

Renewing or Adapting a Prescription

Introduction

In 2011, changes to the regulations under the *Drug and Pharmacies Regulation Act (DPRA)* provided pharmacists with the authority to refill prescriptions in specific circumstances. Those provisions are revoked and replaced by the members' independent authority to renew prescriptions, as per this regulation.

In light of this new regulation, pharmacists' authority to refill prescriptions under the Drug and Pharmacies Regulations Act (DPRA) is revoked.

Medication therapy management optimizes therapeutic outcomes for individual patients utilizing a member's unique knowledge and experience. Prescribing includes the ability of the member to renew or adapt a prescription based on the patient's individual circumstances.

Narcotics, controlled drugs and targeted substances

Members do not have the authority to renew or adapt a narcotic, controlled drug, or targeted substance, nor a drug designated as a monitored drug under the *Narcotic Safety and Awareness Act*.

Considerations

A member will consider renewing or adapting a prescription only in the following circumstances:

1. The member has determined the drug will be safe and effective, considering the relevant circumstances of the patient, including, but not limited to the following:
 - a. The patient's medical history, including co-morbid disease states and chronic conditions;
 - b. Laboratory or other tests as available;
 - c. Symptoms reported by the patient;
 - d. The patient's allergies and other contraindications and precautions;
 - e. Other medications the patient may be taking;
 - f. The patients' gender, age, weight and height (where applicable);
 - g. Pregnancy and lactation status, if applicable;
 - h. Any other inquiries reasonably necessary in the circumstances including those with respect to the use of cigarettes and alcohol.
2. The drug is prescribed in a circumstance which is within the member's area of practice, knowledge, and skills.

Executing a Prescription Renewal or Adaptation

1. A prescription may be renewed or adapted for the purpose of medication therapy management where the member has:
 - a. Considered the potential risks and benefits to the patient of adapting or renewing the prescription;
 - b. Determined that a prescription renewal or adaptation is in the best interest of the patient; and

- c. The member is in possession of the existing order or prescription to be renewed or adapted, or has access to the information contained in the original prescription (copy, verbal confirmation from the pharmacy, or medical record).

Renewal

2. The member will renew the prescription based upon the circumstances of the particular patient:
 - a. The medication to be continued is for a previously diagnosed chronic and long-term condition; and
 - b. The patient has tolerated the medication without serious side effects.
3. The member shall not prescribe a quantity of the drug that exceeds the lesser of:
 - a. The quantity that was originally prescribed, including any refills that were authorized by the original prescriber; or
 - b. A six month's supply.

Adaptation

4. The member will adapt the prescription based upon the circumstances of the particular patient by altering the dose, dosage form, regimen, or route of administration to address the patient's unique needs and circumstances. This does not include therapeutic substitution.

Consent

5. When the member renews a prescription, he or she may rely on the consent that the patient, or his or her authorized agent, has already given to the prescriber for their treatment. However, if in the member's professional judgment a proposed adaptation is clinically significant, it is appropriate to seek an additional consent from the patient or his or her agent. A good indication of whether to seek consent is whether the member considers the change significant enough to inform the prescriber of the adaptation.

Choice

6. The patient or his or her authorized agent has the option of having the prescription dispensed immediately or may choose to take it to another pharmacy.

Documentation

7. Prescription information is:
 - a. Recorded by the member at the time of prescribing, and
 - b. Documented in the patient record.
8. The prescription, or a copy thereof, should be kept together or linked to the original prescription. The member's documentation of his or her rationale for prescribing should be linked to the renewed or adapted prescription and be easily retrievable.

Notification

The purpose of notification is to ensure continuity of care:

9. In the case of a prescription renewal, the member notifies the original prescriber and, if known to the member and different from the original prescriber, the patient's primary health care provider.
10. Where an adaptation is clinically significant, the member notifies the original prescriber and, if known to the member and different from the original prescriber, the patient's primary health care provider.

Notification of a prescription renewal or adaptation should take place within a reasonable period of time. The member does not have to ensure receipt of the notification.

The Prescription

A member who renews or adapts a previously issued prescription must ensure the following information is recorded on the prescription:

1. The name and address of the person for whom the drug is prescribed;
2. The name, strength (where applicable) and quantity or amount of the prescribed drug;
3. The direction for the use of the drug, including its dose, frequency, route of administration, and any special instructions respecting the use of the drug;
4. The name, address, telephone number and College registration number of the member;
5. The signature of the member;
6. The date the prescription was issued;
7. The number of refills that the member has authorized, if applicable; and
8. A reference to the original prescription that the member renewed or adapted, including the name and contact details of the original prescriber.