

STANDARDS OF PRACTICE

Dispensing Drugs for a Fee

Commented [CD1]: Titled shortened for simplicity

Under Review: Yes
Issued by Council: Jan. 1, 2010 (*Dispensing of Schedule*1 or 2 Drugs by a Physician for a Fee)
Reissued by Council: [TBD] (*Dispensing Drugs for a Fee*)



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 " $^{\text{"G"}}$ " throughout this document.

PREAMBLE

CPSA members are authorized to dispense^G, compound^G, provide for selling or sell Schedule 1 or 2 drugs^G under the *Health Professions Restricted Activity Regulation*¹. Dispensing medication requires appropriate knowledge, skill and judgement to ensure patient safety.

For the purpose of this standard, regulated members who provide medication samples to their patients at no cost are not considered to be "dispensing" medication.²

Related standards, additional information and general advice can be found in the companion resources listed at the end of this document.

STANDARD

- A regulated member may:
 - a. dispense drugs only to their own patients when those drugs are relevant to the medical consultation or surgical procedure; Error! Bookmark not defined. 3 and
 - b. charge a fee for dispensing a drug that includes reasonable costs associated^G with maintaining drugs.

Commented [CD2]: From CPSNL and CPSO: prevents prescribing where no physician-patient relationship exists.

Terms used in the Standards of Practice:

¹Refer to Section 54 (Mar. 2023).

² From CPSNL's <u>Prescribing & Dispensing of Medications</u> Standard of Practice (2023).

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- 2. Notwithstanding clause (1), a regulated member **must not:**
 - a. charge dispensing fees that are excessive;
 - b. sell drugs to a patient at a profit³, in accordance with the <u>Charging for Uninsured Professional Services</u> and <u>Conflict of Interest</u> standards of practice; or
 - c. charge a fee for maintaining required documentation in regarding the inventory control or dispensing of drugs.
- 3. A regulated member who dispenses drugs **must:**
 - a. meet the same dispensing requirements as pharmacists (refer to <u>Appendix A</u> at the end of this <u>document</u>);²³
 - ensure patients are aware of alternatives to receiving drugs from the regulated member (e.g., using the pharmacy of the patient's choice);⁴
 - personally provide patient counselling on use of the drug, including discussing instructions for proper use;³
 - d. have established policies/procedures for the safe and proper disposal of drugs that are unfit to be dispensed, including outdated or damaged products;
 - e. maintain a detailed description of the calculation of fees; and
 - f. comply with the requirements set out in the <u>Standards of Practice</u>, provincial legislation and federal laws.²³
- 4. When obtaining drugs for dispensing, a regulated member **must**:
 - use proper methods of procurement^G in order to confirm the origin and chain of custody of drugs being dispensed;

³ From CPSO's *Dispensing Drugs* Policy (Dec. 2022).

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Commented [CD3]: From CPSNL and CPSO: ensures proper and consistent dispensing.

Commented [CD5]: From CPSO: ensures patient receives correct and appropriate information directly from the dispensing physician.

Commented [CD6]: From CPSNL and CPSO: ensures members don't contravene legislation/laws.

⁴ From CPSNB's <u>Charging for Uninsured Services (Physician Dispensing/Supplying)</u> Professional Standard (Apr. 2021).



- visually inspect drugs to ensure there has been no damage, tampering or contamination;
- c. have an audit system in place in order to identify possible drug loss;
- store drugs appropriately to prevent spoilage (e.g., temperature control) and securely, in accordance with federal regulations where applicable (e.g., narcotics);
- e. monitor recalled drugs and have a process for contacting patients whose dispensed drugs are affected; and
- f. dispose of drugs that are unfit to be dispensed (e.g., expired, damaged or recalled) safely and securely and in accordance with any environmental requirements.³
- 5. When dispensing drugs, a regulated member **must** maintain a transaction log identifying:
 - a. the name of the patient to whom the drug was dispensed;
 - b. the name of the prescriber/dispenser;
 - c. the date the drug was dispensed; and
 - d. the name, strength, dosage, format and quantity of the drug dispensed.
- 6. This log **must** be available to CPSA upon request.
- 7. A regulated member **must not**:
 - a. compound drugs unless specifically approved by CPSA; or
 - b. dispense drugs that are past their expiry date or that will expire before the patient completes the course of therapy³

Commented [CD7]: From CPSO: ensures drugs are obtained and stored for patient safety.

Commented [CD8]: From CPSO: ensures dispensing is done in the patient's best interests.

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GLOSSARY

Compound: means to mix together 2 or more ingredients of which at least one is a drug for the purposes of dispensing a drug or drugs but does not include reconstituting a drug or drugs with only water.⁵

Costs associated: for the purpose of this standard, may include handling costs (e.g., shipping, packaging, containment systems) and inventory maintenance costs (e.g., refrigeration, replacement of expired drugs, etc.).

