

STANDARDS OF PRACTICE

Dispensing ~~of Schedule~~
~~1 & 2~~ Drugs ~~by a~~
~~Physician~~ for a Fee

Commented [CD1]: Titled shortened for simplicity

Under Review: ~~No~~Yes

Issued ~~By:by~~ Council: ~~January~~Jan. 1, 2010 ____

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

CPSA members are authorized to dispense⁶, compound⁶, provide for selling or sell Schedule 1 or 2 drugs⁶ 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

1. A regulated member **may**:

- 1.a. dispense drugs only to their own patients when those drugs are relevant to the medical consultation or surgical procedure ~~provided to that patient.~~ ^{Error! Bookmark not defined.} ³ and

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

¹ Refer to Section 54 (Mar. 2023).

² From CPSNL’s Prescribing & Dispensing of Medications Standard of Practice (2023).

Terms used in the Standards of Practice:

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- ~~2. A regulated member **may** charge a fee for dispensing a drug as defined in clause (1); however, a regulated member:~~
- ~~a. **must** limit fees to the cost of the drugs to the regulated member;~~
 - ~~b. **may** include reasonable handling costs such as shipping, containers and containment systems, refrigeration and inventory maintenance costs associated with replacement of expired drugs; and~~
 - ~~c. **must** maintain a detailed description of the calculation of fees for inspection by CPSA.~~
- ~~b. A regulated member **must not** charge a fee for dispensing a drug or for that includes reasonable costs associated⁶ with maintaining drugs.~~
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 *Charging for Uninsured Professional Services and Conflict of Interest* standards of practice; or
 - 3-c. charge a fee for maintaining required documentation in respect of regarding the inventory control or dispensing of drugs.
4. A regulated member **must not** compound drugs unless specifically approved by CPSA.
5. A regulated member **must** personally discuss instructions for use of the drug with the patient.

Commented [CD3]: Now clause 7(a).

Commented [CD4]: Now clause 3(c).

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

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6. ~~Any drug dispensed to a patient for a fee **must** have a label affixed to the drug container or packaging that is legible and identifies the following:~~
- ~~a. the name, address and telephone number of the clinic from which the drug is dispensed;~~
 - ~~b. the name of the patient;~~
 - ~~c. the name of the prescriber;~~
 - ~~d. the name of all active ingredients, the strength and the manufacturer;~~
 - ~~e. instructions for use;~~
 - ~~f. the date the drug was dispensed;~~
 - ~~g. the quantity dispensed; and~~
 - ~~h. the expiry date, when appropriate.~~
7. ~~Any drug dispensed to a patient for a fee **must** be dispensed in child proof containers except where inappropriate for a particular patient.~~
8. ~~Each time a drug is dispensed for a fee, the transaction **must** be recorded in the clinical record or in a separate log that identifies the following:~~
- ~~a. the name of the patient for whom the drug was dispensed;~~
 - ~~b. the name of the prescriber;~~
 - ~~c. the date the drug was dispensed;~~
 - ~~d. the name, strength and dosage form of the drug dispensed; and~~
 - ~~e. the quantity of the drug dispensed.~~

Commented [CD5]: Incorporated into Appendix A.

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9. ~~Drugs received by the regulated member for dispensing for a fee to a patient **must** be visually inspected to ensure there has been no damage or contamination.~~

Commented [CD6]: Now clause 4(b).

10. ~~Drugs in a regulated member's office **must** be stored to ensure security and integrity.~~

11. ~~Drugs in a regulated member's office **must** be stored at appropriate temperatures to ensure stability.~~

12. ~~Narcotic and controlled drugs in a regulated member's office **must** be stored in accordance with federal regulations.~~

Commented [CD7]: Now clause 4(d).

3. A regulated member who dispenses a drug **must** drugs **must**:

a. meet the same dispensing requirements as pharmacists (refer to Appendix A at the end of this document).^{2,3}

Commented [CD8]: From CPSNL and CPSO: ensures proper and consistent dispensing.

b. ensure patients are aware of alternatives to receiving drugs from the regulated member (e.g., using the pharmacy of the patient's choice).⁴

Commented [CD9]: From CPSNB: ensures patients can make informed decisions.

c. personally provide patient counselling on use of the drug, including discussing instructions for proper use.³

Commented [CD10]: From CPSO: ensures patient receives correct and appropriate information directly from the dispensing physician.

~~13.d. have established ~~policy and policies~~/procedures for the ~~safe and proper disposal of drugs~~ safe and proper disposal of drugs that are unfit to be dispensed, including outdated or damaged products.²~~

e. maintain a detailed description of the calculation of fees; and

f. comply with the requirements set out in the *Standards of Practice*, provincial legislation and federal laws.^{2,3}

Commented [CD11]: From CPSNL and CPSO: ensures members don't contravene legislation/laws.

4. When obtaining drugs for dispensing, a regulated member **must**:

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

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- a. use proper methods of procurement⁹ in order to confirm the origin and chain of custody of drugs being dispensed;
- b. 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;
- d. 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** ~~accept the return of any dispensed:~~

- a. compound drugs unless specifically approved by CPSA; or

Commented [CD12]: From CPSO: ensures drugs are obtained and stored for patient safety.

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- b. dispense drugs that are past their expiry date or that will expire before the patient completes the course of therapy³

Commented [CD13]: From CPSO: ensures dispensing is done in the patient's best interests.

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 *Controlled Drugs and Substances Act* (Canada),
- b. the drugs set out in the Prescription Drug List⁶, 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

⁵ From the *Health Professions Act* (June 2024).

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

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b. unless provided otherwise by regulation under section 34 [of the *Pharmacy and Drug Act*], the drugs removed from the Prescription Drug List and approved for non-prescription sale in Canada.⁶

~~14.~~ **Prescription drug for the purpose of reuse list:** means the list established in the *Food and Drugs Act (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 ~~Disorder~~ 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](#)
 - [Conflict of Interest](#)
 - [Practising Outside of Established Conventional Medicine](#)
 - [Prescribing: Administration](#)

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- Prescribing: Drugs Associated with Substance Use Disorder or Substance-Related Harms
- Responsibility for a Medical Practice
- Restricted Activities
- Treating Self, Family or Others Close to You

DRAFT

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Dispensing of Schedule 1 & 2 Drugs by a

Physician for a Fee

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
 - c. 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;

⁷ Modified from the Alberta College of Pharmacy's *Standards of Practice for Pharmacists and Pharmacy Technicians* – "Follow proper procedures when dispensing" (June 2023).

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iv. a description of the drug in English (name of drug, active ingredients, strength and identity of manufacturer);

v. instructions for use;

vi. date the drug was dispensed;

- ~~• General Infection Prevention & Control Standards~~
- ~~• Health Canada's Safe Disposal of Prescription Drugs~~
- ~~• Health Canada's Physical Security Directive~~

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 correct;

ii. the label is accurate and contains the required information; and

iii. appropriate auxiliary instruction labels are affixed.

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