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 For the purposes of this practice direction, the term drugs includes vaccines.

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

   2.2.1 Be satisfied they are in compliance with Standard of Practice #5 of 56(1) of the regulations;
   2.2.2 Take appropriate steps to ensure the patient is given the right drug for the right reason, in the right dose, at the right time and using the right route;
   2.2.3 Review relevant and applicable immunization guidelines, such as those set out by Manitoba Health, Seniors and Active Living (MHSAL) and the National Advisory Committee on Immunization (NACI) before administering a vaccine;

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2.2.4 Possess current certification in either of emergency or standard first aid, in combination with either of “CPR Level HCP” or “CPR Level C”;
2.2.5 Ensure the pharmacy creates and maintains a policy and procedure manual that includes administration of drugs, and emergency response protocols;
2.2.6 Ensure the pharmacy maintains a readily accessible supply of injectable epinephrine, diphenhydramine, cold compresses and non-latex gloves;
2.2.7 Be certified under section 114(1) when administering a drug, under section 109(1) and has documented informed consent from the patient
2.2.8 Comply with Sections 57 to 59 of the Public Health Act and its regulations when administering an immunizing agent.

2.3 Infection Control:
   2.3.1 The pharmacist must use precautions for infection control, which includes:
   2.3.1.1 Handling all body fluids and tissues as if they were infectious, regardless of the patient’s diagnosis,
   2.3.1.2 Performing hand hygiene before and after caring for the patient, and after removing gloves (if used); and
   2.3.1.3 Take appropriate precaution to prevent contact with body fluids excretions or contaminated surfaces or object;
   2.3.1.4 Proper disposal of waste materials
   2.3.1.5 Management of needle stick injuries according to the pharmacy policies and procedures.

2.4 Before Administration:
   2.4.1 The pharmacist must perform basic assessment of the patient proportional to the complexity of administration that includes:
   2.4.1.1 History,
   2.4.1.2 Overall condition, e.g. vital statistics, and
   2.4.1.3 Condition of the administration site.

   2.4.2 The pharmacist must assess the appropriateness of the drug, for the specific patient, including but not limited to:
   2.4.2.1 Indication
   2.4.2.2 For a publicly funded vaccine, the patient’s eligibility for that program, as set out by MHSAL
2.4.2.3 Dose
2.4.2.4 Allergy status
2.4.2.5 Risk factors and contraindications
2.4.2.6 Route of administration including:
  2.4.2.6.1 Appropriateness for the patient
  2.4.2.6.2 Appropriateness for the drug,
  2.4.2.6.3 Following established protocols such as those in the drug manufacturer’s monographs, if applicable

2.4.3 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.

2.4.4 In addition to the above, and before administering a drug under section 109(1), the pharmacist certified under section 114(1) must:
  2.4.4.1 Provide the patient the following information:
    2.4.4.1.1 Name of the drug, to be administered,
    2.4.4.1.2 Indication for the drug
    2.4.4.1.3 Expected benefits and material risks of the administration and drug,
    2.4.4.1.4 Expected reactions,
    2.4.4.1.5 Usual and rare adverse effects,
    2.4.4.1.6 Rationale for the 15-30 minute wait following the administration,
    2.4.4.1.7 Importance of immediately consulting with the pharmacist if a reportable event (per the Immunization Regulation to the Public Health Act) occurs,
    2.4.4.1.8 Contacts for follow-up or emergency, and
    2.4.4.1.9 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.
  2.4.5.2 Ensure the pharmacy creates and maintains a clean, safe, appropriately private and comfortable environment within which the injection is to be administered.
  2.4.5.3 Be satisfied the drug, to be injected is stable, has been prepared for

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administration using aseptic technique, has been stored properly and is clearly labeled.

2.4.5.4 Ensure the route of administration and the site has been appropriately prepared for the administration.

2.5 After Administration:

2.5.1 The pharmacist must:

2.5.1.1 Ensure the patient is appropriately monitored;
2.5.1.2 Respond to complications of therapy, if they arise;
2.5.1.3 Ensure devices, equipment and any remaining drug, are disposed of safely and appropriately;
2.5.1.4 Document the administration of the drug, as required by the regulations;
  2.5.1.4.1 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
2.5.1.5 Report any reportable events to the applicable agency or organization;
  2.5.1.5.1 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
2.5.1.6 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 (Public Health Information Management System).

2.6 Restrictions:

2.6.1 A pharmacist must not administer an injection to a person under five years of age.
2.6.2 A pharmacist must not administer a vaccine to a person under seven years of age.
2.6.3 A pharmacist must not administer a drug, to a family member unless there is no other alternative.
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.

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