



## STANDARDS OF PRACTICE

# Prescribing: Administration

Under Review: Yes  
Issued By: Council: January 1, 2010 (*Faxing Prescriptions*)  
Reissued by Council: March 10, 2016 (*Prescribing*); April 1, 2017 (name change  
only: *Prescribing: Administration*)

The **Standards of Practice** of the College of Physicians & Surgeons of Alberta (“CPSA”) are the **minimum** standards of professional behavior and ethical conduct expected of all regulated members registered in Alberta. Standards of Practice are enforceable under the *Health Professions Act* and will be referenced in the management of complaints and in discipline hearings. CPSA also provides **Advice to the Profession** to support the implementation of the Standards of Practice.

**Note:** a glossary of terms can be found at the end of this document. Glossary terms are indicated in teal with a “G” throughout this document.

#### PREAMBLE

Clarity around requirements supports regulated members in meeting expectations regarding prescribing practices, emphasizes the importance of collaboration between healthcare providers and optimizes patient care. This standard details the expectations of regulated members when issuing and transmitting a prescription, whether electronically or in person.

For additional guidance, please refer to the resources at the end of this document.

#### STANDARD

1. A regulated member who issues a prescription for a substance regulated under the *Food and Drugs Act* (Canada) or *Controlled Drugs and Substances Act* (Canada) **must** ensure the prescription is accurate, legible and includes the following:
  - a. patient’s name
  - b. date prescription is issued;
  - c. drug name, dose, form and quantity prescribed;
  - d. prescribing physician’s:
    - i. name (and **name of supervising/attending physician, if applicable**);
    - ii. address and **telephone number**;

**Commented [CD1]:** Added to address trainees, physician assistants, etc.

**Commented [CD2]:** Telephone number added for timlier access/communication.

#### Terms used in the Standards of Practice:

- “Regulated member” means any person who is registered or who is required to be registered as a member of this College. The College regulates physicians, surgeons and osteopaths.
- “Must” refers to a mandatory requirement.
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- “Patient” includes, where applicable, the patient’s legal guardian or substitute decision maker.

iii. registration number;

e. directions for use and number of authorized refills;

f. direct authorization by valid signature<sup>g</sup> that enables the dispenser to verify the prescription's authenticity; and

g. date and time of transmission for faxed or electronically transmitted prescriptions.

2. A regulated member who transmits (e.g., faxes) a prescription **must** ensure the:

1. provision<sup>g</sup> method is secure<sup>g</sup> to protect patient confidentiality and prevent diversion; and

2. provision for the purpose of dispensing can only be received by the intended licensed pharmacy.

A regulated member **must** limit verbal prescriptions to situations where more secure alternative means are not available or there is an urgent critical need.

3. A regulated member **must** follow the [Tracked Prescription Program \(TPP\) Alberta](#) rules for the provision of prescriptions for drugs monitored by the program.

4. A regulated member who uses an online platform (i.e., secure messaging) to transmit prescriptions **must**:

a. use only secure system-to-system messaging (e.g., between an electronic medical record (EMR) system and a pharmacy system);

b. ensure the EMR has prescription transmission audit capabilities;

c. ensure the information is encrypted; and

d. have a current privacy impact assessment (PIA) with the [Office of the Information & Privacy Commissioner \(OIPC\)](#) that addresses the use of secure system-to-system messaging.

**Commented [CD3]:** Registration number added for data quality purposes. Recent updates to the *Health Professions Act* consider registration numbers to be public information.

**Commented [CD4]:** Removed to simplify clause: glossary entry added.

**Commented [CD5]:** Wording changed to address situations where prescriptions are given directly to a patient.

**Commented [CD6]:** Added to improve safety.

**Commented [CD7]:** Reworded for simplicity.

**Commented [CD8]:** Added for clarity.

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5. When providing a prescription, a regulated member **must not** reference a specific pharmacy, pharmacist, distributor, agent or broker in the absence of a **compelling clinical reason**<sup>6</sup> (e.g., justified by the limited availability of a product and/or service).

## GLOSSARY

**Valid signature:** a signature that enables the dispenser to verify the authenticity of the prescription: what constitutes a valid signature depends on the method of transmission. The [Alberta College of Pharmacy](#) (ACP) advises the following are permitted for pharmacists to accept:

- Prescriptions faxed directly to a pharmacy from a physician's password-protected EMR.
- Prescriptions produced by computer and hand-signed by the prescriber or with an electronic signature that is then signed or initialled by the prescriber and delivered by the patient are acceptable. Pharmacists do have a responsibility to ensure the prescription is authentic, just as they would for a prescription that is handwritten.
- Prescriptions that are produced by computer and hand-signed by the prescriber, or with an electronic signature and signed or initialled by the prescriber, that are then faxed to the pharmacy.

**Secure:** for the purpose of this standard, “secure” refers to the system in which a prescription is transmitted. Secure transmission involves messaging in a closed electronic system (e.g., PrescribelT).<sup>1</sup>

**Provision:** the format in which a prescription is provided to a patient or transmitted to a pharmacy. This includes:

- produced by computer and hand-signed by the prescriber or affixed with an electronic signature that is initialled by the prescriber, then provided to the patient or faxed directly to the pharmacy from the prescriber;
- faxed directly from a password-protected electronic medical record (EMR) where the prescriber's password protocol is the prescriber's direct authorization in the absence of

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<sup>1</sup>From ACP's "[Transmission of prescriptions](#)" (Feb. 3, 2021).

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a signature;

- issued and transmitted via secure messaging in a closed electronic system (e.g., PrescribelT) that enables monitoring and shared access by authorized prescribers and dispensers; or
- provided to the pharmacy verbally by telephone by the prescriber or their authorized intermediary.<sup>1</sup>

Note: handwritten prescriptions are acceptable; however, there is a degree of risk for forgery or diversion. Alternate means of providing the prescription directly to the pharmacy of the patient's choice is preferable.

**Compelling clinical reason:** a compelling clinical reason for directing a patient to a specific pharmacy includes, but is not limited to, medication shortages, drug compounding or at-risk patients who may need support to ensure patient safety.

#### RELATED STANDARDS OF PRACTICE

- [Cannabis for Medical Purposes](#)
- [Dispensing of Schedule 1 & 2 Drugs by a Physician for a Fee](#)
- [Prescribing: Drugs Associated with Substance Use Disorders or Substance-Related Harms](#)
- [Safe Prescribing for Opioid Use Disorder](#)
- [Sale of Products by Physicians](#)
- [Virtual Care](#)

#### COMPANION RESOURCES

- [Advice to the Profession: Prescribing: Administration](#)
- [Advice to the Profession: Electronic Communications & Security of Mobile Devices](#)
- [TPP Alberta Guide](#)

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