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Prescription Transfers for Controlled Substances under Health Canada Subsection 56(1) Exemption FAQ

(Updated: June 18, 2024)

1. What is the Health Canada subsection 56(1) exemption?

Section 56 (1) of the [Controlled Drugs and Substances Act](#) (CDSA) states:

The Minister may, on any terms and conditions that the Minister considers necessary, exempt from the application of all or any of the provisions of this Act or the regulations any person or class of persons or any controlled substance or precursor or any class of either of them if, in the opinion of the Minister, the exemption is necessary for a medical or scientific purpose or is otherwise in the public interest.

This section gives the federal Minister of Health the ability to grant exemptions related to controlled substances.

Please see the [Health Canada Subsection 56\(1\) exemption for patients, practitioners and pharmacists prescribing and providing controlled substances in Canada](#) for full details. Please also refer to question #12 for more information on other parts of this exemption.

2. What drugs are classified as “controlled substances”?

Controlled substances include narcotics, controlled drugs, benzodiazepines and other targeted substances. When the term “controlled substances” is used in this document, it refers to these medications.

For a full list of controlled substances, please see the [schedules to the CDSA](#), and the [Schedule to Part G to the Food and Drug Regulation](#).

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To protect the health and well-being of the public by ensuring and promoting safe, patient-centred,
and progressive pharmacy practice in collaboration with other health-care providers.*

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3. What has changed with prescription transfers?

Prior to this exemption, federal legislation did not allow for transfers of narcotics and controlled drugs. Further, benzodiazepines and targeted substances could only be transferred once.

With this exemption in place, pharmacists can:

- Transfer a prescription for a narcotic or controlled drug to another pharmacist within Canada or receive such a transfer, even if it has already been transferred.
- Transfer a prescription for benzodiazepine or targeted substance more than once or receive such a transfer.

Please note that prescription transfers for controlled substances under this exemption **must be pharmacist-to-pharmacist**.

Pharmacist must still adhere to the [Standard of Practice: Transfer of Patient Care](#) and the [Prescription Copies: Pharmacist Obligations & Considerations](#).

4. Can I transfer a prescription for a controlled substance out-of-province?

Yes, this exemption allows for prescriptions to be transferred to another pharmacist within Canada.

Although not required, **CPhM and CPSM recommend that pharmacists notify the prescriber if a prescription they wrote for a controlled substance is transferred outside of Manitoba, based on the pharmacist's professional judgement** (e.g. patient is not yet stable on OAT dose).

This notification to the prescriber can occur after the prescription has been transferred out and should only include the minimum information needed for the prescriber to perform their due diligence in ensuring continuity of care for the patient.

For example, the notification can simply state "Patient *Jane Doe* transferred the prescription for [name of drug] out-of-province. Should you have any further questions, please contact the patient directly."



5. Can prescriptions for narcotic and controlled drugs be transferred more than once?

Yes. All controlled substances (narcotics, controlled drugs, benzodiazepines and other targeted substances) may be transferred more than one time.

6. Does this apply to controlled substances covered under the Manitoba Prescribing Practices Program (M3P)?

Yes. Prescriptions for M3P medications can be transferred.

7. Can pharmacists transfer prescriptions for methadone and buprenorphine/naloxone?

Yes, this exemption applies to all controlled substances, including those that fall under the M3P such as methadone and buprenorphine/naloxone. Ensuring continuity of care is critical during these transfers, especially for opioid agonist therapy (OAT). Additional safeguards are required, especially if the OAT prescription is being transferred out of province.

Pharmacists must ensure that:

- all instructions from the prescriber regarding witness and carry instructions are accurately and clearly conveyed to the receiving pharmacy, and,
- any additional information required to ensure continuity of patient care and safety, including, but not limited to:
 - patient stability on current dosing,
 - time and dosage of last witnessed dose,
 - any recent missed doses,
 - information on other medications being prescribed and dispensed - specifically any that may be psychoactive, dispensed on an interval, or dispensed at the same time as the methadone or buprenorphine/naloxone.

In addition, if being transferred out of province, pharmacists are **strongly encouraged** to notify the OAT prescriber and their circle of care. This will facilitate collaboration between all those involved to ensure that care is not interrupted, and to establish a care plan for when the patient arrives at their destination and for their potential return to the original pharmacy.



For more information on this, please see the [CPhM Pharmacist OAT Guidelines](#).

8. Our pharmacy software does not yet have the functionality to transfer controlled substances. What can the pharmacist do in the meantime to facilitate prescription transfers for controlled substances?

According to section 57 of the Pharmaceutical Regulation, and the [Prescription Copies: Pharmacist Obligations & Considerations](#), pharmacists may transfer prescriptions verbally, by fax, or with a written copy.

Pharmacists should use the prescription transfer method that is least likely to result in transcription errors. However, until such controlled substance prescription transfers can be done directly from the software, pharmacists may:

1. Print a copy of the original prescription, and clearly indicate on it that it is a "PRESCRIPTION TRANSFER". The prescription copy must include all of the required information outlined in the [Practice Direction on Transfer of Patient Care](#) and the [Prescription Copies: Pharmacist Obligations & Considerations](#). Additional relevant information must also be included at the discretion of the pharmacist. The transferring pharmacist must then manually inactivate the prescription in the pharmacy software, and note the method and date of transfer, the pharmacy that received the transfer, and the name of the pharmacist receiving the copy
 2. Verbally transfer the prescription including all of the required information outlined in the [Practice Direction on Transfer of Patient Care](#) and the [Prescription Copies: Pharmacist Obligations & Considerations](#). Additional relevant information must also be included at the discretion of the pharmacist. The transferring pharmacist must then manually inactivate the prescription in the pharmacy software, and note the method and date of transfer, the pharmacy that received the transfer, and the name of the pharmacist receiving the copy.
9. What about intervals/restrictions present on the prescription?

Section 2.2 of the [Standard of Practice: Transfer of Patient Care](#) states:

2.2 After receipt of a request to transfer care to another licenced pharmacist, the licenced pharmacist must promptly provide the following information to the pharmacy of the patient's choice:



2.2.1 transfer of active prescriptions with remaining refills that can be legally transferred; and

2.2.2 other information that, in the opinion of the transferring licenced pharmacist may be required to ensure continuity of care.

Pharmacists transferring prescriptions that contain intervals and/or restrictions **must** communicate that information to the receiving pharmacist. The Standard of Practice on Transfer of Patient Care must be complied with when transferring prescriptions.

10. Can a pharmacy technician transfer out or receive a transfer for a controlled substance under this exemption?

No, provincial legislation does not permit pharmacy technicians to transfer or receive prescriptions for any drug from another pharmacy. For more details, please see the CPhM page on [Pharmacy Technician Scope of Practice](#).

Additionally, pharmacy technicians are not covered under the federal subsection 56(1) exemption and cannot transfer prescriptions for controlled substances.

11. Can prescriptions for controlled substances written before June 1st, 2024, be transferred?

Yes, as long as the prescription is valid and has part-fills remaining.

12. What about other parts of the Health Canada Subsection 56(1) exemption (e.g. permitting pharmacists to extend prescriptions for controlled substances)?

Aside from permitting prescription transfers for controlled substances, and [verbal orders from physicians and RN\(NP\)s for CDSA drugs for residents of personal care homes only](#), the remainder of this Health Canada exemption is **not** in effect in Manitoba. This is mainly due to provincial legislation related to M3P. All registrants will be advised should this change in the future.