



College of Pharmacists of Manitoba

200 Tache Avenue, Winnipeg, Manitoba R2H 1A7

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Practice Direction

Standard of Practice # 5: Administration of Drugs including Vaccines

1.0 Scope and Objective:

1.1 Expected Outcome

This document is a practice direction by Council concerning the implementation of the principle of Administration of Drugs including Vaccines through the authority of *The Pharmaceutical Regulations* to *The Pharmaceutical Act* and *The Pharmaceutical Act*

1.2 Document Jurisdiction (Area of Practice)

Administration of drugs, including vaccines, can be done by all licensed pharmacists under section 108(1) of the regulations and by certified pharmacists under section 109(1).

1.3 Regulatory Authority Reference

Section 56(1) and 56(2) of regulations to the *Act* allows Council to create this practice direction.

2.0 Practice Direction

2.1 A pharmacist administering a drug, using an advanced method, or a vaccine regardless of the route of administration, must:

- 2.1.1 Collaborate with the patient and receive permission;
- 2.1.2 Be satisfied there has been compliance with Standard of Practice #5 of 56(1) of the regulations;
- 2.1.3 Take appropriate steps to ensure the patient is given the right drug including a vaccine, for the right reason, in the right dose, at the right time and using the right route;
 - 2.1.3.1 Review relevant and applicable immunization guidelines, such as those set out by Manitoba Health and the National Advisory Committee on Immunization (NACI) when administering a vaccine;
- 2.1.4 Possess current certification in emergency first aid and “CPR Level C”;
- 2.1.5 Ensure the pharmacy creates and maintains a policy and procedure manual that includes administration of drugs, including vaccines, and

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emergency response protocols;

- 2.1.6 Ensure the pharmacy maintains a readily accessible supply of epinephrine syringes (“pens”) for emergency use, diphenhydramine, cold compresses and non-latex gloves;
- 2.1.7 Be certified under section 114(1) when administering a drug, including a vaccine, under section 109(1) and has received informed written consent from the patient.
- 2.1.8 Comply with Sections 57 to 59 of the *Public Health Act* and its regulations when administering an immunizing agent.

2.2 Non Vaccine or Advanced Method Administration

- 2.2.1 When administering a drug as permitted under section 108(1) of the regulation and the drug is not a vaccine, the pharmacist may apply the requirements of section 2.3 and 2.4 as appropriate for the drug being administered.
- 2.2.2 The administration of the drug described in section 2.2.1 does require the authorization of the patient and the documentation thereof.

2.3 Before Administration:

- 2.3.1 The pharmacist must perform basic assessment of the patient proportional to the complexity of administration, that includes:
 - 2.3.1.1 History,
 - 2.3.1.2 Overall condition, e.g., vital statistics,
 - 2.3.1.3 Appropriate information if administering a drug by injection, including appropriate immunization information when administering a vaccine, e.g. reviewing immunization records, and
 - 2.3.1.4 Condition of the administration site.
- 2.3.2 The pharmacist must assess the appropriateness of the drug, including a vaccine, for the specific patient, including but not limited to:
 - 2.3.2.1 Indication
 - 2.3.2.1.1 For a publicly funded vaccine, the patient’s eligibility for that program, as set out by Manitoba Health
 - 2.3.2.2 Dose
 - 2.3.2.3 Allergy status
 - 2.3.2.4 Risk factors and contraindication
 - 2.3.2.5 Route of administration including:
 - 2.3.2.5.1 Appropriateness for the patient

