Frequently Asked Questions:

Implementation of the December 2006 Pharmaceutical Act

Can a pharmacist prescribe over the counter smoking cessation products if they feel competent even though they have not successfully completed a QUIT/CATALYST training program?

Prescribing non-prescription medication must comply with the regulation, standards of practice and practice directions around prescribing. If a pharmacist is recommending and selling an OTC they can do so, as they have done in the past, and this is not prescribing. Please refer to part 15 of the regulations and practice directions on prescribing, prescribing and dispensing, sale of Schedule II drugs and the sale of Schedule III drugs posted on www.cphm.ca.

If a pharmacist is prescribing OTC Nicotine Replacement Therapy (NRT), they would be required to have successfully completed one of the approved training programs and comply with the rules around prescribing. However, a pharmacist does not have to prescribe these OTC items, they can assess the patient and make the OTC recommendation as they have likely done in the past.

Can a pharmacist prescribe the drug or vaccine they are going to administer via injection?

A pharmacist may not prescribe a drug or vaccine that he or she is going to administer using an advanced method. A pharmacist may only administer a drug or vaccine using an advanced method when it is prescribed by an authorized practitioner. Although a pharmacist is now included under the definition of a "practitioner", a pharmacist is not considered an "authorized practitioner". Only medical practitioners or physicians, dentists and nurse practitioners are included in the definition of authorized practitioner as it applies to the practice of pharmacy in Manitoba. Therefore, for an advanced method, a prescription is required from an authorized practitioner for the drug or vaccine to be administered by a pharmacist, with the exception of the publically funded vaccines included in Schedule 2 to the Pharmaceutical Regulation (this does NOT mean NAPRA Schedule II vaccines).

When does patient counselling need to be documented? What is the requirement for the patient counselling record?

According to section 73 in the regulations “A drug must not be dispensed unless the standards of practice and practice directions for counselling patients have been met and a counselling record is made.” Documentation of all patient counselling is not currently required but it is recommended. Pharmacists however, must document all patient refusals for counselling.

Section 73 of the Regulation states upon dispensing a medication and counselling the patient, a counselling record must be made. Section 3.0 of the Practice Direction - Patient Counselling
Further outlines documentation requirements for patient counselling. A simple example of a counselling record or log should allow for identifying a particular prescription dispensed, whether counselling was provided or if it was refused by the patient, and identify the pharmacist that interacted with the patient. The counselling record should allow for space in which to document any additional discussions that took place with the patient outside of regular counselling (e.g., change in dose, change in appearance, etc.). All patient interactions and counselling documented on the counselling record must be retained for 5 years. Pharmacy managers need to review the practice direction and ensure a system is in place to provide patient counselling and retain the required records.

Can a Pharm. D prescribe Schedule I drugs now?

Pharmacists seeking prescriptive authority as an Extended Practice Pharmacist must first make an application with the College and receive authorization to prescribe within their specialty collaborative practice. Applications to become an Extended Practice Pharmacist are available at www.cphm.ca under Implementation of the December 2006 Pharmaceutical Act.

How does a pharmacist in Manitoba register as an immunization provider in Manitoba and access MIMS?

A notice containing information on how to register as an immunization provider in Manitoba and access MIMS was released by Manitoba Health, Healthy Living and Seniors and sent to all pharmacies on February 7, 2014. This important notice should be reviewed by all pharmacists planning on administering vaccines and is posted on our website at the following link: http://mpha.in1touch.org/uploaded/web/New%20Pharmaceutical%20Act/Immunization%20Info%20for%20Pharmacists%20Feb%202014%20FINAL%20%282%29.pdf

How long should prescription and patient records be kept?

According to the new regulations, the retention period for all prescription and patient records is 5 years from the date of the last activity on the record (e.g., last refill on a prescription record). This applies to the following records:

a) Prescription record;
b) Drug label;
c) Patient profile;
d) Counselling record;
e) Drug acquisition and sales;
f) Prescriptions or copies of them, if they were refused to be filled;
g) Drug administration record;
h) Test interpretation record;
i) Test ordering and results record;
j) Prescribing record
These records can be retained either in electronic or written form. However, if a signature or initial is required on the record then it must be an original or electronic signature or initial.

The Practice Direction – Standard of Practice #12 – Records and Information outlines the requirements for electronic records and the need for a computer system to identify each user who is granted access, to control access to users and also to create an audit trail of access. The computer system must have sufficient security to ensure only authorized users have access. Backup of electronic records should occur daily and be tested regularly. The electronic records should be retrievable in the event that the system malfunctions or is destroyed. Pharmacy records including back-ups stored on or off-site must have adequate security to protect the records from unauthorized access, theft, use or loss.

Only, if the pharmacy’s internal policy can comply with the areas noted above, and the Standard of Practice #12 in the regulations, would electronic records be permissible.

In regards to prescribing Schedule II and III medications and Health Canada approved medical devices, can a pharmacist who prescribes these drugs or devices then submit a claim for coverage of the drug or device?

By definition, pharmacists are included as “practitioners” in Manitoba and can issue a prescription for Schedule II, Schedule III and Unscheduled drugs and medical devices. A pharmacist may want to check with the insurer if the product they are prescribing is covered. And if so, there is no reason why the insurance would not cover a prescription issued by a practitioner in Manitoba. If prescribing, and not just providing or recommending an OTC, pharmacists must follow the practice directions and the regulations with respect to prescribing and dispensing.

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