



Louisiana Board of Pharmacy

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Application for New Medication Administration Registration

Please complete form online before printing it then sign and date the bottom of the form before sending it.
You may fax (225.925.6499), scan or mail (see addresses above) the form and required attachments to our office.

Name: _____

Credential Type: Pharmacist Intern Credential No.: _____

E-mail Address: _____

Section 521 of the Board's rules specifies the eligibility for this credential, the initial and continuing education requirements, as well as the professional standards of practice for those practitioners engaging in the practice of medication administration.

With respect to the initial education and training requirement, the Board has approved the following programs. Please indicate below which of the programs you completed and then attach a copy of the completion certificate. Please do not confuse the continuing education (CE) certificate with the completion certificate. The CE certificate contains insufficient information for this application.

- Pharmacy-Based Immunization*, a certificate program administered by the American Pharmacists Association (APhA).
- Pharmacy-Based Immunization*, a certificate program administered by the College of Pharmacy at the University of Findlay.
- Immunization Administration Training for Pharmacists*, a web-based certificate program administered by the Collaborative Education Institute (CEI).
- Immunization Administration Training for Pharmacists*, a web-based certificate program administered by Drug Store News, in collaboration with CEI.

With respect to the life safety education and training requirement, the Board has approved the following programs. Please indicate below which of the programs you completed and then attach a copy of the wallet card that contains the dates of issue and expiration. **NOTE:** All of these providers offer several levels of education and training; the Board will accept one of only the following specific programs.

- Basic Cardiac Life Support for the Healthcare Provider* from the American Heart Association (AHA).
- CPR/AED for the Professional Rescuer OR Basic Life Support* from the American Red Cross (ARC).
- CPR Pro for the Professional Rescuer*, from the American Safety & Health Institute (ASHI).
- ProCPR*, from ProTrainings, LLC.
- CPR-Pro*, from Emergency University.
- BLS for Healthcare Providers*, from EMS Safety Services, Inc.

Please note:

- This is a virtual credential. No paper documents exist. In the event you require written verification of the status of your registration, you may print the status message at the Board's website.
- In the event your pharmacist license or intern registration should expire, then your medication administration registration – and the privilege attached thereto – will also expire at the same time.
- In the event your life safety card should expire before you obtain a renewal, then your medication administration registration – and the privilege attached thereto – will also expire at the same time.
- Finally, we draw your attention to the continuing education requirement for this privilege as noted in Section 521 of the Board's rules; you remain subject to audit on that requirement at all times.

Signature: _____

Date: _____