

<p>Emergency supply</p> <p>Time management</p> <p>0 min - 20 min question</p> <p>1 hr mark - 38 min question</p> <p>30 hr - 60 min question</p> <p>2 hr mark - 75 min question</p> <p>when you cannot contact the doctor</p>	<p>Can give three days' supply (or smallest primary pack) without prescription (as long as the drug is not listed in Schedule 19 (1) of the CSRegs) if the criteria for Emergency supply are met.</p> <p>These criteria include:</p> <ul style="list-style-type: none"> (a) continued supply essential (b) there is a good reason for the person's inability to produce a prescription (c) person is currently under medical treatment with the drug (and dose is known). (CSRegs R21(2)(f)(i-iii)) <p>Communicated order - a pharmacist can receive a S4 prescription by telephone, fax, or electronic transmission. Must include all details for prescription as for written prescription (e.g. prescriber's name, full address and telephone number, patient and drug details, etc). Prescriber must immediately complete a written prescription stating that it is in confirmation of communicated order, and send to pharmacy as soon as practicable (for Medicare this time is 7 days). (CSRegs R33(2,3))</p> <p>Exemptions for faxed prescriptions which are endorsed with the name and address of a single pharmacy at which the prescription may be dispensed. (CSRegs R33(4))</p> <p>Continued dispensing - Continued dispensing of oral hormonal contraceptives and lipid modifying agents (CSReg 21(2)(g) and 15A National Health (continued dispensing) determination 2012 (http://www.comlaw.gov.au/Details/F2013C00929))</p> <p>If a pharmacist considers it necessary to ensure continuity of treatment of a person, may supply a S4 to a person without a prescription once within a 12 month period if satisfied</p> <ul style="list-style-type: none"> i) it is not practicable for the person to obtain a prescription before they need supply ii) they have previously been supplied the PBS medicine on prescription from a PBS prescriber iii) their therapy is stable iv) they have been taking the medicine regularly for an uninterrupted period and have been assessed by the prescriber since beginning the medicine v) their last supply of the medicine was on a valid PBS prescription vi) they need to sign a declaration acknowledging that the PBS medicine was supplied to them without presenting a valid prescription <p>pharmacist to supply the maximum quantity as outlined in the Act</p>	<p>No provisions for emergency supply without a communicated direction from authorised prescriber.</p> <p>Can give up to 2 days' supply - verification supply with valid prescription if pharmacist cannot be satisfied that they either know the patient or the prescriber's signature and cannot contact the prescriber (CSRegs R35(8)(a)) - until prescriber contacted</p> <p>Communication prescription</p> <p>Can supply any quantity ordered under communicated direction of the prescriber over the phone, fax or other electronic transmission (prescription to be written immediately after prescription is communicated, clearly stating that it is confirmation of a communicated prescription and forwarded within 24 hours).</p> <p>Must include all details for prescription as for written prescription (e.g. prescriber's name, full address and telephone number, patient and drug details, etc).</p> <p>Exemptions for faxed prescriptions which are endorsed with the name and address of a single pharmacy at which the prescription may be dispensed.</p>
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Transport

if post/air/air to certify supply, date of plane/etc supply & how it was sent.

- no via post use courier enclosed package & info of transfer of the drug of dependence container w/ no details

Authority - x - Blue colour rx.

- streamlined - need code for eligibility
- Authority required - approval from DVA (electronic, phone or written)
- 1 item per form
- cannot dispense until approval from DVA -> approval no.
- HSD - community access - certain community practitioners retain rx - 2 years
- Hep B medicines
- HIV antiretrovirals
- Authority required: HSD2
- dispense hospital or community.

RPBS

gold card -> all conditions - totally & permanently disabled

white card -> specific conditions

orange card -> pharmaceutical only.

Schedule - if medicine deleted, it cannot be supplied as PBS from date of effect - even if written before delete & not repeats

HSD - community access

can prescribe:

- clozapine
- HIV antiretrovirals

only approved pharmacies can dispense PBS items - Section 90

Prescriber Bag

- eligible medical practitioners must sign name & address
- Order form supply < 1 month & year
- Only items listed under prescriber bag provisions can be supplied
- Pick up by (receipt) signed by prescriber or authorised representative
- do not dispense
- retain 3 forward w/ notification form to the police
- Forward to the DDP police
- if cannot retain make a copy & contact police
- a SAP

SAB - certain health practitioners to access therapeutic goods that are not included in the ARTG

ohealth practitioner certain can - who asked criteria

category - A - as if it was defined as seriously ill patient

category B - approve before use -> not category A or C

category C - essential to patient health -> not category A or B

SA law: This table has been prepared with reference to the Controlled Substances Act 1984 and Controlled Substances (Poisons) Regulations 2011. These can be found on [learnonline](http://www.legislation.gov.au) under the 'Legislation' section and are specific for South Australia.

- ~~when prescriber or patient is unknown~~
- ~~22 day's supply may be dispensed until the prescription is verified w/ the prescriber~~
- collection must be signed & dated by person collecting the medication. ~~if someone is collecting on behalf of patient, it's unknown must show~~
- collection of PR - witness

5 requirements state that there should be no more than 3 items
(under Information for Prescribers)

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- one must enter into
system & then report
as destroyed
- the other
midnight
social
warfare

At least a test of PARS made for eligible ATSD people living w/ or at risk of chronic disease or at risk of ATSD of any age who present w/ existing chronic disease or at risk of d

• would ex

Generics - do not give, if box for brand substitution not permitted

Schedule 4 and Schedule 8 prescription requirements

Prescribing - SG's cannot prescribe for self or direct family members

PBS and non-PBS items should **not** be listed on the one PBS form per the website. These rules **do not** apply for public hospital prescriptions – can have up to 10 items on PBS prescription. A private handwritten or computer-generated prescription for S8s could have more than 3 items listed as PBS rules would not apply.

1. Regulation 49 - meet 3 criteria all & can do for authority
or
- supply all repeats when:
- Chronic illness or living in remote area
- suffer hardship to get repeats
- PBS quantity insufficient for treatment
taken are forfeited.
Reg June 1 → June 22
cannot supply PBS ≤ 20 or ≤ 4 for others such as eye drops
→ e.g. June 1 → June 6

2. Regulation 51 - supplying rx ≤ 20 or ≤ 4 days of previous supply
or
due to - lost, stolen, destroyed or needed w/o delay
immediate supply
→ endorse rx ≤ 20 or ≤ 4 days of previous supply
or
don't supply again - 20 or ≤ 4 days of previous supply
or an exemption, when ordered - population 22

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