



Louisiana Board of Pharmacy

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MEMORANDUM

To: Licensees & Interested Parties
From: Malcolm J Broussard, Executive Director
Date: October 9, 2020
Re: QAA ~ Questions Already Answered

Gov. Edwards issued [Proclamation 134 JBE 2020](#) extending the public health emergency through November 6, 2020.

Posted September 11, 2020

Gov. Edwards issued [Proclamation 117 JBE 2020](#) extending the public health emergency until October 9, 2020.

Posted August 28, 2020

During their March 25 meeting, the Board determined it appropriate to extend the expiration dates of certain credentials and applications.

- For pharmacy intern (PNT) registrations, pharmacy technician candidate (PTC) registrations, and pending applications for pharmacist licensure, the Board took note of the closure of testing facilities preventing interns, technician candidates, and pharmacy graduates from taking their licensure examinations. The Board extended the expiration date for all such credentials and applications until September 30, 2020. Since that time, the testing facilities have re-opened and examinations have resumed. The Board has determined it appropriate to not extend the expiration dates beyond September 30. The Board sent notice to those licensees via email on August 30 of that decision.
- For practitioners holding controlled dangerous substance (CDS) licenses, the Board took note of the stay-at-home order in the beginning of the public health emergency and extended the expiration date for those CDS licenses to September 30, 2020. Since that time, the stay-at-home order has been rescinded, and business processes have resumed. The Board has determined it appropriate to not extend the expiration dates beyond September 30. The Board

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sent notice to those practitioners via email on August 30 of that decision.

- For holders of medication administration registrations, the Board took notice of the absence of CPR renewal opportunities due to the stay-at-home order and then to physical distancing requirements. The Board determined it appropriate to extend the expiration date of all medication administration registrations expiring prior to the end of September to September 30, 2020. Since then, the stay-at-home order has been rescinded; however, the physical distancing requirements are still in place. The Board has determined it appropriate to further extend the temporary expiration date of all medication administration registrations scheduled to expire prior to the end of December to December 31, 2020.

Gov. Edwards issued [Proclamation 110 JBE 2020](#) extending the public health emergency until September 11, 2020.

Posted on August 7, 2020

Gov. Edwards issued [Proclamation 101 JBE 2020](#) extending the public health emergency until August 28, 2020.

Posted on July 24, 2020

Gov. Edwards issued [Proclamation 96 JBE 2020](#) extending the public health emergency until August 7, 2020.

Posted on June 26, 2020

During their June 25 meeting, the Board voted to terminate its recognition of NABP Passports on July 31, 2020. Effective August 1, 2020, NABP Passports will no longer be valid for practice within or for the State of Louisiana. Persons holding an NABP Passport and intending to practice within or for the State of Louisiana must first acquire a credential from the Louisiana Board of Pharmacy.

During their June 25 meeting, the Board approved an [Emergency Rule](#) to suspend the collection of license renewal fees for existing businesses located within the State of Louisiana for those credentials which are scheduled to expire between July 1, 2020 and June 30, 2021.

Gov. Edwards issued [Proclamation 83 JBE 2020](#) extending the public health emergency until July 24, 2020

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Posted on May 15, 2020

Gov. Edwards issued [Proclamation 58 JBE 2020](#) extending the public health emergency until June 5, 2020.

Posted on April 21, 2020

The FDA has issued a [temporary guidance](#) that allows a hospital to request a state-licensed pharmacy to compound certain specific medications for hospital patients in the absence of a patient-specific prescription. The guidance contains certain procedural requirements, including a requirement for the compounding pharmacy to obtain prior approval by the Board, as well as certain technical requirements relative to assigned beyond-use dates.

Posted on April 19

We saw the April 15 emergency order authorizing pharmacists to order and perform COVID-19 testing. Does that order also include the rapid serology testing for COVID-19 antibodies?

The intent of the emergency order from the State Health Officer is for diagnostic testing for COVID-19. Since serology testing assesses for the presence of antibodies and are not diagnostic for active infections, serology testing is not covered by this emergency order.

