SOP 59

Guidance on the Amendments to the Legislation for the Supply of Prescription Only Medicines and Controlled Drugs during the COVID-19 Pandemic

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Purpose and Scope

In response to the outbreak of COVID-19, temporary amendments to the Medicinal Products (Prescription and Control of Supply) Regulations 2003 (as amended) and the Misuse of Drugs Regulations 2017 (as amended) have been made.

These temporary provisions are designed to ensure that patients can continue to access their ongoing treatment and 'regular' medicines during the ongoing pandemic and assist in easing additional burden on prescribers and pharmacists. Please ensure that the legislative changes and Joint Guidance are read and understood in conjunction with this SOP

This SOP is based on the **Medicinal Products (Prescription and Control of Supply) (Amendment) Regulations 2020,**
https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=2&cad=rja&uact=8&ved=2ahUKEwiXvKjghtvoAhVJUhUIHcjIAs8QFjABegQICBAB&url=https%3A%2F%2Fassets.gov.ie%2F72605%2F98dffcf01037406ea88dbf9c652f4c52.pdf&usg=AOvVaw1oGRDYB_n0Q0_NKI-CpkbC

the **Misuse of Drugs (Amendment) Regulations 2020**
https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=2ahUKEwirjLyzjNvoAhUUrHEKHcmQCLoQFjAAegQIBxAB&url=https%3A%2F%2Fassets.gov.ie%2F72606%2F0f7c0b37ce3f4d19814afc55db6e8cf9.pdf&usg=AOvVaw2lMzS5eMmFnQrnOBbABGr9

and the **PSI, HSE and Medical Council Joint Guidance for Prescribers and Pharmacists on Legislation Changes to Facilitate the Safe Supply of Medicines during the COVID-19 Pandemic**
https://www.thepsi.ie/Libraries/COVID/Guidance_for_prescribers_and_pharmacists_on_legislation_changes_to_facilitate_the_safe_supply_of_medicines_during_the_COVID-19_pandemic.sflb.ashx

Similar to the above guidance, the temporary amendments will be referred to in this document as ‘COVID-19 Emergency Provisions’.

LloydsPharmacy Ireland has an existing comprehensive suite of SOPs which all colleagues have reviewed. The Medicinal Products (Prescription and Control of Supply) (Amendment) Regulations 2020 and the Misuse of Drugs (Amendment) Regulations 2020 significantly affect the following LloydsPharmacy SOPs:

- SOP 2 Prescription Reception
- SOP 3 Legal and Clinical Assessment of an Rx
- SOP 10 Emergency Supply of a Prescription Only Medicine
- SOP 14 Controlled Drugs
- SOP 21 Methadone Dispensing Procedures and Guidelines
- SOP 31 Record Keeping and Completion of Documentation
- SOP 54 Information concerning Community Drug Schemes, Accurate Claiming Processes and Management and Prevention of Rejects.

The general principles and behaviours outlined in the existing SOPs must still be adhered to **except for** the processes that will change as a result of the COVID-19 emergency provisions outlined in this SOP.

The changes in procedure resulting from the COVID-19 emergency provisions outlined in this SOP are temporary and are only valid as long as the Medicinal Products (Prescription and Control of Supply) (Amendment) Regulations 2020 and the Misuse of Drugs (Amendment) Regulations 2020 are valid. An updated guidance will be issued by LloydsPharmacy Ireland once these temporary regulations are revoked or further amended.

Responsibility

All pharmacists, qualified pharmaceutical assistants and all colleagues who work in the dispensary must be trained to follow this SOP and must then complete the Record of Competence attached to the end of this SOP. Only those colleagues listed are to be considered competent to carry out the dispensing record keeping procedures in the pharmacy.

NB. Staff training should highlight that; when parts of the dispensing process are delegated to competent dispensary colleagues, relevant information is brought to the attention of the pharmacist who will decide what action, if any, needs to be taken.

