quick Reference Guide](#)

---

First approved: 21 Sep 2007  
Revised: 14 Sep 2018  
Reaffirmed: 27 Mar 2009