Our pharmacy's pharmacist-in-charge (PIC) has a medical condition which places them in a high-risk category and needs to work from home. We are aware of the Board's rules for a PIC which requires them to be physically present and practicing in the pharmacy for at least 20 hours per week. Is there any waiver to that rule available?

The Board has not waived that rule. In the event a PIC is unable to be physically present and practicing in their pharmacy for at least 20 hours per week (or 50% of the time if the pharmacy is open less than 20 hours per week), then the pharmacy should designate a new PIC.

Posted on April 15

Earlier today, the State Health Officer issued an [Emergency Order](#) authorizing pharmacists to order COVID-19 testing.

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Posted on April 14

In response to inquiries from marijuana pharmacies as to whether they may receive written recommendations for therapeutic marijuana products from physicians authorized to issue such recommendations by means of email attachments in lieu of facsimile transmissions, the Board issued this [guidance document](#) earlier today.

The federal DEA issued a temporary waiver of its “5% rule” which will allow – during the period of the public health emergency – one DEA registrant to distribute more than 5% of its total calendar year distributions of all controlled substances to another DEA registrant without obtaining a separate registration as a distributor. The Board has issued a corresponding waiver of its similar 5% rule for the same period of time. The Board issued this [guidance document](#) earlier today.

The Board has been working with the La. Dept. of Health and the Board of Medical Examiners on the issue of therapeutic interchange by pharmacists, and the Board issued this [guidance document](#) earlier today.

Posted on April 8

We know there are supply chain issues for several medications. We are approaching the labeled expiration date for some of our inventory for which there are known supply chain issues. We recall that FDA has extended the expiration dates for certain medications in the past. Do you have any information on whether the FDA has extended expiration dates for any medications during this emergency?

The FDA does have authority to extend expiration dates for specific lots of certain medications, and when it does so, that agency updates its [searchable database](#) with that information. In the event you have questions about specific medications you should contact the FDA at DrugShortages@fda.hhs.gov.

Posted on April 3

We heard about a notice from the DEA about exceptions to some of the requirements for emergency verbal prescriptions for Schedule II medications. What are those exceptions?

The DEA recently posted a [guidance document](#) providing two exceptions – for the duration of the public health emergency – to the current requirements for emergency verbal prescriptions for Schedule II medications. In summary, the two exceptions are:

- The prescriber has 15 days (instead of the usual 7 days) to get the written prescription authorizing the emergency prescription to the dispensing pharmacy.
- In lieu of getting a written prescription to the dispensing pharmacy, the prescriber may send that prescription by facsimile, photograph, or scan.

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We heard something about an exception from the DEA that would allow early refills on prescriptions for controlled substances. Do you have any information on that?

The DEA recently posted a [guidance document](#) allowing early refills on refillable prescriptions for controlled substances if permitted by state law or rule. To complement this DEA exception – for the duration of the public health emergency – the Board is waiving the restriction in its rule (§2519.C.2) relative to the refilling of refillable prescriptions for controlled substances. With this allowance, pharmacists may dispense partial fills or refills up to the total quantity authorized on the prescription (original quantity plus refills).

Our pharmacy supplies the medications to Automated Medication Systems (AMS) in nursing homes. The Board’s current rule requires the stocking and restocking of those devices by pharmacists, or in the alternative, pharmacy technicians under the supervision of a pharmacist. To maintain physical distancing requirements and reduce traffic in nursing homes, are there any other options available from the Board?

The Board recently approved a proposed revision to that rule (§1217) and we are in the process of promulgating that proposed revision. Due to the additional time necessary to promulgate rules during the public health emergency, the Board has approved – for the duration of the public health emergency – the immediate implementation of the proposed revision of §1217 relative to the stocking and restocking of an AMS. The significant change is reflected in Subsection B:

§1217. Stocking and Restocking

- A. The stocking and restocking of medications and devices within an automated medication system shall be performed by a pharmacist, or in the alternative, a pharmacy intern, pharmacy technician, or pharmacy technician candidate under the supervision of a pharmacist.
- B. When the pharmacy employs electronic product verification procedures as described within this Section, the stocking and restocking of medications and devices within an automated medication system may be performed by other personnel approved by the pharmacist-in-charge.
 1. A bar code verification, electronic verification, or similar verification process which prohibits any human intervention following pharmacist verification of the product may be utilized to assure the correct selection of drugs to be placed into an automated medication system.
 2. The use of a bar code, electronic verification, or similar verification process shall require an initial quality assurance validation followed by ongoing quality assurance reviews at intervals no greater than 90 days since the previous review, all conducted by a pharmacist.

