

#### **College of Pharmacists of Manitoba**

# Provincial Prescription Regulation Summary Chart M3P and Non-M3P (Updated June 2024)

Table 1: Manitoba Prescribing Practices Program (M3P) Requirements						
CLASSIFICATION	DESCRIPTION	PRESCRIPTION REQUIREMENTS	REFILLS AND TRANSFERS	PURCHASE AND SALE RECORDS	FILES AND RECORDS	
e.g.: codeine morphine nabilone hydromorphone fentanyl ketamine Lomotil® Tylenol #4® Meperidine Tramadol Tramacet®  Narcotic Preparations  e.g., butalbital w/codeine (Fiorinal- C® 1/2)  Controlled Drugs Part I  e.g., Dexedrine® Ritalin® Adderall® Pentobarbital	Drugs listed in the Schedule to the Narcotic Control Regulations (NCR):  1. All single entity narcotics 2. All narcotics for parenteral use 3. Narcotic preparations with 1 narcotic + 1 active nonnarcotic ingredient 4. All products containing oxycodone, hydrocodone, pentazocine, methadone or heroin.  A combination, for other than parenteral use, containing only 1 narcotic (other than the 5 listed above) + 2 or more active nonnarcotic ingredients in recognized therapeutic doses.  Drugs listed in Part I of Schedule G of the Food and Drug Regulations (FDR), such as: - amphetamines - methylphenidate (for exceptions, see Table 2)	*IMPORTANT*: see note below the table for provincial prescribing and dispensing LIMITS for OPIOID prescriptions (regardless of M3P status).  All prescriptions for drugs listed on the M3P must include:  Patient demographics (name, address, PHIN and date of birth)  Name, strength, and dosage form of the drug,  Total quantity of the drug to be dispensed (in numbers and words),  The interval (#of days) at which each quantity (#of tablets) is to be dispensed (i.e., part fill instructions),  Therapeutic indication,  Directions for use,  Date prescribed, and,  Signature of the authorized practitioner.  M3P prescriptions also must:  contain only one drug per prescriptions form; and,  be presented to the pharmacy within 3 days (in addition to the day the prescription was written).  NO VERBAL ORDERS.  Prescribers are encouraged, but not required, to use the templates provided through their regulator's registrant portal. Please see the "M3P Prescription Guidance:	Part-fills NO REFILLS, but part fills are permitted if prescriber states in writing the total quantity to be dispensed, the quantity of each fill and the specific time interval.  Transfers Federal Subsection 56(1) Exemptions to the CDSA are in place that allow prescription transfers of ALL controlled substances. Please see this FAQ for more information.	All purchase and sale records of narcotic and controlled drugs must be recorded in a book, register, or other acquisition record (NCR Sect. 30 and 54 & FDR Sect. G.03.001 and G.04.002). Invoices must be retained in an easily retrievable manner for auditing purposes and kept for 5 years (Pharmaceutical Regulation Sect. 75)	All narcotic & controlled drug prescriptions must be kepi in a separate file in sequence of date and numbers (NCR Sect. 40 & FDR Sect. G.03.009) and must be kept for 5 years from the last date filled. May be in written or electronic format.	

#### **Provincial Prescription Regulation Summary Chart**

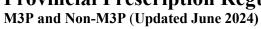




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Controlled Drugs Part II  Preparations e.g. Fiorinal® Tecnal® Phenobarbital w/codeine	A combination containing a controlled drug listed in Part II of Schedule G of the Food and Drug Regulations (FDR) such as: butalbital, butorphanol, pentobarbital, and barbituric acid.	Continued from above: Requirements & Recommended Templates" in your Registrant Portal for more information.  Electronic transmission in accordance with the Electronic Transmission of Prescriptions Practice Direction is permitted (see FAQ) and "M3P Prescription Guidance: Requirements & Recommended Templates" in your Registrant Portal more information.  M3P is not applicable to Personal Care Home Facilities or in- patients of a hospital.  Please see the following resources for more information:  List of drugs covered by the M3P Practice Direction for M3P Information Entered into DPIN, M3P FAQ; and, The Manitoba Prescribing Practices Program (M3P) category on the College's Resource Library page.						

\*IMPORTANT\*: note that the following Standards of Practice for opioid prescriptions:

- College of Physicians and Surgeons of Manitoba (CPSM) Standard of Practice for Prescribing Opioids; and,
- College of Registered Nurses of Manitoba (CRNM) RN(NP) Opioid Prescribing to Treat Non-Cancer Pain; and,
- Manitoba Veterinary Medical Association (MVMA) By-Law No. 1 (4-6-10 and 4-6-11),

only allow for prescriptions to be written for a maximum of three months, with dispensing authorized for no more than a one-month supply at a time (regardless of M3P status). See <a href="CPhM Companion Document">CPhM Companion Document</a> for more information.

