



Louisiana Board of Pharmacy

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Application for Renewal of Medication Administration Registration

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

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 – shall 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 – shall 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: _____