Summary of the COVID-19 Emergency Provisions

The COVID-19 emergency provisions have been divided into five sections in this SOP. As an introduction, the five sections and a brief summary of each section follows:

1. **Electronic Prescription Transfer**. The amendments allow for the electronic transfer of prescriptions (only via the national electronic prescription transfer system which uses the *@Healthmail.ie* email account) between prescribers and pharmacies and removes the need for a paper equivalent.
2. **Validity Period of Prescriptions.** The legislation also extends the validity of medicinal products prescriptions from six to nine months and enables pharmacists to make additional supplies of prescription only medicines to patients off an existing prescription, ***only*** where in the pharmacist's professional judgement continued treatment is required and it is safe and appropriate to do so.
   This places significant emphasis on the pharmacist to use their professional judgement and discuss the patient's treatment with them, to ensure that it is appropriate and necessary for their continued treatment and care for further supplies to be made.
3. **Repeat Supply**. The general procedures which must be adhered to when issuing a repeat supply of an S1A or S1B medicinal product to a patient on foot of a prescription from a medical practitioner have been amended.
4. **Emergency Supply of Prescription Only Medicinal Products and Controlled Drugs**. Changes have also been made to the emergency supply provisions allowable at the request of a patient or prescriber.
5. **Record Keeping Requirements.** Changes have been made to the requirement to keep the original paper hard copy of the prescription in the pharmacy.

If in doubt as to whether it is the intention of the prescriber for a continued supply of a medicine to be made, or the pharmacist, having exercised their professional judgement is still unsure as to whether it is safe or in the patient's best interest to do so, the pharmacist should contact the prescriber to discuss the patient's care before dispensing the medicine. It is important to emphasise that collaboration between the prescriber and the pharmacist remains vital.

Section 1. Electronic Prescription Transfer

The legislation allows for a prescription to be transferred via a 'national electronic prescription transfer system', in a permanent and unalterable form, by electronic means. The approved national electronic prescription transfer system is Healthmail. More information is available at www.healthmail.ie and LloydsPharmacy SOP 42(a) Using Healthmail SOP.

To meet the requirements for a legally valid prescription via the national electronic prescription transfer system, the prescription must:

- be in an unalterable electronic form,

- be transmitted by the national electronic prescription transfer system (Healthmail only),
- clearly indicate the date of issue,
- clearly indicate the professional registration number of the prescriber, and
- be traceable electronically back to the prescriber.

Other prescription requirements under the relevant legislation must still be met but for prescriptions sent to the pharmacy via Healthmail, the prescriber's signature is not required to appear on the prescription. For the purposes of clarification, the prescription requirements are summarised in the below table:

The prescription must:	**S1A/S1B**	**CD4.1**	**CD2/CD3**
State the full name of prescriber (including first name)	✓	✓	✓
State the address of the prescriber	✓	✓	✓
State the prescriber's professional registration number (Note: signature not required for electronic transfer)	✓	✓	✓
Specify the date	✓	✓	✓
Specify a telephone number at which the prescriber may be contacted		✓	✓
Specify the name (including the first name) and address of the patient	✓	✓	✓
Specify the patient's GMS number if applicable	✓	✓	✓
Specify the age of the patient if under 12 years	✓	✓	✓
Specify (i) the name of the medicine, (ii) the dose to be taken, (iii) the form in the case of preparations, (iv) the strength (not required to be in prescriber's own handwriting)	✓	✓	✓
Specify the quantity to be supplied or duration of treatment	✓	Quantity in words and figures	Quantity in words and figures
Specify the quantity in words and figures (not required to be in prescriber's own handwriting)	×	✓	✓
In the case of a prescription for a total quantity intended to be dispensed in instalments, specify the number of instalments and the intervals at which the instalments may be dispensed	✓	✓	✓
In the case of a prescription to be repeated, specify the number of repeats	✓	✓	×

When a prescription is provided using Healthmail there is no need to obtain the original paper equivalent from the prescriber. However, the pharmacy must print a copy of the prescription as transmitted and treat it as an original prescription for the

purposes of record-keeping (retain on site for 2 years) and reimbursement, and to assist with dispensing preparation and checking. An electronic version of the prescription must also be retained (for 2 years).

The prescription may come from a prescriber, a hospital or a GP practice account (not all prescribers have a personal Healthmail address) but it must have the **medical council registration number (MCRN)** of the prescriber. The prescription can be attached as a scanned copy; attached in a typed-out format; or typed in the body of the email.

The prescription may not be in the usual format (e.g. GMS form) but must meet the requirements set out above. For GMS, GR, EU or Dental prescriptions, the printed copy must be numbered with the relevant scheme sequence number and placed in the claims bundle. For manual claims sent to the PCRS (EU, Dental or OST) a copy of the electronic prescription can be printed off and included in the paper bundle.

Prescriptions for **Opioid Substitution Treatment must be on the OST form** and scanned via Healthmail. For OST prescriptions, attached text or text in the body of the Healthmail email is not acceptable.

