# Rules of Department of Insurance, Financial Institutions and Professional Registration Division 2220—State Board of Pharmacy Chapter 6—Pharmaceutical Care Standards

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## Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION Division 2220—State Board of Pharmacy Chapter 6—Pharmaceutical Care Standards

# 20 CSR 2220-6.030 Provision of Drug and/or Medical Information

PURPOSE: The purpose of this rule is to define requirements for the provision of drug and/or medical information by pharmacists.

(1) Section 338.095.3., RSMo provides in part that a pharmacist may lawfully provide prescription or medical information to a licensed health care provider or his/her agent who is legally qualified to administer medications and treatments and who is involved in the treatment of the patient. The information may be derived through direct contact with a prescriber or through a written, agreed upon protocol or standing prescription order from an authorized prescriber.

(2) Information transfers as described in section (1) may take place within any practice setting as long as the pharmacist maintains an active license with the Board of Pharmacy.

(3) Information transfers between two (2) licensed pharmacists may occur as long as the pharmacist receiving that information documents in a uniform and readily retrievable fashion, the identity of the pharmacist providing the information transfer, the origin of his/her authority to provide the drug or medical information, the date and the identity of the receiving pharmacist.

(4) When a transfer of prescription information for the purpose of filling an original prescription occurs, all provisions of 4 CSR 220-2.120 must be followed, except for subsection (1)(C) and paragraphs (2)(B)4.-6.

(5) Any laws governing prescription records, dispensing procedures and controlled substances must be adhered to when a transfer of prescription information for the purpose of filling an original prescription occurs.

AUTHORITY: sections 338.095, RSMo Supp. 1993, 338.010, RSMo Supp. 1990, 338.140, RSMo Supp. 1989 and 338.280, RSMo 1986.\* This rule originally filed as 4 CSR 220-6.030. Original rule filed March 1, 1994, effective Sept. 30, 1994. Moved to 20 CSR 2220-6.030, effective Aug. 28, 2006. \*Original authority: 338.280, RSMo 1951, amended 1971, 1981; 338.010, RSMo 1939, amended 1951, 1989, 1990; and 334.104.4. and 338.095, RSMo 1993.

# 20 CSR 2220-6.040 Administration by Medical Prescription Order

PURPOSE: This rule establishes procedures for pharmacists to administer drugs and devices pursuant to medical prescription orders.

(1) A pharmacist may administer drugs pursuant to a medical prescription order.

(2) The pharmacist may not delegate the administration to another person, except to a pharmacist intern who has met qualifications under subsections (3)(B), (C), and (E) and is working under the direct supervision of a pharmacist qualified to administer drugs pursuant to a medical prescription order.

(3) Pharmacist Qualifications. A pharmacist who is administering drugs pursuant to a medical prescription order must—

(A) Hold a current, unrestricted license to practice pharmacy in this state;

(B) Hold a current provider level cardiopulmonary resuscitation (CPR) certification issued by the American Heart Association or the American Red Cross or equivalent;

(C) Successfully complete a certificate program in the administration of drugs accredited by the Accreditation Council for Pharmacy Education (ACPE) or a similar health authority or professional body approved by the State Board of Pharmacy. The certificate program must cover all routes of administration the pharmacist utilizes;

(D) Complete a minimum of two (2) hours of continuing education per calendar year related to administration of drugs. A pharmacist may use the continuing education hours required in this subsection as part of the total continuing education hours required for pharmacist license renewal;

(E) Maintain documentation of the above requirements; and

(F) On a yearly basis prior to administering drugs, notify the State Board of Pharmacy of their qualifications to do so. This notification shall include the types of drugs being administered, and a statement that the pharmacist meets the requirements of subsections (A), (B), (C), and (D) of this section.

#### (4) General Requirements.

(A) A pharmacist shall administer drugs in accordance with treatment guidelines established by the Centers for Disease Control and Prevention (CDC) or in accordance with manufacturer's guidelines.

