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**PHARMACISTS' "READY REFERENCE" FOR PRESCRIPTIONS**

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**SUMMARY ONLY - Regulation numbers refer to the Poisons Regulations 2008.**

**Regulations can be found on our website [www.dhhs.tas.gov.au/psbtas/guidelines](http://www.dhhs.tas.gov.au/psbtas/guidelines)**

	<b>SCHEDULE 4 - Restricted substances</b>		<b>SCHEDULE 8 - Narcotic Substances</b>	
	<b>S4 General</b>	Specified psychotropic substances and Declared restricted substances <b>"S4D"</b>	<b>S8 General</b>	<b>Amphetamines, Methylphenidate</b>
<b>Medical Practitioner</b> (Defined in s. 3 of Poisons Act 1971)	<b>Any Aus. Reg. medical practitioner</b>	<b>Tasmania.</b> For repeat, interval must be endorsed. R.41(4)(a)(vi) (NB: see "Repeat Intervals" below) *	<b>Doctor must be practising in Tasmania.</b> Repeats allowed. R.15(7)(a)(iv). Interval must be endorsed*. Repeats to be retained at place of first dispensing** R.23 (2). State authority required for drugs listed under. R.19(1)	As for S8 General. State authority required R19
<b>Veterinary Surgeon</b> registered in Tas. Prescription to be endorsed: "For animal treatment only".		For repeat, interval must be endorsed. R.41(4)(a)(vi)	<b>No repeat allowed R.23(12)</b>	<b>Prescribing prohibited</b> unless State authority issued for Methylphenidate R15(12)
<b>Dentist must be practising</b> <b>Tasmania.</b> Only for dental treatment.		<b>For repeat, interval must be endorsed.</b> R.41(4)(vi)	<b>No repeat allowed R.15(9)</b> Cannot prescribe drugs listed under regulation 19(1) - R15(14)	Prescribing prohibited R15(14)
<b>Optometrists authorised by Optometrist Reg Board to prescribe</b>	Only Class 1 drugs approved under S38(1) of the Poisons Act	<b>No</b>	<b>No</b>	<b>No</b>
<b>Prescription validity from date of writing</b>	<b>12 months</b> R.46(17)(a)	<b>6 months</b> R.46(17)(b)	<b>6 months</b> R.23(17)	<b>6 months</b> R.23(17)
<b>Prescribe for self</b>	<b>No restriction under Poisons Act.</b>		<b>No. Self-prescribing prohibited. R.15(4)</b>	
<b>Number of items per form</b>	<b>No restriction under Poisons Act.</b>		<b>One item only. No other item. R.15(7)(b)</b>	
<b>Emergency supply, no prescription, for essential continuation of treatment</b>	<b>3 days' supply only</b> R.48(b)(i), or unit pack R48(b)(ii)	<b>No supply without prescriber's authority</b>	<b>No supply without prescriber's authority.</b>	

<b>Verifying S8</b> R.24(1)	Dextromoramide, hydromorphone, methadone, morphine, pethidine. Authenticate, or 2 days' supply only R.24(1)
<b>Recording all prescriptions</b> R46(8)(c)	Record all prescriptions, even unscheduled, in system approved by the Pharmacists Registration Board and retain record for 2 years.
<b>Marking prescriptions</b> R46(8)(a)(c)	(For PBS scripts, mark the duplicate.) Date and initial the prescription at each supply. Address of dispensary and name of proprietor of business. Identification code (numbers, letters) to match each label and prescription record. At last supply, mark "CANCELLED" and retain for 2 years.
<b>Quantity and repeats</b>	Poisons Regs do not specify any limits on number of repeats and quantity of drug. (except in the case of repeats for S8 and S4D drugs as shown on previous page)
<b>* Repeat Intervals</b> R23(5)-(7) & R46(3)-(5)	Where the prescription is for a narcotic substance or declared restricted substance and the dispensing of the prescription is authorised to be repeated, the minimum intervals at which it may be dispensed must be written on the prescription by the prescriber. If this has not occurred, the pharmacist may do one of the following- (1) dispense original supply only, then cancel script; (2) contact prescriber for instructions; (3) if the script has specific dose directions, calculate when new supply required and allow up to 4 days before that date. In the case of 2 and 3, pharmacist is to write on script how minimum interval was ascertained, and sign and date script. In the case of 3 where a pharmacist is dispensing a repeat, the due date for dispensing should be calculated using the date of first supply (not the date of the dispensing of the previous repeat).
<b>Labelling of dispensed items</b> R84	"KEEP OUT OF REACH OF CHILDREN" (red). If for external use: "Do not swallow" or "Caution - Not to be taken" or "Poison" (red). Name of patient (or owner & ID of animal, "For animal (or dental) treatment only", if relevant). Name of proprietor of business. Number or other ID record. Name of preparation or substance. Directions for use. Pharmacist's initials. Address of pharmacy. Label other S3 to identify pharmacy. All print to be at least 1.5mm high, clear and distinct contrast with background.
<b>** Retaining S8 repeats</b> R23(2)	All repeats must be retained by pharmacy where they were first dispensed. If a patient requests a transfer to another pharmacy the pharmacist must seek verbal or written authorisation from Pharmaceutical Services Branch.
<b>Narcotic Storage</b> R25	All narcotic storage must comply with Regulation 24 and a "day safe" is allowed during the hours a pharmacy is open. The "day safe" must be capable of being securely locked and must be kept locked when not in use. The key must be retained by the pharmacist so that no other person has access.