We know the Board’s rules for the annual inventory of all controlled substances in our pharmacy can be conducted on any date but we still conduct our annual inventory on the May 1 date previously required. Can we get a waiver or some type of latitude to conduct that inventory after the public health emergency has been terminated?

For those pharmacies with a scheduled annual inventory date occurring during the COVID-19 public health emergency, the Board will exercise enforcement discretion and not take any disciplinary action for that issue provided the pharmacy conducts that inventory as soon as possible following the termination of the public health emergency.

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Posted on March 30

Does the Board have any guidance for pharmacies delivering prescriptions for controlled substances on how to comply with the requirement for a photo identification?

The controlled substance law requires a pharmacy dispensing a prescription for any controlled substance to require the person purchasing or receiving such prescription to produce a photo identification card unless the patient or patient's agent is known to the pharmacist. If the pharmacist knows the patient or patient's agent, no identification card is required. The law requires the production of the identification card, but it does not require the documentation of the identification card.

Does the Board have any guidance for pharmacies on how to comply with requirements for the patient or patient's agent to provide a signature for receipt of the prescription? Can we get a waiver from that requirement?

The Board does not require any signature for receipt of a prescription. We are aware most third-party payors have such a requirement. The Board cannot issue a waiver to another organization's requirement. If you have not already done so, we encourage you to contact the third-party payor for information on that requirement during the public health emergency.

Posted on March 28

Unfortunately, we need to close our pharmacy temporarily; we don't have enough staff left to safely dispense prescriptions. How do I document that decision for the Board?

We have received inquiries from pharmacies which are making the difficult decision to close temporarily during the public health emergency. No forms are required to document that closure; however, we do request notice to your compliance officer or the Board office (info@pharmacy.la.gov). We need to know the date of temporary closure, an anticipated date of re-opening (if known), and what measures you have implemented to inform your patients on how to obtain their prescription medications during the closure.

I'm licensed in another state but not in Louisiana. I'm available to help out – how do I get a temporary license to practice in Louisiana?

We have received requests from pharmacists and pharmacy technicians – both in Louisiana and in other states – seeking temporary permission to practice in states where they are not licensed. The National Association of Boards of Pharmacy (NABP) has just implemented a new service called **NABP Passport**. Pharmacists and pharmacy technicians seeking temporary permission to practice in other jurisdictions

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where they are not licensed should apply to NABP to obtain a NABP Passport. There is no cost to the applicant. The Louisiana Board of Pharmacy recognizes the NABP Passport for Louisiana as valid for practice. Additional information is available in this [guidance document](#), which is also posted on the Board's [COVID-19 webpage](#).

Do you know where we can get personal protective equipment (PPE) for our pharmacy staff? I've heard there are recommendations for how to conserve our dwindling supply; where is that information?

We have received requests from pharmacies seeking sources for personal protective equipment (PPE) as well as guidance on conservation of those resources and mitigation strategies for shortages.

- The La. Dept. of Health has developed a [webpage](#) with a link to PPE vendors.
- The federal FDA is providing conservation strategies for PPE; the full recommendations may be found in FDA's letter, [Surgical Mask and Gown Conservation Strategies – Letter to Healthcare Providers](#). FDA has also published a list of [FAQs](#) regarding surgical masks and gowns.
- The USP Compounding Expert Committee released a resource on [Shortages of Garb and Personal Protective Equipment \(PPE\) for Sterile Compounding During COVID-19 Pandemic](#).
- CriticalPoint® offers [strategies](#) for implementing these USP Guidelines.

