What Pharmacists Need to Know About Dispensing Schedule IIs

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- In general: written or electronic only
- No refills and all records must be kept for three years
- 6 months to get the original prescription filled (first fill) except for opioid prescriptions which must be filled within 14 days from date written or the "do not fill until" date
- Unfilled electronic prescriptions for all controlled substances can be transferred. Link to DEA letter stating it is legally allowed: <u>https://www.pharmacy.ohio.gov/Pubs/Special.aspx</u> click on "Clarification on Transfer of Unfilled Controlled Substance Prescriptions" under the Controlled Substances heading
- No more than a 90 day supply for any opioid prescription
- There are only three things you can never change, clarify, or add to a C-II Rx: patient name, prescriber, & drug. You must talk to the prescriber directly.
- Oral prescription quantity = enough for the emergency period only (not a 72 hr. supply)
- Physician has 7 days to get the original prescription to the pharmacy for an oral prescription. The physician can e-script the original to the pharmacy or mail it if postmarked within 7 days.
- Partial dispensing for nursing home patients and terminally ill patients for up to 60 days from date written
- Partial dispensing for all other patients for up to 30 days from date written
- If the prescription for a C-II opioid analgesic was partially filled within 14 days of the date written, a pharmacist may dispense the remaining amount of the opioid analgesic after more than 14 days have elapsed, but within 30 days of date written.
- "Do not fill until" prescriptions issued at the same time are limited to a 90 day supply total
- Acute Pain Opioids 7 day supply for adults and 5 day supply for children (Physician requirements only)
- All controlled substances: Must check OARRS under following conditions:
 - 1) A patient adds a different or new OARRS reported drug to their therapy
 - 2) An OARRS report for the patient has not been reviewed within the previous 12 months
 - 3) A prescriber is located outside the usual geographical area of the pharmacy
 - 4) The patient is from outside the usual geographic area
 - 5) The pharmacist has reason to believe the patient has received prescriptions for OARRS drugs from more than one prescriber in the previous 3 months. Exception: Those prescriptions from prescribers that practice in the same physical location.
 - 6) The patient is showing signs of potential abuse or diversion.
- Faxed prescriptions: Three instances a pharmacy can receive a faxed schedule II prescription:
 - i) Patients in a nursing home or long-term care facility
 - ii) Narcotic drugs for patients in hospice care. The prescriber will note on the prescription that it is for a hospice patient.
 - iii) Patient receiving Rxs for a compounded sterile product containing a narcotic substance
- A physician may want to fax a schedule II controlled substance prescription to the pharmacy so the pharmacist can "have it ready" when the patient arrives. This is legal. However, do NOT dispense the medication until the patient brings the original, hard-copy prescription from the physician. The pharmacist should verify it against the faxed copy. The hard-copy, written prescription is considered the "original prescription".
- No schedule IIs can be prescribed for weight loss
- In general, physicians cannot prescribe controlled substances for themselves, siblings, spouse, parent, or children
- Inventorying schedule IIs A physical, exact count must be done every 13 months. A perpetual inventory does not eliminate this requirement.
- ICD-10 codes and days supply must be indicated on controlled substance prescriptions. If this is not done by the prescriber, you are not required to follow-up with the prescriber and get them.
- Theft or loss of controlled substances must be reported immediately to the Board of Pharmacy via the Portal or by telephone. A detailed report must be submitted via the online portal to the Board of Pharmacy within 30 days. It must also be reported to the DEA within one business day.
- Spilling or breakage of controlled substances: If the breakage or spillage is NOT recoverable, the pharmacy must document the circumstances of the breakage in the inventory records. Two individuals who witnessed the breakage must sign the inventory records indicating what they witnessed. The submission of a DEA Form 41 is not required for non-recoverable controlled substances.