All prescription only medicinal products can be prescribed using the national electronic prescription transfer system including Schedule 2, 3 and 4 Controlled Drugs. Where a Schedule 2 or 3 Controlled Drug is prescribed using the national electronic prescription transfer system the prescription writing requirements still apply, however these **do not need to be in the prescriber's own handwriting.**

The electronic presentation of patient information by any other non-approved mechanism is not recognised in the legislation as a legally valid prescription (e.g. an email sent from a personal or commercial email account, the e-script service or a fax). Faxed prescriptions and medication charts are only to be used in the support of an emergency request, and not as valid prescriptions. These formats will still require a paper prescription or a Healthmail prescription to be sent to the pharmacy within 72 hours.

Please note that a pharmacy can send the electronic prescription transfer to another pharmacy for subsequent dispensing/supply using Healthmail. When sending a Healthmail prescription to another pharmacy, the pharmacist sending the prescription must inform the receiving pharmacy of the quantities of medicines already dispensed as well as the dates of dispensing. While such a practice is allowable, it should only be done at the request of the patient where there is a need for the patient to attend a different pharmacy in order to receive the prescribed medication. The pharmacy must still retain an electronic copy and a printed hard copy of the Healthmail prescription for 2 years.
The forwarding of a prescription from one pharmacy to another is NOT applicable to Schedule 2 or Schedule 3 Controlled Drugs prescriptions that have either been partially or fully dispensed.

Section 2. Validity Period of Prescriptions

Under the COVID-19 Emergency Provisions, the maximum period of validity of a prescription for a human medicinal product (excluding a prescription for a Schedule 2 or 3 Controlled Drug) is **9 months** from the date specified on the prescription. The pharmacist must use their professional judgement, in consultation with the patient, and if needs be the prescriber, to ensure that it is safe, appropriate and necessary to provided additional supplies of a medication for the patient's continued treatment and care. Previously a prescription for a prescription only medicinal product was valid for 6 months from the date specified on the prescription.

The validity of prescriptions for Schedule 2 or 3 Controlled Drugs is unchanged.

Schedule 4 Part 1 Controlled Drugs prescriptions may only be repeated if specified by the prescriber. Such Schedule 4 Part 1 Controlled Drugs prescriptions are valid for 9 months under these regulations instead of the previous 6 months but the rules with regard to intervals and to issuing repeats has not changed for Schedule 4 Part 1 Controlled Drugs.

For medicinal products prescriptions (excluding schedule 2, 3 and 4.1 controlled drugs) that have been dispensed in full (marked with the word 'dispensed' and the date on which it was dispensed), *prior* to the COVID-19 Emergency Provisions coming into force, the pharmacist may make additional supplies against the prescription subject to the requirements for repeat dispensing of S1A and S1B medicinal products set out in section 3 below. Previously once a prescription was dispensed in full no further supplies were permitted using that prescription.

Section 3. Repeat Supply of Prescriptions

Under the COVID-19 Emergency Provisions, the general procedures which must be adhered to when issuing a repeat supply of an S1A or S1B medicinal product to a patient on foot of a prescription from a medical practitioner are set out below. The tables in **Appendix 1 and Appendix 2** provide a summary of the key changes for ease of reference.

The pharmacist must use their professional judgement, in consultation with the patient, and if needs be the prescriber, to ensure that it is safe, appropriate and necessary to provide additional supplies of a medication for the patient's continued treatment and care. The intention of the legislation is not to enable additional supplies of a medicine for acute treatment such as a short-term antibiotic.

S1A prescriptions

- Where neither the number of repeats nor the intervals between repeats is specified, the prescription may be dispensed on **one additional occasion** (previously none), where the pharmacist considers it appropriate and necessary;

- In the case of a **health prescription** (i.e. GMS) which is not ordinarily endorsed to be repeated, the prescription may be dispensed on not more than **four occasions**;

- Where the intervals are specified but not the number of repeats, the prescription may be dispensed on not more than **four occasions**;

- Where the number of repeats is specified but not the intervals, the prescription may be repeated **at such intervals as the pharmacist deems appropriate** having regard to the specified dose and the maximum **nine month** (previously six month) validity period;

- Where the number of repeats specified on the prescription has been reached, the prescription may be dispensed on **three further occasions**, if the pharmacist deems it appropriate and necessary (Max validity 9 months);

- Where the prescription had been completed and endorsed as dispensed before these regulations came into being, **additional supplies may be made**, subject to the provisions above;

- Where the original prescription is not available (e.g. the original GMS prescription has been sent to PCRS for payment, leaving only a copy in the pharmacy), a medicine may be dispensed in accordance with these amended regulations, provided the pharmacist **makes a record of the reasons** for making the supply (e.g. on the daily audit). Record keeping requirements are detailed in section 5 below.

