



## COLLEGE OF PHARMACIST OF MANITOBA

200 Taché Avenue, Winnipeg, Manitoba R2H 1A7

Phone #: 204-233-1411 | Fax #: 204-237-3468

E-Mail Address: [info@cphm.ca](mailto:info@cphm.ca) | Website: [www.cphm.ca](http://www.cphm.ca)

### TEMPORARY PHARMACY CLOSURES CHECKLIST

In accordance with the [Practice Direction: Permanent and Temporary Pharmacy Closures](#), the following actions must be completed to ensure the closing procedures adhere to the authority of [The Pharmaceutical Regulations](#) to [The Pharmaceutical Act](#) and [The Pharmaceutical Act](#).

PHARMACY LICENCE #	PHARMACY NAME
MANAGER LICENCE #	PHARMACY MANAGER NAME
DATE CLOSURE COMMENCES	
DATE OF RE-OPENING	
REASON FOR TEMPORARY CLOSURE	

I hereby confirm that I have read and understand the requirements of the [Practice Direction: Permanent and Temporary Pharmacy Closures](#). Furthermore, I acknowledge and agree that if i submit this document electronically and insert my name below, it is equivalent to my original ink signature.

\_\_\_\_\_  
Pharmacy Manager Signature

\_\_\_\_\_  
Date Reported

Upon completion of the above, the pharmacy manager named herein, is required to submit the document in full by email to [fieldops@cphm.ca](mailto:fieldops@cphm.ca) or by fax to 204.237.3468.



## COLLEGE OF PHARMACIST OF MANITOBA

200 Taché Avenue, Winnipeg, Manitoba R2H 1A7

Phone #: 204-233-1411 | Fax #: 204-237-3468

E-Mail Address: [info@cphm.ca](mailto:info@cphm.ca) | Website: [www.cphm.ca](http://www.cphm.ca)

It is permissible for a licensed pharmacy to be temporarily closed without surrendering its operating license, provided that the conditions of the Practice Direction: Permanent and Temporary Pharmacy Closures are met. Acknowledgement of the required actions having been completed, is required below.

ACTION REQUIRED FOR TEMPORARY CLOSURE OF A PHARMACY	DATE COMPLETED	PHARMACY MANAGER'S INITIALS
Except in emergency/urgent situations, the pharmacy manager must obtain the approval of the College for the planned closure <b>30 days in advance</b> of the temporary closure start date,		
All prepared prescription recipients must be contacted to advise of the closure and given the opportunity to obtain their prepared prescriptions prior to the temporary closure start date,		
Except in emergency/urgent situations, notices to the public (using in-store postings and media announcement, for example) must be made at least 30 days prior to the temporary closure start date,		
<p>Signage must be posted at the store entrance and a telephone answering machine message must be provided, advising the public about the closure, its duration, the location of the nearest licensed pharmacy, and other information to assist with obtaining necessary pharmacy services during the closure period:</p> <p><b>Name of other licenced pharmacy:</b> _____</p> <p><b>Phone Number:</b> _____</p> <p><b>Fax Number:</b> _____</p>		



## COLLEGE OF PHARMACIST OF MANITOBA

200 Taché Avenue, Winnipeg, Manitoba R2H 1A7

Phone #: 204-233-1411 | Fax #: 204-237-3468

E-Mail Address: [info@cphm.ca](mailto:info@cphm.ca) | Website: [www.cphm.ca](http://www.cphm.ca)

ACTION REQUIRED FOR TEMPORARY CLOSURE OF A PHARMACY	DATE COMPLETED	PHARMACY MANAGER'S INITIALS
<p>In compliance with 6(1) (b) and 23(1.1) (b) of the <a href="#">Personal Health Information Act</a> Amendment Act (2), arrangements must be made to provide access to any request for personal health information within 72 hours of that request.</p>		
<p><b>Include a description of how this will be completed:</b>            (Please use another page if needed)</p>		
<p>In single-pharmacy communities, alternate arrangements for medication access and provision of pharmacy services must be made with local prescribers or pharmacies in nearby communities.</p>		
<p><b>Include a description of how this will be completed:</b></p>		