Posted on March 26

During their March 25 meeting, the Board approved a variance of the current rules for staffing ratios for pharmacy interns, pharmacy technicians, and pharmacy technicians. This [guidance document](#) explains the flexible staffing ratios in effect for the public health emergency.

We have noticed an increase in physicians attempting to give us verbal prescriptions for controlled substances listed in Schedule II. Does the Board have any guidance on whether that is permitted?

The federal rules for controlled substances permit the use of verbal prescriptions for drugs listed in Schedule II, subject to certain requirements. This [guidance document](#) contains important information for pharmacists contemplating accepting such prescriptions.

Posted on March 25

We saw the March 23 notice rescinding the Emergency Rule about the limitations on dispensing chloroquine and hydroxychloroquine, but now there is new information about the rapid growth rate of the COVID-19 disease in New Orleans. Maybe we should limit

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our dispensing of those drugs for the next 30-60 days to ensure there is enough supply for those new cases plus all the existing prescriptions for other diagnoses. Does the Board have any new guidance for dispensing pharmacists?

During their meeting on March 25, the Board reviewed the new information and developed new guidance for dispensing pharmacists, a copy of which is posted [here](#) and on the Board's [COVID-19 webpage](#).

We saw the earlier announcement about the temporary extension of the expiration date for Medication Administration registrations scheduled to expire in March, April, and May until Sept. 30, 2020. What about other credentials like pharmacy technician candidate registrations, pharmacy intern registrations, and CDS licenses?

The Board has authorized temporary extensions of expiration dates for all of the following credentials scheduled to expire during March, April, or May until Sept. 30, 2020:

- Medication Administration registrations (MA.xxxxxx)
- Pharmacy Technician Candidate registrations (PTC.xxxxxx)
- Pharmacy Intern registrations (PNT.xxxxxx)
- Controlled Dangerous Substance licenses (CDS.xxxxxx)

Credentials which have been extended will show a newly-created status on the website of "Active with Temporary Extension."

In addition, the Board has authorized the same extension of expiration date until Sept. 30, 2020 for all pending applications for pharmacist licensure and other credentials that were scheduled to expire during March, April, or May. We are monitoring the course of the public health emergency, and if it appears an additional extension is necessary beyond Sept. 30, 2020, the Board will make that decision in a timely manner.

For those pharmacies supplying emergency drug kits (EDK) to nursing homes and other facilities, do we still have to inspect those kits every 30 days even though they have not been used and there are no expired drugs in the kits?

For the duration of the COVID-19 public health emergency, the Board will exercise enforcement discretion with respect to §1713.I.1 of the Board's rules, which requires the inspection of an EDK every 30 days plus or minus 5 days. In the event the pharmacy has the capacity to verify (through technology or reliance on facility personnel) that an EDK has not been opened and does not contain any expired drugs, the pharmacy need not retrieve the kit for inspection, provided the pharmacy retains documentation of the name of the nurse performing the visual inspection and the date of such inspection, and makes such documentation available to the compliance officer upon request.

Does the Board have any guidance on how to satisfy the patient counseling requirements without a 'face-to-face' encounter?

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The Board's rules for patient counseling contain a provision for counseling when 'face-to-face' is not possible or appropriate:

1. A pharmacist shall counsel the patient or caregiver "face-to-face" when possible or appropriate. If it is not possible or appropriate to counsel the patient or caregiver "face-to-face", then a pharmacist should counsel the patient or caregiver by using alternative methods. The pharmacist shall exercise his professional judgment in the selection of alternative methods, including but not limited to, telephonic or electronic communication with the patient or caregiver.

[LAC 46:LIII.517.E.1; page 201 in [Louisiana Pharmacy Law Book](#)]

Do the pharmacy's delivery drivers need to have any special approval to be on the road? Are there any documentation requirements or protocols from the Board?

The Board has no rules relative to a pharmacy's delivery drivers. Given the current Stay-at-Home order in Louisiana, we encourage pharmacies to consider providing their drivers with some documentation demonstrating they are authorized by the pharmacy to deliver prescriptions to patients. In the event of an inquiry, that documentation may save some time.