S1B prescriptions

- Where neither the number or repeats nor intervals are specified, the prescription may be repeated within the period of **nine months** (previously six) as often as the pharmacist deems appropriate;

- Where the intervals only are specified, the prescription may be dispensed at those intervals within the period of **nine months** (previously six);

- Where the number of repeats is specified but not the intervals, the prescription may be repeated **at such intervals as the pharmacist deems appropriate,** having regard to the specified dose and the maximum **nine month** (previously six month) validity period;

- Where the number of repeats as specified on the prescription has been reached, the prescription may be dispensed on **three further occasions**, if the pharmacist deems it appropriate and necessary;

- Where the prescription had been completed and endorsed as dispensed before these regulations came into being, **additional supplies may be made**, subject to the provisions above;

- Where the original prescription is not available (e.g. the original GMS prescription has been sent to PCRS for payment, leaving only a copy in the

pharmacy), a medicine may be dispensed in accordance with these amended regulations, provided the pharmacist **makes a record of the reasons** for making the supply (e.g. on the daily audit).

Controlled Drugs Prescriptions

The above S1A and S1B rules on repeats do not apply to Schedule 2 or Schedule 3 Controlled Drugs.

Schedule 4 Part 1 prescriptions may only be repeated if specified by the prescriber. Such Schedule 4 Part 1 prescriptions are valid for 9 months under these amended regulations (previously 6 months)

Section 4. Emergency Supply of Prescription Only Medicinal Products and Controlled Drugs

The current legislation permits pharmacists, in emergency circumstances, to supply certain prescription only medicines without a prescription. Emergency supply can be carried out at the request of a patient or at the request of a prescriber.

Emergency Supply at the Request of a Patient

Under the COVID-19 Emergency Provisions, a pharmacist can dispense up to **10 days' supply** of a **prescription only medicinal product** at the request of a patient (the previous allowance was 5 days).

As previously required when supplying a medicine under these provisions, the pharmacist must be satisfied that:

- there is an immediate need for the medicine to be supplied and it is impracticable to obtain a prescription without undue delay,
- the treatment has been prescribed for the patient on a previous occasion, and
- they can safely specify the dose of the medicine for the patient.

In addition, under the COVID-19 Provisions, a pharmacist is permitted to supply a **Schedule 2, 3 or 4 Controlled Drug** at the request of a patient where:

- it is unreasonable at the time of supply, in the circumstances arising from the COVID-19 emergency, for the person to obtain a new prescription for that medicinal product,
- it is in the opinion of the pharmacist that it is safe, appropriate and necessary for the continued treatment of the person for an emergency supply to be made, and
- no greater quantity of the product than will provide **5 days'** treatment is supplied

A pharmacist can also make an emergency supply, in the circumstances arising from the COVID-19 emergency, of up to **10 days' supply** of the following Schedule 4 Part 1 Controlled Drugs: midazolam, clobazam and clonazepam for the treatment of epilepsy.

Previously, a pharmacist was not permitted to supply an emergency supply of a Schedule 2,3 or 4 Controlled Drug at the request of a patient with the exemption of phenobarbitone supplied for the treatment of epilepsy.

As before, a pharmacist may also supply the following at the request of a patient:

- the smallest available size of an aerosol, cream or ointment,
- a full cycle of the oral contraceptive pill,
- the smallest quantity of an antibiotic that will provide a complete course.

Emergency supply at the request of a prescriber

A prescriber can request an emergency supply of a prescription only medicinal product whereby reason of an emergency, he or she is not in a position to provide the prescription immediately. Where a prescriber makes a request for an emergency supply for their patient, they must undertake to provide the prescription to the pharmacy within 72 hours.

In addition, under the COVID-19 Provisions, a pharmacist is permitted to supply a **Schedule 2, 3 or 4 Controlled Drug** at the request of a prescriber where:

- it is unreasonable at the time of supply, in the circumstances arising from the COVID-19 emergency, for the person to obtain a new prescription for that medicinal product,
- it is in the opinion of the pharmacist that it is safe, appropriate and necessary for the continued treatment of the person for an emergency supply to be made, and
- no greater quantity of the product than will provide **5 days'** treatment is supplied.

