



Practice Direction

Sale of NAPRA Schedule 3 Drugs (non-prescription, pharmacy only sales)

1.0 Scope and Objective:

1.1 Expected Outcome

This document is a practice direction of Council concerning the sale of NAPRA "Schedule 3 of the Manual" Drugs through the authority of The Pharmaceutical Regulations to *The Pharmaceutical Act* and *The Pharmaceutical Act*.

1.2 Document Jurisdiction (Area of Practice)

Schedule 3 drugs must only be distributed from a licensed community pharmacy as described under section 84(4) of the regulations.

1.3 Regulatory Authority Reference

Schedule 3 drugs may be sold in a self-selection area of the pharmacy under the direct supervision of a licensed pharmacist who is available to assist the patient or designate in medication selection.

2.0 Practice Direction

2.1 A licensed pharmacist must be available and accessible in-person to an individual who needs to make self-selection of a Schedule 3 drug to provide an opportunity for an assessment or to assist with the individual's self-selection.

2.2 Schedule 3 drugs shall only be sold in a licensed community pharmacy; and,

2.3 The sale of Schedule 3 drugs are not permitted for online sale, as the pharmacist does not have the opportunity to conduct an in-person assessment, or assist with the patient's self-selection.

2.4 A licensed pharmacist should take the necessary steps to enter into dialogue with, or provide information to, the patient or the designate who:

- a) requests help in selecting a Schedule 3 drug;
- b) appears to be having difficulty in selecting a Schedule 3 drug;
- c) is observed to be making frequent or repeat purchases of a Schedule 3 drug or purchasing a quantity that is therapeutically inappropriate; or
- d) is recognized as someone who presents a risk from the use of a Schedule 3 drug.

2.5 When engaging in a dialogue, the licensed pharmacist should gather specific information such as:

- 2.5.1 the condition or symptom(s) to be treated;
- 2.5.2 any previous history of complaint given as well as length of present symptoms;
- 2.5.3 current and relevant information regarding disease state(s), allergies and/or sensitivities;
- 2.5.4 current medications; and/or
- 2.5.5 other medications or therapies previously tried.

2.6 Dialogue must occur in a confidential manner.

2.7 The licensed pharmacist will enable the patient to make a choice and will discuss:

- 2.7.1 if recommending a drug therapy, directions for proper use and length of therapy, common adverse effects, and expected response or outcome or benefit(s);
- 2.7.2 non-drug treatments, if any;
- 2.7.3 follow-up with the licensed pharmacist or another health care professional if there is no improvement or symptoms change or worsen;
- 2.7.4 the need for referral to another health care professional if the condition or symptom(s) are deemed to be serious in nature; if unsure of the diagnosis or if the situation cannot be appropriately treated with non- prescription drugs; and,
- 2.7.5 the need for further dialogue with the patient directly (if a designate is involved or if a drug product is being delivered).

2.8 A licensed pharmacist will document the patient interaction and any recommendation(s) in the patient's health record, if such documentation is deemed appropriate.

2.9 A licensed pharmacist may refuse the sale of a Schedule 3 Drug.

3.0 Compliance Adjudication

All documentation must be readily accessible and open to regulatory review.

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.

Development Source:	Standards of Practice Committee
Regulatory Reference:	Sec 84(4), <i>The Pharmaceutical Regulations</i>
Consultation Close:	September 17, 2013
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