**Note:** For all controlled substances, a perpetual inventory count must be maintained in written or electronic format. A physical inventory count must be conducted every 3 months and any discrepancies investigated. Please see College website for the <u>Narcotic & Controlled Drug Accountability Guidelines</u>.

**Note:** Any theft or unexplained loss of any controlled substance must be <u>reported to Health Canada and the College of Pharmacists of Manitoba</u> within 10 days of discovery. Additionally, local police must be informed of any theft without delay. For more information on this, including forgeries, please see the College website <u>here</u>.

## **Provincial Prescription Regulation Summary Chart** M3P and Non-M3P (Updated June 2024)



Table 2: Prescription Drug Requirements (NON-M3P Drugs)						
CLASSIFICATION	DESCRIPTION	PRESCRIPTION REQUIREMENTS	REFILLS AND TRANSFERS	PURCHASE AND SALE RECORDS	FILES AND RECORDS	
Exempted Codeine Preparations  e.g. Tylenol #1® Robaxacet-8®  Narcotic Preparations (verbal prescription narcotics)  - All narcotic preparations NOT covered under the M3P program e.g. Tylenol #3® Tylenol #2®	Products containing codeine up to 8 mg/solid oral dosage form OR 20 mg/30mL of liquid + 2 or more active nonnarcotic ingredients.  A combination, for other than parenteral use, containing only 1 narcotic + 2 or more active nonnarcotic ingredients in recognized therapeutic doses.	Prescription required as of February 1, 2016. Pharmacists may prescribe with quantity restrictions and follow the Exempted Codeine Preparations Practice Direction, Prescribing Practice Direction, and Prescribing and Dispensing Practice Direction.  Written prescription signed and dated by an authorized prescriber licensed to practice in Canada.  OR  Electronic transmission in accordance with the Electronic Transmission of Prescriptions Practice Direction is permitted (see FAQ).  OR	Part-fills Part Fills are allowed if prescriber states in writing or verbally the total quantity to be dispensed, the quantity of each fill and the specific time interval.  Transfers Federal Subsection 56(1) Exemptions to the CDSA are in place that allow prescription transfers of ALL controlled substances. Please see this FAQ for more information.  *IMPORTANT*: note that the following Standards of Practice for opioid prescriptions:  • College of Physicians and Surgeons of Manitoba (CPSM) Standard of Practice for Prescribing Opioids; and,  • College of Registered Nurses of Manitoba (CRNM) RN(NP) Opioid Prescribing to Treat Non-Cancer Pain; and,  • Manitoba Veterinary Medical Association (MVMA) By-Law No. 1 (4-6-10 and 4-6-11), only allow for prescriptions to be written for a maximum of three months, with dispensing authorized for no more than a one-month supply at	All purchase and sale records of narcotic and controlled drugs must be recorded in a book, register, or other acquisition record (NCR Sect. 30 and 54 & FDR Sect. G.03.001 and G.04.002). Invoices must be retained in an easily retrievable manner for auditing purposes and	All narcotic & controlled drug prescriptions must be kept in a separate file in sequence of date and numbers (NCR Sect. 40 & FDR Sect. G.03.009) and must be kept for 5 years from the last date filled. May be in written or electronic format.	
		authorized prescriber to a pharmacist transcribed to a written prescription by pharmacist permitted.	a time (regardless of M3P status). See CPhM Companion Document for more information.	kept for 5 years (Pharmaceuti cal Regulation Sect. 75)		