A prescriber can also request an emergency supply in the circumstances arising from the COVID-19 emergency, of the following Schedule 4 Part 1 Controlled Drugs: midazolam, clobazam and clonazepam for the treatment of epilepsy.

Legislation does not limit the quantity of these three specified Schedule 4 Part 1 Controlled Drugs that may be supplied at the request of a prescriber in these circumstances, however, the pharmacist should be satisfied that the quantity requested is safe and appropriate for the patient at that point in time.

Previously an emergency supply of a Controlled Drug in Schedule 2, 3 or 4 at the request of a prescriber could not be made, with the exemption of phenobarbitone supplied for the treatment of epilepsy.
Appendix 3 provides a summary of the changes made to the dispensing of Controlled drugs by the COVID-19 Contingency Provisions.

Section 5. Record Keeping Requirements

For prescriptions that are dispensed in compliance with the COVID-19 Emergency Provisions, for example in circumstances outlined in Section 3 above, and the original prescription is not available (for example a GMS standard or GMS repeat prescription that has been sent to PCRS for payment), the requirement to mark the prescription with the quantity and date of supply of each medicinal product and the name and address of the pharmacy does not apply.

In these circumstances the pharmacist must make a record of the reasons for making the supply under the COVID-19 Emergency Provisions as part of the prescription register (i.e. daily audit report).

This record must be retained on the pharmacy premises for a period of two years from the date of supply and be readily available for inspection.

Where a prescription is received via the national electronic prescription transfer system, the pharmacist must print the prescription as transmitted and treat it as an original prescription for the purposes of record keeping. This means that the printout must be marked at each supply in the normal way, with the quantity and date of supply of each medicinal product and the name and address of the pharmacy. Where a prescription is dispensed in full, the printout must be marked with the word ‘dispensed’ and the date on which it was dispensed.

All printouts of prescriptions transmitted via the national electronic prescription transfer system, as well as an electronic version of the prescription, must be retained for a period of two years on the pharmacy premises and be readily available for inspection. The retention period begins from the date on which the medicinal product was supplied, or for repeatable prescriptions from the date on which the prescription was dispensed for the last time.

Appendix 1 – Repeat Supply of S1A Medicinal Products - Key Changes under COVID-19 Emergency Provisions

Repeat Supply of S1A Medicinal Products (Classified as 'non-renewable' by the HPRA e.g. antidepressants and hypnotics)		
	Key Change	Pre-existing legislation
Prescription (for an S1A medicinal product excluding Schedule 2, 3 or 4 Part 1 Controlled Drug) does not state the number of occasions (e.g. repeat x 6), nor the intervals (e.g. monthly, weekly).	May be dispensed **on one <u>additional</u> occasion**, where it is the opinion of the pharmacist that it is appropriate and necessary for the continued treatment of the person for further supply to be made and it is unreasonable at the time of supply, in the circumstances arising from the COVID-19 emergency, for the person to obtain a new prescription for that medicinal product.	*Previously under these circumstances S1A medicinal products could only be dispensed on one occasion.*
Prescription (for an S1A medicinal product excluding Schedule 2, 3 or 4 Part 1 Controlled Drug) is a health prescription (e.g. a GMS standard prescription) and is not ordinarily endorsed to be repeated.	May be dispensed on no more than **four occasions** where it is the opinion of the pharmacist that it is appropriate and necessary for the continued treatment of the person for further supplies to be made.	*Previously under these circumstances' health prescriptions for S1A medicinal products could only be dispensed on one occasion.*
Prescription (for an S1A medicinal product) states the intervals that a medicinal product can be supplied but omits the number of occasions.	May be dispensed on no more than **four occasions**.	*Previously under these circumstances S1A medicinal products could be dispensed on no more than three occasions.*
Prescription (for an S1A medicinal product) states the number of occasions that a medicinal product can be supplied but omits the intervals.	May be dispensed on the number of occasions indicated on the prescription, at such intervals that the pharmacist considers appropriate, having regard to the specified dose rate and the maximum **9-month** validity period of the prescription under the Emergency COVID-19 Emergency Provisions.	*This provision remains unchanged; however the validity of prescriptions has changed from 6 to 9 months.*
The number of occasions specified on the prescription (for an S1A medicinal product) has been reached.	May be dispensed on **three further occasions** where in the opinion of the pharmacist it is appropriate and necessary for the continued treatment of the person for further supplies to be made.	*Previously in these circumstances the prescription could not be repeated on further occasions.*

