#### **RULE**

#### Department of Health Board of Pharmacy

Prescriptions (LAC 46:LIII.2511 and 2519)

In accordance with the provisions of the Administrative Procedure Act (R.S. 49:950 et seq.) and the Pharmacy Practice Act (R.S. 37:1161 et seq.), the Board of Pharmacy has amended §2511 and §2519 of its rules relative to prescriptions. The amended rule changes in §2511 clarify the definition of an electronic prescription, define practitioner, add a description of patient authority to acquire a prescription drug or device, add a requirement for

pharmacies to transfer filled and unfilled prescriptions when requested by the patient, add a definitive list of practitioners authorized to issue prescriptions, address clarification of information required on prescriptions and allow prescription adaptation by the pharmacist. The amended rule changes in §2519 prohibit pharmacies from requesting refill authorization from the prescriber in the absence of a request from the patient, his agent, or his caregiver and clarify that pharmacies may offer their patient an auto-refill service to facilitate refill requests. The implementation of the amended Rule changes caused a reorganization of lettering in the sections. This Rule is hereby adopted on the day of promulgation.

# Title 46 PROFESSIONAL AND OCCUPATIONAL STANDARDS

#### Part LIII. Pharmacists

Chapter 25. Prescriptions, Drugs, and Devices Subchapter B. Prescriptions §2511. Prescriptions and Chart Orders

A. Definitions. As used in this Chapter, the following terms shall have the meaning ascribed to them in this Section:

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*Electronic Prescription*—a prescription generated, signed, and transmitted in electronic form, excluding electronically transmitted facsimile documents.

Practice Affiliation—repealed.

*Practitioner*—an individual currently licensed, registered, or otherwise authorized by the appropriate licensing board to prescribe and administer drugs in the course of professional practice.

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- B. Patient Authority to Acquire Prescription Drug or Device
- 1. A prescription or chart order represents the lawful authority for a patient, or his agent or caregiver, to acquire a prescription drug or device from a pharmacy licensed to dispense prescription drugs and devices.
- 2. In the absence of refill instructions on the original prescription, the prescription shall not be refilled. A pharmacist, using his professional judgment, may dispense the total quantity authorized in one transaction, or in the alternative, may dispense partial quantities in multiple transactions, provided however, that the sum of the partial quantities shall not exceed the total quantity authorized.
- 3. In the event a prescription contains refill instructions, the prescription may be refilled when requested by the patient, or his agent or caregiver. A pharmacist, using his professional judgment, may dispense the quantity authorized for each refill in a single transaction, or in the alternative, may dispense partial quantities in multiple transactions, provided however that the sum of the partial quantities shall not exceed the total quantity authorized.
- 4. While the documentation of a prescription or chart order shall be retained by the dispensing pharmacy as evidence of its lawful dispensing of the prescription drug, the patient's lawful authority to obtain the drug conveyed by the prescription or chart order shall continue to exist until the earliest of the expiration date of the prescription or chart order, or in the alternative, when the total quantity authorized has been dispensed.

- 5. In the event a patient, or his agent or caregiver, requests a pharmacy to transfer an unfilled prescription for a medication not listed as a controlled substance to another pharmacy, the pharmacy shall comply with that request as soon as possible, but no later than the end of the next business day.
- 6. In the event a patient, or his agent or caregiver, requests a pharmacy to transfer the remainder of an unexpired prescription to another pharmacy, the pharmacy shall transfer that prescription information in compliance with the provisions of this Chapter as soon as possible but no later than the end of the next business day. Prior to such transfer, a pharmacy shall not cancel the remainder of an unexpired prescription unless such action is required by law or rule or is requested by the prescriber.
- C. Persons Authorized to Issue Prescriptions and Chart Orders
- 1. A prescription for a drug or device may be issued by a practitioner with valid prescriptive authority.
- 2. A prescription may be prepared by the agent of the prescriber for the signature of the prescriber, but the prescriber retains accountability for the proper issuance of a valid prescription. A prescriber's agent may communicate a valid prescription to a pharmacy.
- 3. A pharmacist may issue a prescription when so authorized by law, rule, standing order, or practice agreement.

