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## THE PRESCRIPTION REVIEW PROGRAM

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The Prescription Review Program gathers data regarding a panel of drugs subject to abuse and/or diversion.

**PROGRAM PARTNERS:**

- Saskatchewan College of Pharmacists
- College of Physicians and Surgeons of Saskatchewan
- College of Dental Surgeons of Saskatchewan
- The Saskatchewan Registered Nurses' Association
- Saskatchewan Health

**OBJECTIVE:**

To reduce the abuse and diversion of a select panel of prescription drugs.

**THE PROGRAM:**

1. Alerts prescribers to possible multiple doctoring, inappropriate prescribing or use of medications to which the Prescription Review Program applies.
2. May seek an explanation to the relevant professional regulatory body where the data indicates prescribing and/or dispensing practices not consistent with acceptable professional standards; and
3. Encourages appropriate prescribing and dispensing practices by providing professional guidance to both prescribers and pharmacists.

**PRESCRIBER PARTICIPATION:**

Prescribers may prescribe any of the medications on the panel of monitored drugs so long as the following information is contained on each prescription in addition to the current legal requirements:

- a) The patient's date of birth;
- b) The patient's address;
- c) the patient's health services number;
- d) The total quantity of medication prescribed, both numerically and in written form; except when prescribing electronically, by email or by FAX when only one form is acceptable or available; and
- e) The prescriber's name and address.

Please refer to guidelines at:

[http://www.napra.org/Content\\_Files/Files/Electronic\\_Transmission\\_of\\_Prescriptions\\_Policy\\_Statement\\_and\\_Guidelines\\_Pharmacists.pdf](http://www.napra.org/Content_Files/Files/Electronic_Transmission_of_Prescriptions_Policy_Statement_and_Guidelines_Pharmacists.pdf)

Verbal prescriptions cannot be issued for any of the products included in the Prescription Review Program. Faxed prescriptions are acceptable if done according to the published guidelines for faxing prescriptions.

**DATA COLLECTION:**

The Drug Plan's electronic network with pharmacies will receive and store prescription information for benefit and non-benefit monitored drugs, for Drug Plan beneficiaries and non-beneficiaries who have a Saskatchewan Health Service card, and send this information electronically to the College of Physicians and Surgeons.

Pharmacists must continue to mail the College of Physicians and Surgeons a copy of any prescriptions for drugs monitored under the Prescription Review Program that were not successfully "adjudicated" or "captured" by the Drug Plan system. Upon receipt of the prescription copy, the College of Physicians and Surgeons will enter the information into their computer system.

**ADDITIONAL INFORMATION:**

The Prescription Review Program does not apply to medication orders for hospital inpatients or residents of licensed long term care facilities, or prescriptions issued by veterinarians.

While under federal law many of these drugs can be prescribed verbally, the written prescription requirement continues for all drugs under the new Program, including those that have been added.

Pharmacists may dispense part fills at their discretion, or prescribers may request part fills if the following information is set out in the prescription:

- a) The total quantity;
- b) The amount to be dispensed each time; and
- c) The time interval between fills.

Prescribers may issue **refills** as permitted under federal law. To summarize, prescription refills are NOT permitted for any Narcotic, but are permitted under the Program when issued in writing for:

- a) Controlled Drugs Level I and II, including Preparations, if the prescriber has specified the number, and frequency or interval between, refills,
- b) Benzodiazepines, if the prescriber has specified the number of refills and less than one year has elapsed since the date the prescription was issued. If the prescriber also specifies the interval between refills, the pharmacist may not dispense the refill until the interval has expired.
- c) Chloral hydrate if the prescriber has specified the number of refills.

Patient drug utilization profiles for the drugs in the Prescription Review Program, as well as all other prescription drugs, are accessible electronically through the Pharmaceutical Information Program (PIP) to those prescribers and pharmacists actively involved in the professional care of the patient in question. All prescribers and pharmacists are strongly encouraged to utilize the information available to them in the PIP when prescribing drugs that are high risk and/or dealing with patients who are high risk. Information about the PIP is accessible at [www.health.gov.sk.ca](http://www.health.gov.sk.ca). To inquire about receiving access to PIP, please contact [pipinformation@shin.sk.ca](mailto:pipinformation@shin.sk.ca) or (306) 787-9833.

If a prescriber or pharmacist is concerned about a patient's drug utilization history, he or she may contact the College of Physicians and Surgeons personally for confidential information during weekday daytime hours at (306) 244-7355.

**DRUGS SUBJECT TO THE PRESCRIPTION REVIEW PROGRAM:**

The following **categories of drugs** are included under the Prescription Review Program:

- Select narcotic and controlled drugs
- Amphetamines
- Anabolic Steroids
- Barbiturates
- Benzodiazepines
- Buprenorphine
- Chloral hydrate

**DRUGS SUBJECT TO THE PRESCRIPTION REVIEW PROGRAM (con't):**

An alphabetical list of generic names included in the above categories is noted below. All brands, strengths, and dosage forms of products with a generic name listed below are subject to the program, except where indicated otherwise.

The list is subject to change from time to time. Prescribers and pharmacists will be advised directly of the effective date of any additions or deletions. Questions should be directed to the College of Physicians and Surgeons at (306) 244-7355, or to the Saskatchewan College of Pharmacists at (306) 584-2292.

**THE PRESCRIPTION REVIEW PROGRAM PANEL OF DRUGS  
(by generic name)\***

ACETAMINOPHEN WITH CODEINE - in all dosage forms except those containing 8 mg or less of codeine  
ACETYLSALICYLIC ACID (ASA) WITH CODEINE - in all dosage forms except those containing 8 mg or less of codeine  
ALPRAZOLAM  
AMOBARBITAL  
ANILERIDINE  
BROMAZEPAM  
BUPRENORPHINE  
BUTALBITAL  
BUTALBITAL WITH CODEINE  
BUTORPHANOL  
CHLORAL HYDRATE  
CHLORDIAZEPOXIDE  
CLOBAZAM  
CLONAZEPAM  
CLORAZEPATE  
COCAINE  
CODEINE - as the single active ingredient, or in combination with other active ingredients, in all dosage forms except those containing 20 mg per 30 ml or less of codeine in liquid for oral administration  
DEXTROAMPHETAMINE  
DIAZEPAM  
DIETHYLPROPION  
FENTANYL  
FLURAZEPAM  
GABAPENTIN  
HYDROCODONE - DIHYDROCODEINONE  
HYDROMORPHONE - DIHYDROMORPHONE  
LEVORPHANOL  
LORAZEPAM  
MEPERIDINE - PETHIDINE  
METHADONE  
METHYLPHENIDATE  
MIDAZOLAM  
MORPHINE  
NANDROLONE  
NITRAZEPAM  
NORMETHANDONE-P-HYDROXYEPHEDRINE  
OXAZEPAM  
OXYCODONE - as the single active ingredient, or in combination with other active ingredients in all dosage forms  
PANTOPON  
PENTAZOCINE  
PENTOBARBITAL  
PHENOBARBITAL  
PHENTERMINE  
PROPOXYPHENE  
SECOBARBITAL  
TEMAZEPAM  
TESTOSTERONE  
THIOPENTAL  
TRIAZOLAM

\* **Note** - The Bylaw contains category names as noted on the previous page. Generic names are provided above for reference only.