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Practice Aid: Adaptation

Adaptation of a prescription must be based on an existing prescription written by a licensed practitioner and is limited (by regulation) to:

- Dosage strength,
- Dosage interval and/or
- Formulation

Checklist for Adaptation of a Prescription

When adapting a prescription, a pharmacist must:

- ☑ have an original prescription from an authorized prescriber,
- ☑ have knowledge of the patient, the condition being treated and the drug therapy,
- ☑ obtain patient's agreement with the adaptation,
- ☑ create a new prescription with pharmacist signature,
- ☑ document the rationale for the decision to adapt the prescription, and notify the original prescriber promptly

Sample practice applications:

A prescription can be adapted if the pharmacist has knowledge of the patient, the condition being treated and the drug therapy and **IF** one or more of the following applies:

1. The drug prescribed is not commercially available or may be temporarily unavailable from the supplier,
   For example:
   - A certain strength of the drug is not available due to drug shortages and the pharmacist decides to adapt the prescription to use a lower dosage form to equal the same strength of the drug that is in short supply.
   - The prescription indicates the dosage strength of 300 mg, the patient is an adult without any other compromising health conditions and the prescriber was not aware the commercially available strength of the drug is 333 mg. This appears to be a clear in the prescribing. The pharmacist can adapt the prescription and dispense the 333 mg strength.

2. Information is missing from the prescription and sufficient information about the drug therapy can be obtained from the patient, the patient's record or other sources to determine that the adaptation will support compliance of the prescribed dosage,
   For example:
   - An analgesic is prescribed and there is no dosage on the prescription, the pharmacist can adapt the prescription and indicate the customary and usual dosage on the label.
   - The patient has been issued a refill of their chronic medication and the prescriber did not indicate a dosage on the prescription, the pharmacist can adapt the prescription and include the dose.

3. Adaptation will facilitate patient adherence,
   For example:
   - The prescription indicates that a solid dosage form is to be used and the patient prefers a liquid dosage form, the pharmacist can adapt the prescription to provide the same medication and dosage in a liquid form.
   - A topical preparation has been prescribed to be applied “daily” and it is unclear how many times a day that is to be, the pharmacist can adapt the prescription to include the customary and usual dosage.
   - A prescription for a drug included *The Controlled Drugs and Substances Act* where the prescribed strength is not commercially available in one dosage form, the pharmacist can adapt the prescription by using two dosage forms that equal the prescribed strength if the total amount of milligrams prescribed is not exceeded.

4. Adaptation will enable the patient to benefit from approved or existing third party coverage.
   For example:
   - The prescription orders a combination product and it is not a benefit for the patient’s drug coverage, the pharmacist can adapt the prescription to provide the same medication in another combination product that is covered or in single entity products.
   - The prescription orders a long acting dosage form for a product that has a large therapeutic window for a non-critical illness and not a benefit for the patient’s drug coverage, the pharmacist can change the dosage form and the dose of the same medication to a product form that is covered and meets the therapeutic goal.

Documentation:
The pharmacist must document and keep a record of all information related to adaptation of the prescription including:

1. Create a new prescription signed by the adapting licensed pharmacist.
2. Clearly reference the location of the original prescription on the new prescription.
3. Document the patient’s agreement to the adaptation.
4. Document the following:
   a) Patient name and, when available, the personal health information number (PHIN),
   b) Licensed pharmacist’s name and signature or initials,
   c) Original prescription information,
   d) Rationale for the decision to adapt,
   e) Description of adaptation and
   f) Follow-up plan when appropriate to do so

Notification:
The prescriber of the original prescription must be promptly notified and provided with the pharmacy name and address as well as the documented information above.