Appendix 2: Repeat Supply of S1B Medicinal Products - Key Changes under COVID-19 Emergency Provisions

Repeat Supply: S1B Medicinal Products (Classified as 'Renewable' by the HPRA e.g. medicinal products for chronic conditions including blood pressure, diabetes or asthma)		
	Key changes	Pre-existing legislation
Prescription (for an S1B medicinal product) does not state the number of occasions (e.g. repeat x 6) nor the intervals (e.g. monthly, weekly) that the product may be supplied.	May be supplied by the pharmacist for up to **9 months**, on the number of occasions that the pharmacist deems appropriate, where it is in their opinion that it is appropriate and necessary for the continued treatment of the patient.	*Previously the pharmacist could make the supply for up to 6 months.*
Prescription (for an S1B medicinal product) states the number of intervals that a product can be supplied but omits the number of occasions.	May be dispensed for up to **9 months**, at the intervals stated on the prescription.	*Previously the pharmacist could make the supply for up to 6 months.*
Prescription (for an S1B medicinal product) states the number of occasions that a product can be supplied but omits the intervals.	May be dispensed at such intervals that the pharmacist considers appropriate, having regard to the specified dose rate and the maximum **9-month** validity period of the prescription under the COVID-19 Emergency Provisions.	*This provision remains unchanged; however the validity of prescriptions has changed from 6 to 9 months.*
The number of occasions specified on the prescription (for an S1B medicinal product) has been reached.	May be dispensed on **three further occasions** where in the opinion of the pharmacist it is appropriate and necessary for the continued treatment of the person for further supplies to be made.	*Previously in these circumstances the prescription could not be repeated on further occasions.*

Appendix 3: Controlled Drug Prescription Requirements – Key Changes under COVID-19 Emergency Provisions

	Schedule 2 or 3 Controlled Drugs	Schedule 4 Part 1 Controlled Drugs
The transfer of a prescription between the prescriber and dispensing pharmacy by electronic means is allowed using the national electronic prescription transfer system	✓	✓
When a prescription is transferred by electronic means, the requirements that elements of theprescription be handwritten **do not** apply	✓ Schedule 2 or 3 Controlled Drug prescription writing requirements still apply, however these **do not need to be in the prescriber's own handwriting.**	✓ As in previous legislation, not required to be handwritten.
Repeat Prescriptions Acceptable	✗ As in previous legislation Schedule 2 or 3 Controlled Drug prescriptions **cannot be repeated**.	✓ As in previous legislation Schedule 4 Part 1 Controlled Drug prescriptions may only be repeated if specified by the prescriber.
Validity of prescriptions	Remains at **14 days** i.e. a supply cannot be made later than 14 days after the date on the prescription.	The maximum period of validity of a prescription for a Schedule 4 Part 1 Controlled Drug is **9 months** from the date specified on the prescription.
Emergency supply at the request of a patient permitted	✓ Under the COVID-19 Provisions, a pharmacist is permitted to supply a **Schedule 2, 3 or 4 Controlled Drug** at the request of a patient where: • it is unreasonable at the time of supply, in the circumstances arising from the COVID-19 emergency, for the person to obtain a new prescription for that medicinal product, • it is in the opinion of the pharmacist that it is safe, appropriate and necessary for the continued treatment of the person for an emergency supply to be made, and • no greater quantity of the product than will provide **5 days'** treatment is supplied.	
Emergency supply at the request of a prescriber permitted	✓ Under the COVID-19 Provisions, a pharmacist is permitted to supply a Schedule 2, 3 or 4 Controlled Drug at the request of a prescriber where: • it is unreasonable at the time of supply, in the circumstances arising from the COVID-19 emergency, for the person to obtain a new prescription for that medicinal product, • it is in the opinion of the pharmacist that it is safe, appropriate and necessary for the continued treatment of the person for an emergency supply to be made, and • no greater quantity of the product than will provide **5 days' treatment** is supplied. Prescriber must provide the prescription to the pharmacy within 72 hours.	

Record of Competence

I have signed to say that I have read and understood SOP 59 Guidance on the Amendments to the Legislation for the Supply of Prescription Only Medicines and Controlled Drugs during the COVID-19 Pandemic .

Name	Signature	Date

Pharmacy Stamp: