



## Prescription Review Program

### BACKGROUND AND PROGRAM GOALS

The Prescription Review Program is a partnership of this College, the College of Physicians and Surgeons (CPSS), the College of Dental Surgeons of Saskatchewan (CDSS) and the Saskatchewan Registered Nurses Association (SRNA). The goals of the program are to monitor the prescribing and dispensing of a specific list of medications to ensure appropriate prescribing and dispensing; to limit diversion of the listed medications which have abuse potential and may be harmful to the public; and to educate practitioners as to safe, appropriate medication management of the listed medications for their patients.

### Data Capture to e-Health

All prescription drugs dispensed to a resident of Saskatchewan with a valid Saskatchewan Health Services Number must be transmitted for capture and/or adjudication to the Saskatchewan Prescription Drug Plan and the Pharmaceutical Information Program (PIP).

### Exemptions - Hospital In-patients

Currently PIP is unable to capture prescriptions written for in-patients of a hospital.

Extra PRP program documentation requirements (HSN, DOB, 'alpha' numerical quantity, etc.) are not required to be documented on the prescription if the patient is a or resident of a provincially licensed special-care facility.

*Note: Prescriptions filled in community pharmacies for patients in licensed special-care homes and private-care homes must be transmitted for capture and/or adjudication in PIP.*

### Hospital Out-patients and Private Care Home Patients

Prescriptions issued for out-patients of a hospital or private care homes, which will be filled at a community pharmacy, are subject to the program documentation and data capture requirements.

### Regulatory Bylaws and Program Requirements

The complete regulatory bylaw, including the entire list of medications which are monitored, can be found within the [Regulatory Bylaws of the College of Physicians and Surgeons \(CPSS\)](#) at section 18.1.

The [Regulatory Bylaws of the Saskatchewan College of Pharmacy Professionals](#) regarding the program can be found in Part O.

Prescriptions are required to be in writing, including verbal prescription narcotics, controlled drugs and benzodiazepines as well as Prescription Drug List (PDL) (formerly Schedule F) drugs choral hydrate and gabapentin even if federal legislation would allow a verbal order.

The following documentation is required on the prescription:

- The patient's date of birth
- The patient's address
- The patient's health services number
- The total quantity of the medication prescribed, both numerically and in written form\*
- The practitioner's name and address

\*When the practitioner transmits the prescription to the pharmacy electronically [via facsimile or authorized means in accordance with the policies and protocols of the Pharmaceutical Information Program (PIP)], *may not need to include* both the quantity numerically and in written form [please see CPSS bylaw 18.1(e)].

As per of CPSS Regulatory Bylaw 18.1(g), physicians shall only prescribe part fills to which the Prescription Review Program applies if the following information is specified in the prescription: the total quantity, the amount to be dispensed each time, and the time interval between fills.

As per federal regulations, when the signature of the practitioner is not known to the pharmacist, the onus is on the pharmacist to ensure the prescription was issued by that practitioner (i.e. not a forgery).

### **Residents and Interns**

If a physician is registered on the Educational Register (as an intern or resident), the physician must include the following information on the prescription:

The training level of the physician writing the prescription and well as their legibly printed name and legibly printed name of the Most Responsible Physician (i.e. to whom queries regarding the prescription are to be addressed).

### *Gabapentin and chloral hydrate (Prescription Drug List, formerly Schedule F Drugs)*

Gabapentin and chloral hydrate are Prescription Drug List (PDL) (formerly Schedule F) drugs (not *Controlled Drugs and Substances Act - CDSA* drugs) as per federal legislation. The Prescription Review Program is governed by provincial regulations. Therefore:

Prescriptions for gabapentin and chloral hydrate are to be written with the total quantity and number of fills and quantity of each fill specified on the prescription.

Gabapentin and chloral hydrate may be 'prescribed' as per prescriptive authority as per Part K of the SCPP Regulatory Bylaws regarding prescriptive authority.

Gabapentin and Chloral Hydrate may be transferred as per Part N of the SCPP Regulatory Bylaws upon the request of a pharmacist.

The same requirements for all PDL drugs in regarding to filling, storage and documentation apply to gabapentin and chloral hydrate.

## Monitoring

The Registrars of the College of Physicians, the College of Dental Surgeons and the Saskatchewan Registered Nursing Association are authorized to collect and use the information gathered under the Program for the purposes of monitoring and education. “Alert” and “Explain” letters may be sent to the prescriber. Information regarding dispensing may be disclosed to SCPP for further review.

Under Part O of the [SCPP Regulatory Bylaws](#), the office of the Registrar of SCPP may gather and analyze information regarding the dispensing of medications for the purpose of limiting the inappropriate dispensing and use of the monitored list of drugs. Members must be requested to respond to inquiries from the College as to dispensing of medications monitored by the program.

Questions?  
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