

PRACTICE DIRECTION

Dispensing Physicians

Initial Approval: November 22, 2018 Effective Date: January 1, 2019

Practice Directions set out requirements related to specific aspects of the practice of medicine. Practice Directions are used to enhance, explain, or guide registrants with respect to the subject matter relevant to the practice of medicine. Practice Directions provide more detailed information than contained in *The Regulated Health Professions Act*, Regulations, Bylaws, and Standards of Practice issued by CPSM. All registrants <u>must</u> comply with Practice Directions, per s. 86 of *The Regulated Health Professions Act*.

This Practice Direction is made under the authority of s. 85 of the RHPA and represents requirements of CPSM registrants in so far as appropriate.

This joint practice statement is the result of Interprofessional Collaboration between:

- College of Pharmacists of Manitoba
- College of Physicians and Surgeons of Manitoba

Dispensing of medications should be under the supervision and control of a licensed pharmacist. There may be occasions where such professional pharmacist services are not available. In these circumstances, the following may be considered:

- 1. Prepacked medications prepared by a pharmacist and provided by the physician at cost.
- 2. Local depot acceptable to College of Pharmacists of Manitoba (e.g. doctor's office) to which filled prescriptions can be delivered and provided to the patient.
- 3. Pharmacy delivery service, or satellite pharmacy sites.

For locations where such alternatives are not practical, a qualified physician may provide a dispensing service. Such a service must comply with all provincial regulations currently in place relevant to the dispensing of medications.

1. APPLICATION PROCESS (Application Form attached as Appendix I)

Physicians who establish a dispensing service may do so only with written approval of the College of Physicians and Surgeons.

- 1.1. Application shall be made to CPSM c/o the "Dispensing Physician Committee".
- 1.2. The application will be assessed against criteria jointly approved by the CPSM and the College of Pharmacists of Manitoba. These criteria shall include:
 - community need for the service,
 - availability of alternative methods of meeting the need.
- 1.3. If approved, the physician:
 - will be recommended for a pharmacare number,
 - will be provided with a policy/procedures manual which outlines the statutory requirements of a dispensing service from the College of Pharmacists of Manitoba,
 - will be provided with continuing advice, including onsite visits,
 - will be required to pay an annual fee to the College of Pharmacists of Manitoba for the receipt of pharmacist and pharmacy mailings.
- 1.4. The committee will be comprised of two representatives from the CPSM and two from the College of Pharmacists of Manitoba. Applications will be circulated. The majority decision shall apply.

2. DISPENSING PROCESS

- 2.1. Dispensing physicians must employ dispensing standards of practice equal to those required of pharmacists.
- 2.2. All medications must be dispensed with a typed or legibly handwritten label containing the following information:
 - Name, address and telephone number of the dispensing physician,
 - Dispensing date,
 - Name of the patient,
 - Name of drug and strength,
 - Directions for use,
 - Quantity dispensed,
 - Price charged,
 - Special direction e.g. shake well, take with food.
- 2.3. Receipts must include the same information as the medication label.

- 2.4. Dispensing physicians must keep a permanent record of all drugs dispensed for not less than two years. This must be separate from the patient's clinic record. Dispensing records must be kept in a readily retrievable manner and be accessible to representatives of the College of Physicians and Surgeons of Manitoba, College of Pharmacists of Manitoba, and inspectors of Health Canada. The method chosen for record keeping must include the same information as the medication label. Suggested methods are:
 - a log book,
 - a file of prescriptions.

Records for narcotics and controlled drugs should be kept separately from other drugs.

- 2.5. Physicians must dispense in compliance with the Manitoba Drug Standards and Therapeutic Formulary (MDSTF).
- 2.6. Generic names must appear on a label for all medications. The label must identify the generic name and the manufacturer for all single entity medications. For all other medications, the trade name is acceptable.
- 2.7. Child proof containers must be used unless the patient specifically requests otherwise.
- 2.8. The price charged by the physician is not to exceed the cost of the medication plus a fair and reasonable dispensing fee.
- 2.9. No physician may charge a patient for dispensing free drug samples received from manufacturers.
- 2.10. Dispensing physicians must ensure that medications are stored as directed on the manufacturer's label. This information must be communicated to the patient, when appropriate, i.e. refrigeration for insulin.
- 2.11. No drug shall be dispensed after the indicated expiry date.
- 2.12. Dispensing physicians must comply with all of the provisions of the Federal Controlled Drugs and Substance Act.
- 2.13. The physician must instruct the patient on the proper use of the medication and that instruction must include:
 - 2.13.1. confirmation of identity of the patient,
 - 2.13.2. confirmation of identity of the medication being dispensed,
 - 2.13.3. confirmation of prescribed dosage regimen,
 - 2.13.4. importance of compliance and what to do if a dose is missed,

- 2.13.5. instruction required to achieve the intended therapeutic response, which shall include, but not be limited to:
 - 2.13.5.a. information regarding significant drug drug (including nonprescription medication) and drug food interactions,
 - 2.13.5.b. activities to be avoided,
 - 2.13.5.c. common side effects and what to do if they occur.
- 2.13.6. special storage requirements,
- 2.13.7. prescription refill information.
- 2.14. The dialogue inherent in s. 2.13 above shall occur prior to the release of all prescribed medication. However, the pharmacist physician may exercise judgment as to the content of the dialogue upon the release of repeats or refills of prescribed medication.

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| NAME | | | |
| ADDRESS | | | |
| POSTAL CODE | | | |
| PHONE NUMBER | НОМЕ | | WORK |
| ADDRESS OF DISPENSARY | (if other than above) | | |
| | | | |
| HOURS OF OPERATION | | | |
| As the physician must cheo someone other than the a | | | I to the patient, will |
| YES | NO | | |
| IF YES, WHO? | | | |
| I apply to become a dispen fully responsible for all pre "Practice Direction: Disper | scriptions prepared on | | |
| SIGNATURE | | DATE | |
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NOTE: Please allow at least 14 days for review and approval.