#### D. Required Information

- 1. A prescription shall contain the following data elements:
- a. prescriber's name, licensure designation, address, telephone number, and if for a controlled substance, the Drug Enforcement Administration (DEA) registration number:
- b. patient's name, and if for a controlled substance, address:
  - c. date prescription issued by the prescriber;
- d. name of drug or device, and if applicable, strength, and quantity to be dispensed;
  - e. directions for use;
  - f. signature of the prescriber; and
- g. refill instructions, if any. In the absence of refill instructions on the original prescription, the prescription shall not be refilled.
- 2. In the event a pharmacist receives a prescription or chart order lacking certain required information, the pharmacist, pharmacy intern or certified pharmacy technician may consult with the prescriber or his agent to clarify the prescriber's intent.

#### E. Manner of Issuance

#### 1. Oral Prescriptions

- a. Upon the receipt of an oral prescription from an authorized prescriber, the pharmacist or pharmacy intern or pharmacy technician shall reduce the order to a written form prior to dispensing the medication. As an alternative to recording such prescriptions on paper forms, a pharmacist may enter the prescription information directly into the pharmacy's dispensing information system.
- b. In the event a pharmacy intern or pharmacy technician transcribes such a prescription, the supervising pharmacist shall initial or countersign the prescription form prior to processing the prescription.

- 2. Written Prescriptions. A written prescription shall conform to the following format.
- a. The prescription form shall be of a size not less than 4 inches by 5 inches, and shall bear a single printed signature line.
- b. The prescription form shall clearly indicate the authorized prescriber's name, licensure designation, address, telephone number, and if for a controlled substance, the Drug Enforcement Administration (DEA) registration number. In the event that multiple practitioners are identified on the prescription form, the authorizing prescriber's specific identity shall be clear and unambiguous. This identification may be indicated by any means, including but not limited to, a marked check box next to, or circling, the authorized prescriber's printed name.
- c. No prescription form shall contain more than four active prescription drug orders. Each active prescription drug order on the form shall provide the following:
- i. check box labeled "Dispense as Written", or "DAW", or both; and
  - ii. the number of refills, if any.
- d. The prescription shall be written with ink or indelible pencil, typewriter, or printed on a computer printer and shall be manually signed by the practitioner on the date issued and in the same manner as he would sign a check or legal document (e.g., J. H. Smith or John H. Smith). Examples of invalid signatures include rubber stamps, signatures of anyone other than the prescriber, and computer-generated signatures.

### e. Receipt via Facsimile

- i. Pharmacies may elect to receive written prescriptions via a facsimile machine located within the prescription department. The paper used to print such prescriptions shall produce a non-fading image. The pharmacy may elect to scan such documents in compliance with \$1123 of this Part.
- ii. Pharmacies may elect to receive written prescriptions via electronic facsimile directly within their pharmacy information system. The pharmacy shall retain such records in compliance with Section 1123 of this Part.
- f. Chart orders and forms used by pharmacists to record telephoned or transferred prescriptions are exempt from the format requirements listed in this Section.

#### 3. Electronic Prescriptions

a. The prescription shall clearly indicate the authorized prescriber's name, licensure designation, address, telephone number, and if for a controlled substance, the DEA registration number.

#### F. Prescription Adaptation

- 1. With the consent of the patient, or his agent or caregiver, a pharmacist may adapt a prescription drug order or chart order unless the prescriber has indicated adaptation is not permitted, subject to the following limitations:
- a. A pharmacist may change the quantity of medication prescribed if:
- i. the prescribed quantity or package size is not commercially available;
- ii. the change in quantity is related to a change in dosage form;
- iii. the change is intended to dispense up to the total amount authorized by the prescriber; or

- iv. the change extends a maintenance drug for the limited quantity necessary to coordinate a patient's refills in a medication synchronization program.
- b. A pharmacist may change the dosage form of the medication prescribed if it is in the best interest of patient care; however, the pharmacist shall modify the prescriber's directions to ensure an equivalent amount of the medication prescribed is dispensed.
- c. A pharmacist may add information missing on the prescription drug order or chart order if there is evidence to support the change.
- 2. A pharmacist who adapts a prescription drug order or chart order shall document the adaptation in the patient's record.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2102 (October 2003), effective January 1, 2004, LR 41:98 (January 2015), LR 41:2147 (October 2015), amended by the Department of Health, Board of Pharmacy, LR 43:2162 (November 2017), LR 46:585 (April 2020), LR 47:1644 (November 2021), amended LR 49:1722 (October 2023).

## §2519. Prescription Refills; Medication Synchronization and Refill Consolidation

- A. Prescription Refills
  - 1. Limitations on Number of Refills
- a. The refilling of a prescription for a drug listed in Schedule II is prohibited.
- b. A prescription for a drug listed in Schedule III or IV may be refilled up to five times if so indicated at the time issued.
- c. A prescription for a drug listed in Schedule V may be refilled without limitation if so indicated at the time issued subject to the one-year expiration date of the prescription.
- d. A prescription for a drug not listed as a controlled substance or for a medical device, medical gas, or durable medical equipment may be refilled without limitation if so indicated at the time issued subject to the one year expiration date of the prescription.
- 2. Refill Authorization. Prescription refills may be dispensed only with the prescriber's authorization, as indicated on the original prescription order. In the absence of the authorized practitioner's instructions on the original prescription, the prescription shall be considered non-refillable. When all refills authorized on the original prescription have been dispensed, then authorization from the prescribing practitioner shall be obtained prior to dispensing; when such authorization has been received, a new prescription shall be prepared and it shall be issued a different prescription number.
- 3. Patient Request for Continuation of Therapy. When previously authorized refills have been dispensed, or when the previous prescription has expired, and the patient, or his agent or caregiver, requests continuation of therapy, the pharmacy may submit a request to the prescriber for a new prescription. A pharmacy may offer their patient an autorefill service to facilitate such requests for the life of that

- prescription. In the absence of a specific request for continuation of therapy from the patient, or his agent or caregiver, the pharmacy shall not submit a request for continuation of therapy to a prescriber.
- 4. Dispensing of Refills. Prescription refills authorized by the prescriber shall not be dispensed in the absence of a patient, or his agent or caregiver's, request or approval. A pharmacy may offer their patient an auto-refill service to facilitate such requests. This prohibition shall not apply to refills authorized by the prescriber which are to be dispensed to a patient residing in a long-term care facility.
- B. Medication Synchronization and Refill Consolidation. These terms refer to a service which a pharmacist may perform for his patient, at the request of the patient, wherein he may proactively adjust the medication dispensing quantity and/or the refill schedule of a prescription in order to manage the patient's medication therapy, with the goal of improved medication adherence by the patient.
- 1. For the performance of this service, the pharmacist may adjust the dispensing quantity and/or the refill schedule originally ordered by the prescriber; however, the pharmacist shall not exceed the total quantity prescribed [dispensing quantity multiplied by the total number of fills authorized (original plus refills)], or what is otherwise allowed by law.
- 2. With respect to prescriptions for controlled substances where refills have been authorized, pharmacists may utilize partial fills, as described in §2747.C.5 of this Part, but may not exceed the dispensing quantity noted on the original prescription.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2104 (October 2003), effective January 1, 2004, LR 33:1133 (June 2007), amended by the Department of Health, Board of Pharmacy, LR 42:1519 (September 2016), LR 46:575 (April 2020), LR 47:1644 (November 2021), amended LR 49:1724 (October 2023).

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