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- 2.3.2.5.2 Appropriateness of the drug, including a vaccine
- 2.3.2.5.3 Drug and route follows established protocols, if applicable
- 2.3.3 The pharmacist must obtain consent from the patient or from the person authorized to consent on the patient's behalf to administer the drug, including consent for administration of a vaccine in accordance with *The Public Health Act* and the Immunization Regulation made under the *Act*.
- 2.3.4 The pharmacist must wash hands before (and after) caring for the patient.
- 2.3.5 In addition to the above, and before administering a drug under section 109(1), the pharmacist certified under section 114(1) must:
 - 2.3.5.1 Provide the patient the following information:
 - 2.3.5.1.1 Name of the drug, including a vaccine, to be administered,
 - 2.3.5.1.2 Indication for the drug, including a vaccine,
 - 2.3.5.1.3 Expected benefits and material risks of the administration and drug,
 - 2.3.5.1.4 Expected reaction,
 - 2.3.5.1.5 Usual and rare side effects,
 - 2.3.5.1.6 Rationale for the 15-30 minute wait following the administration,
 - 2.3.5.1.7 Importance of immediately consulting with the pharmacist if a reportable event occurs,
 - 2.3.5.1.8 Contacts for follow-up or emergency, and
 - 2.3.5.1.9 Any other information that a reasonable person in the same circumstances would require in order to make a decision about the drugs to be administered.
 - 2.3.5.2 ensure the pharmacy creates and maintains a clean, safe, appropriately private and comfortable environment within which the injection is to be administered.
 - 2.3.5.3 be satisfied the drug, including a vaccine, to be injected is stable, has been prepared for administration using aseptic technique, has been stored properly and is clearly labeled.
 - 2.3.5.4 ensure the route of administration and the site has been appropriately prepared for the administration.

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2.4 After Administration:

2.4.6 The pharmacist must:

- 2.4.1.1 Ensure the patient is appropriately monitored;
- 2.4.1.2 Respond to complications of therapy, if they arise;
- 2.4.1.3 Ensure devices, equipment and any remaining drug, including a vaccine, is disposed of safely and appropriately;
- 2.4.1.4 Document the administration of the drug, including a vaccine, as required by the regulations;
 - 2.4.1.4.1 In the case of an immunizing agent, record the information on the patient's health record as stated in Section 5 of the Immunization Regulation to the *Public Health Act*
- 2.4.1.5 Report any reportable events to the applicable agency or organization;
 - 2.4.1.5.1 In the case of an immunizing agent, within seven days after becoming aware of a reportable event, a health professional must report it in accordance with the Immunization Regulation to the *Public Health Act*
- 2.4.1.6 Provide relevant information to other regulated health professionals and provincial health agencies as appropriate, including reporting patient names and vaccine doses to the provincial vaccine registry (Manitoba Immunization Monitoring System).

2.5 Restrictions:

- 2.5.1 A pharmacist must not administer an injection to a person under five years of age.
- 2.5.2 A pharmacist must not administer a vaccine to a person under seven years of age.
- 2.5.3 A pharmacist must not administer a drug, including a vaccine, to a family member unless there is no other alternative.

2.6 Infection Control:

- 2.6.1 The pharmacist must use precautions for infection control, which includes:
 - 2.6.1.1 Handling all body fluids and tissues as if they were infectious, regardless of the patient's diagnosis,

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- 2.6.1.2 Washing hands before and after caring for the patient, and after removing gloves; and wearing gloves to prevent contact with body fluids excretions or contaminated surfaces or object;
- 2.6.1.3 Proper disposal of waste materials
- 2.6.1.4 Maintaining a setting for administration that is clean, safe, comfortable and appropriately private and furnished for the patient
- 2.6.1.5 Management of needle stick injuries.

3.0 Compliance Adjudication

All documentation must be readily accessible and open to regulatory review. All references to patient would include a person who is authorized to make decisions on behalf of the patient.

4.0 Appendices

Not applicable

A Practice Direction is a written statement of a regulatory position made by Council for the purposes of giving direction to members and owners about the conduct of their practice or pharmacy operations.

A Practice Direction carries similar legal weight to a Regulation under the Act and compliance by all Manitoba pharmacists and pharmacy license holders is expected.

The process for development, consultation, implementation, appeal and review is been published on the College website.

Development Source:	Standards of Practice Committee
Regulatory Reference:	Sec 108(1), 109(1), <i>The Pharmaceutical Regulations</i>
Consultation Close:	November 15, 2013
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