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Table 2: Prescription Drug Requirements (NON-M3P Drugs)						
CLASSIFICATION	DESCRIPTION	PRESCRIPTION REQUIREMENTS	REFILLS AND TRANSFERS	PURCHASE AND SALE RECORDS	FILES AND RECORDS	
Controlled Drugs – Part I and their preparations  e.g. Vyvanse® Concerta® Biphentin® Foquest®	Drugs listed in Part I of the Schedule to Part G of the Food and Drug Regulations (FDR).  Preparations are combinations containing only one controlled drug listed in Part I + one (or more) active non-controlled, non-narcotic drug(s).  Note: Vyvanse, Concerta,	Written prescription signed and dated by an authorized prescriber licensed to practice in Canada.  OR  Electronic transmission in accordance with the Electronic Transmission of Prescriptions Practice Direction is permitted (see FAQ).  NO VERBAL ORDERS.	Part-fills Part fills are permitted if prescriber states in writing the total quantity to be dispensed, the quantity of each fill and the specific time interval.  Transfers Federal Subsection 56(1) Exemptions to the CDSA are in place that allow prescription transfers of ALL controlled substances. Please see this FAQ for more information.	Same rules and requirements as immediately above.	Same rules and requirements as immediately above.	
	Biphentin, Foquest, and all of their generics were removed from the M3P list. All other Controlled Drugs (Part I) are still part of the M3P Program.					
Controlled Drugs - Part II & III and their preparations Part II - e.g.,	Drugs listed in Part II and III of the Schedule to Part G of the Food and Drug Regulations (FDR), such as:	Written prescription signed and dated by an authorized prescriber licensed to practice in Canada.  OR	Part-fills and Refills All prescriptions written by CPSM registrants OR all electronically transmitted prescriptions (by any prescriber) must indicate part-fills - total quantity to be dispensed, the quantity of each fill and the interval			
phenobarbital  Part III - e.g., testosterone	Barbiturates (except secobarbital & pentobarbital)     Anabolic steroids  Preparations are	Electronic transmission in accordance with the <u>Electronic Transmission of Prescriptions Practice Direction</u> is permitted (see <u>FAQ</u> ).  OR	must be specified.  Prescriptions written by any other prescriber when handed to the patient or given verbally may be refilled if the prescriber indicates the dates or intervals between refills.			
Controlled Drug Preparations - e.g., Bellergal®	combinations containing only 1 controlled drug listed in Part II or IIII + 1 (or more) active non-controlled, non- narcotic drug(s).	Verbal prescription directly from an authorized prescriber to a pharmacist transcribed to a written prescription by pharmacist permitted.	Transfers Federal Subsection 56(1) Exemptions to the CDSA are in place that allow prescription transfers of ALL controlled substances. Please see this FAQ for more information.			

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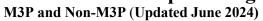




Table 2: Prescription Drug Requirements (NON-M3P Drugs)						
CLASSIFICATION	DESCRIPTION	PRESCRIPTION REQUIREMENTS	REFILLS AND TRANSFERS	PURCHASE AND SALE RECORDS	FILES AND RECORDS	
Benzodiazepines & Other Targeted Substances e.g., diazepam alprazolam clobazam	Drugs listed in the Schedule to the Benzodiazepines and Other Targeted Substances Regulations.	Written prescription signed and dated by an authorized prescriber licensed to practice in Canada.  OR  Electronic transmission in accordance with the Electronic Transmission of Prescriptions Practice Direction is permitted (see FAQ).  OR  Verbal prescription directly from an authorized prescriber to a pharmacist transcribed to a written prescription by pharmacist permitted.	Part-fills and Intervals  *IMPORTANT*: Note that the following Standards of Practice:  • CPSM Standard of Practice for Prescribing Benzodiazepines & Z-Drugs; and,  • MVMA By-Law No. 1 (4-6-10 and 4-6-11), only allow for benzodiazepine prescriptions to be written for a maximum of three months, with dispensing to be authorized for no more than a onemonth supply at a time. Please see CPhM Companion Document for more information.  Transfers Federal Subsection 56(1) Exemptions to the CDSA are in place that allow prescription transfers of ALL controlled substances. Please see this FAQ for more information.	For a period of 5 years, a record must be kept of all acquisition and sales of drugs, other than those sold at retail that do not require a prescription. (Pharmaceuti cal Regulation Sect. 75)	All prescriptions must be kept on file in numerical order and kept for 5 years from the last fill date. May be in written or electronic format.	
Other Prescription Drugs (Prescription Drug List)	All drugs listed in the Prescription Drug List (PDL) of the Food and Drug Regulations (FDR) or in Schedule I of the NAPRA National Drug Schedules (NDS).		Refills Prescriber must indicate number of refills on the original written or verbal prescription. Repeat PRN unacceptable.  Transfers Prescriptions are transferable.			

**Note:** For all controlled substances, a perpetual inventory count must be maintained in written or electronic format. A physical inventory count must be conducted every 3 months and any discrepancies investigated. Please see College website for the <u>Narcotic & Controlled Drug Accountability Guidelines</u>.

**Note:** Any theft or unexplained loss of any controlled substance must be <u>reported to Health Canada and the College of Pharmacists of Manitoba</u> within 10 days of discovery. Additionally, local police must be informed of any theft without delay. For more information on this, including forgeries, please see the College website <u>here</u>.