Posted March 23

Based on new information about the supply chain for chloroquine and hydroxychloroquine, and the removal of those drugs from the FDA's drug shortage list, the Board's basis for the Emergency Rule has been resolved. The Board determined it appropriate to rescind the Emergency Rule effective immediately and issued this [guidance document](#).

Posted March 22

In response to continued reports of inappropriate use, hoarding, and restricted distribution of chloroquine and hydroxychloroquine, resulting in hospitals treating patients with confirmed cases of COVID-19 having difficulty obtaining adequate supplies of the drugs, the Board adopted an Emergency Rule effective today limiting the dispensing of those drugs by pharmacists when prescribed for the COVID-19 outbreak.

Posted March 21

Pharmacies are attempting to implement distancing procedures within their prescription departments in an effort to protect their pharmacy personnel. Can we allow any of our pharmacy personnel to assist pharmacists by working from home?

The Board has expanded an earlier rule waiver, and now authorizes any pharmacy to allow any of its pharmacy personnel licensed by the Board to engage in remote processing of prescription drug orders under a pharmacist's supervision.

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Posted March 19

With the recent news about chloroquine and hydroxychloroquine, we are concerned about inappropriate prescribing and dispensing, as well as hoarding, of these drugs. We have also heard that some drug distributors are placing limits on the quantities of those items that pharmacies can order and receive. Are there any restrictions on how pharmacies should manage their inventory of these drugs?

Even without a public health emergency, pharmacies are authorized to implement restrictions designed to secure their prescription drug inventory, including those items that are not controlled substances.

We have heard about the off-label use of chloroquine and hydroxychloroquine for the treatment of Coronavirus disease (COVID-19). Can we dispense prescriptions for off-label use?

Prescribers are not limited to official FDA-approved indications for most drugs. They may prescribe for 'off-label' but still legitimate medical purposes. Pharmacists may dispense prescriptions for 'off-label' but still legitimate medical purposes, using sound professional judgment.

Can we mail dispensed prescriptions to its elderly or high-risk patients?

Yes, as long as the pharmacy can ensure the integrity of the drug product and the confidentiality of any protected health information attached thereto.

Posted March 18

My medication administration registration is expiring soon. I registered for the CPR class but it has now been postponed or cancelled. How do I maintain my medication administration registration?

The Board is aware of the cancellation of CPR classes. We have permission to issue temporary extensions of the expiration date of medication administration registrations scheduled to expire during the public health emergency. Additional details are available in the guidance document we issued to immunizers on March 17, a copy of which resides on the [COVID-19 webpage](#).

Can a hospital pharmacy store its excess drug product inventory outside the prescription department?

Yes, provided the pharmacy complies with the provisions of the hospital pharmacy guidance document issued on March 17, a copy of which resides on the [COVID-19](#)

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[webpage.](#)

Posted March 16

Can a pharmacy compound hand sanitizer product for OTC sale?

For the duration of the COVID-19 public health emergency, the Board will not take enforcement action against a pharmacy compounding hand sanitizer products for OTC sale, provided such products comply with the provisions of the FDA Final Guidance Document titled *Policy for Temporary Compounding of Certain Alcohol-Based Hand Sanitizer Products During the Public Health Emergency* issued on March 14, 2020. We distributed a copy of this document to pharmacies on March 16 and a copy is posted on the Board's [COVID-19 Public Health Emergency webpage.](#)

Posted March 14

Can a pharmacy ask patients to not enter the pharmacy if they are running fever or suspect that they have been exposed to illness?

Yes, as long as the pharmacy can provide the services needed by the patient and available from the pharmacy.

Can a pharmacy limit service to delivery only or to drive-through service only?

Yes, as long as the pharmacist can counsel the patient.

Can a pharmacy limit its hours of operation?

Yes, subject to the Board's existing rule of a minimum of 10 hours per week.

Is there a rule which would prohibit pharmacies from instituting curbside delivery of prescriptions?

Louisiana has no rule prohibiting curbside delivery of prescriptions. The Board's expectation is that pharmacies choosing to deliver prescriptions to their patients do so in a manner that protects the integrity of the drug product as well as any protected health information attached thereto.

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