



Pharmacist Prescribing Authority Summary Document (Updated February 2025)

The Manitoba [Pharmaceutical Regulation](#) authorizes pharmacists to engage in several distinct types of prescribing, as outlined below. When performing any prescribing activities, a licensed pharmacist assumes the responsibilities of a prescriber and must adhere to all applicable legislation, Standards of Practice, Practice Directions, and relevant regulatory and clinical guidelines. For further details, please refer to the applicable [Practice Directions](#).

As stated in Section 18 of the Pharmaceutical Regulation, pharmacists are responsible for engaging and performing only in areas of pharmacy practice where they possess the requisite knowledge, skills, and professional judgment.

When entering a prescription they have written into DPIN, pharmacists must use their five-digit license number preceded by the prefix "X" (e.g., X12345).

The Pharmaceutical Regulation authorizes the following distinct types of prescribing:

1. PRESCRIBING BY ANY LICENSED PRACTICING PHARMACIST

1.1. Adapting a Prescription (Section 69(4) of the [Pharmaceutical Regulation](#))

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

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

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,
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,
3. Adaptation will facilitate patient adherence,
4. Adaptation will enable the patient to benefit from approved or existing third-party coverage.

For more information, see the [Adaptation of a Prescription Practice Direction](#) and the [Practice Aid: Adaptation](#).

1.2. Continued Care Prescription (Section 122 of the [Pharmaceutical Regulation](#))

Pharmacists can refill a prescription beyond those authorized on the original prescription if:

1. the patient has a continuing need or a chronic condition which is considered stable;
2. the prescribing practitioner has died or retired within the previous six months or the prescribing practitioner has not responded to a refill authorization request and it would be onerous or impossible for the patient to contact or attend the original practitioner issuing the prescription in a timely manner;
3. the patient's history with the prescribed drug has not changed;
4. the patient has not experienced any adverse reactions to the medication; and
5. the prescription was originally filled by the same pharmacy.

The pharmacist must promptly notify the original prescribing practitioner, unless the practitioner is deceased or retired. A pharmacist may renew a prescription through continued care only once and the refill quantity cannot exceed that of the original prescription (no refills can be provided).

- E.g. if the prescriber's original prescription for drug X was 60 tablets with 2 refills, pharmacists can only provide a continued care prescription for 60 tablets, with no refills.

A benzodiazepine cannot be renewed through continued care unless the drug is used to manage a convulsive disorder or if there is a risk of a seizure due to sudden withdrawal of the medication.

Other drugs that fall under the *Controlled Drugs and Substances Act* (CDSA) (i.e. narcotics or controlled drugs) cannot be renewed as a continued care prescription.

1.3. Prescribing in a Public Health Emergency (Section 118(4) of the [Pharmaceutical Regulation](#))

Emergency prescribing is expected to be a rare occurrence. In the event of a public health emergency affecting all or part of the province, the Minister of Health may notify CPhM to authorize pharmacists to prescribe drugs beyond their current scope. Upon approval by Council, registrants may prescribe under Council-specified conditions until the emergency concludes. Details of the currently approved policy are available in the [Emergency Preparedness Resource Kit for Pharmacists](#).

1.4. Prescribing of a NAPRA Schedule II or III drug or a medical device (Section 118(1) of the [Pharmaceutical Regulation](#))

Section 118(1) of the Pharmaceutical Regulation authorizes pharmacists to prescribe:

- a) a drug listed on Schedule II of the [NAPRA National Drug Schedules \(NDS\)](#);
- b) a drug listed on Schedule III of the [NAPRA NDS](#);
- c) any unscheduled drug product with a [drug identification number \(DIN\)](#) or a natural health product with a [natural product number \(NPN\)](#); and,
- d) a Health Canada approved [medical device](#).

Although these drugs and medical devices do not require a prescription, pharmacists may prescribe them to ensure patient eligibility for insurance coverage or to include a Schedule II or III drug or vitamin in compliance packaging.

2. PRESCRIBING BY PHARMACISTS WITH ADDITIONAL TRAINING AND EDUCATION

2.1. Prescribing a drug for a self-limiting condition (*Section 118(2) and Schedule 3 to the [Pharmaceutical Regulation](#)*)

Pharmacists can receive authorization from the College to prescribe for the self-limiting conditions listed in [Schedule 3 of the Pharmaceutical Regulations](#) (with or without smoking cessation) once they have completed the required training.

For more information on prescribing for self-limiting conditions and how to receive authorization, see the following link [Prescribing Drugs for Self-Limiting Conditions | College of Pharmacists of Manitoba](#)

For more information on prescribing for smoking cessation and how to receive authorization, see the following link [Prescribing Drugs for Smoking Cessation | College of Pharmacists of Manitoba](#)

The list of drugs available for prescribing under Schedule 3 to the Regulation can be found here [Available Drugs for Prescribing under Schedule 3 to the Manitoba Pharmaceutical Regulation](#).

2.2. Prescribing a drug for uncomplicated, recurrent cystitis (*Section 118(5) of the [Pharmaceutical Regulation](#)*)

Pharmacists can receive authorization from the College to prescribe a drug to treat uncomplicated, recurrent cystitis in non-pregnant individuals, once they have completed the required training.

For more information on prescribing drugs for uncomplicated, recurrent cystitis and how to receive authorization, see the following link [Prescribing Drugs for Uncomplicated Cystitis | College of Pharmacists of Manitoba](#).

3. EXTENDED PRACTICE PHARMACIST (EPPH) PRESCRIBING (*Section 118(3) of the [Pharmaceutical Regulation](#)*)

Extended Practice Pharmacists (EPPHs) can prescribe any drug within the scope of their specialty, their area of practice, and their initial application with CPhM. However, they cannot prescribe drugs regulated under the federal [Controlled Drugs and Substances Act {CDSA}](#) (i.e. narcotic, controlled drug, or a benzodiazepine). Additionally, EPPHs must practice in a collaborative setting alongside other healthcare providers (physicians and/or nurse practitioners).

The [CPhM Pharmacist Public Directory](#) indicates if a pharmacist is registered as an Extended Practice Pharmacist, and under which specialty.

For more information on how to obtain and maintain an EPPH designation, see the following link [Extended Practice Pharmacist | College of Pharmacists of Manitoba](#).