Dispense/dispensing: with respect to drugs, to provide a drug pursuant to a prescription for a person, but does not include the administration of a drug to a person⁵; includes any one or more of the following:

- a. evaluating a prescription for a drug;
 assessing the patient and the patient's health history and medication record;
- b. packaging and labelling of a drug;
- c. providing a drug to or for a patient pursuant to a prescription.⁶

Procurement: the act of obtaining or acquiring something.

Schedule 1 and 2 drugs:

Schedule 1 drugs are

- a. the drugs set out in a Schedule to the <u>Controlled Drugs and Substances Act</u> (Canada),
- b. the drugs set out in the Prescription Drug List^G, and
- c. the drugs designated as Schedule 1 drugs pursuant to Section 34 [of the *Pharmacy and Drug Act*].

Schedule 2 drugs are

- a. the drugs designated as Schedule 2 drugs pursuant to Section 34 [of the *Pharmacy and Drug Act*], and
- b. unless provided otherwise by regulation under section 34 [of the <u>Pharmacy and Drug Act</u>], the drugs removed from the Prescription Drug List and approved for non-prescription sale in Canada.⁶

Terms used in the Standards of Practice:

⁵ From the <u>Health Professions Act</u> (June 2024).

⁶ From the Province of Alberta's *Pharmacy and Drug Act* (June 21, 2024).

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Prescription drug list: means the list established in the <u>Food and Drugs Act</u> (Canada).⁶

ACKNOWLEDGEMENTS

CPSA acknowledges the work of the Colleges of New Brunswick, Newfoundland and Labrador and Ontario for use of their documents in preparing this standard of practice.

RELATED STANDARDS OF PRACTICE

- Charging for Uninsured Professional Services
- Conflict of Interest
- Patient Record Content
- Prescribing: Administration
- Prescribing: Drugs Associated with Substance Use Disorders or Substance-Related Harms
- Practising Outside of Established Conventional Medicine
- Responsibility for a Medical Practice
- Restricted Activities
- Sale of Products by Physicians

COMPANION RESOURCES

- Advice to the Profession documents:
 - Dispensing Drugs for a Fee [TBD]
 - Charging for Uninsured Professional Services
 - o Conflict of Interest
 - o Practising Outside of Established Conventional Medicine
 - o Prescribing: Administration
 - o <u>Prescribing: Drugs Associated with Substance Use Disorder or Substance-Related Harms</u>
 - o Responsibility for a Medical Practice
 - o Restricted Activities
 - o Treating Self, Family or Others Close to You

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APPENDIX A7

When dispensing a drug to a patient, ensure that:

- 1. the prescription is filled correctly:
 - a. the dosage, form, strength, manufacturer and quality dispensed are correct and in accordance with the prescription;
- 2. appropriate dispensing procedures are used:
 - a. procedure is hygienic;
 - b. maintains the stability of the drug;
 - c. uses the proper diluents and mixing procedures where applicable;
 - d. prevents cross contamination; and
 - e. complies with any requirements applicable to the specific drug;
- 3. the drug is packaged properly:
 - a. appropriate packaging, having regard for the nature of the drug, including sensitivity to light and temperature; and
 - b. in child-resistant packaging unless:
 - i. the patient requests otherwise;
 - ii. you are satisfied child-resistant packaging is not appropriate;
 - iii. child-resistant packaging is not suitable because of the form of the drug; or
 - iv. you are unable to obtain a child-resistant package for the drug because a supply is not reasonably available; and
 - if a drug is not dispensed in a child-resistant package, you must be satisfied that the
 patient has been warned of and understands the risks associated with not using a
 child-resistant package;
- 4. the container is labelled properly:
 - a. the drug has a label that is clearly legible and includes the following:
 - i. name of patient;
 - ii. name of prescriber/distributor;
 - iii. name, address and phone number of the clinic from which the drug is dispensed;
 - iv. a description of the drug in English (name of drug, active ingredients, strength and identity of manufacturer);

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Modified from the Alberta College of Pharmacy's <u>Standards of Practice for Pharmacists and Pharmacy Technicians</u> – "Follow proper procedures when dispensing" (June 2023).



- v. instructions for use;
- vi. date the drug was dispensed;
- vii. quantity dispensed;
- viii. expiry date, if applicable;
- b. a form of label may be used to provide additional information or forms of information to facilitate understanding by patients with specific needs (e.g., visually impaired, non-English speaking patients, etc.); and
- 5. a final check is performed:
 - a. be satisfied that each step of the dispensing process has been completed properly by verifying that:
 - i. the drug dosage, form, strength, manufacturer and quantity dispensed are
 - ii. the label is accurate and contains the required information; and
 - iii. appropriate auxiliary instruction labels are affixed.

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