(B) A pharmacist shall comply with all state and federal laws and regulations pertaining to Vaccine Information Statements and informed consent requirements.

(C) A pharmacist shall have a written policy and procedure covering all aspects of the administration of drugs, including the disposal of used and contaminated supplies and appropriate handling of acute adverse events. The manual shall be reviewed annually and be available for inspection by the State Board of Pharmacy or authorized representative.

(5) Requirements of Medical Prescription Order. The medical prescription order from a licensed prescriber must contain at a minimum the following:

(A) The name of the licensed prescriber issuing the order;

(B) The name of the patient to receive the drug;

(C) The name of the drug and dose to be administered;

(D) The route of administration;

(E) The date of the original order;

(F) The date or schedule, if any, of each subsequent administration; and

(G) A statement that the drug is to be administered by a pharmacist.

### (6) Record Keeping.

(A) A pharmacist who administers a drug pursuant to a medical prescription order shall maintain the following records regarding each administration. These records must be separate from the prescription files of a pharmacy.

1. The name, address, and date of birth of the patient;

2. The date, route, and anatomic site of the administration;

3. The name, dose, manufacturer, lot number, and expiration date of the drug;

4. The name and address of the patient's primary health care provider, as identified by the patient;

5. The name or identifiable initials of the administering pharmacist; and

6. The nature of an adverse reaction and who was notified, if applicable.

(B) All records required by this regulation shall be kept by the pharmacist and be available for two (2) years from the date of such record for inspecting and copying by the State Board of Pharmacy and/or its authorized representatives.

#### (7) Notification Requirements.

(A) A pharmacist administering drugs pursuant to a medical prescription order shall notify the prescriber within seventy-two (72) hours after administration of the following:

- 1. The identity of the patient;
- 2. The identity of the drug administered;
- 3. The route of administration;

4. The anatomic site of the administration;

5. The dose administered; and

6. The date of administration.

(B) In the event of any adverse event or reaction experienced by the patient, the pharmacist shall notify the prescriber within twenty-four (24) hours after learning of the adverse event or reaction.

(C) A pharmacist administering drugs pursuant to a medical prescription order shall report the administration to all entities as required by state or federal law.

AUTHORITY: sections 338.140 and 338.280, RSMo 2000 and section 338.010.1, RSMo Supp. 2007.\* Emergency rule filed May 1, 2008, effective May 11, 2008, expired Feb. 18, 2009. Original rule filed May 1, 2008, effective Nov. 30, 2008.

\*Original authority: 338.010, RSMo 1939, amended 1951, 1989, 1990, 2007; 338.140, RSMo 1939, amended 1981, 1989, 1997; and 338.280, RSMo 1951, amended 1971, 1981.

#### 20 CSR 2220-6.050 Administration of Vaccines Per Protocol

*PURPOSE: This rule establishes the procedures for pharmacists to administer vaccines per written protocol with a physician.* 

(1) A pharmacist may administer vaccines authorized by Chapter 338, RSMo, pursuant to a written protocol authorized by a physician licensed pursuant to Chapter 334, RSMo, who is actively engaged in the practice of medicine.

(A) A pharmacist shall administer vaccines in accordance with treatment guidelines established by the Centers for Disease Control (CDC) and in accordance with manufacturer's guidelines, provided that a pharmacist shall not administer vaccines to persons under twelve (12) years of age.

(B) A pharmacist shall comply with all state and federal laws and regulations pertaining to Vaccine Information Statements and informed consent requirements.

(2) A pharmacist may not delegate the administration of vaccines to another person, except to a pharmacist intern who has met the qualifications under subsections (4)(B), (C), and (D) and is working under the direct supervision of a pharmacist qualified to administer vaccines.

(3) The authorizing physician is responsible for the oversight of, and accepts responsibility for, the vaccines administered by the pharmacist.

(4) Pharmacist Qualifications. A pharmacist who is administering a vaccine authorized by Chapter 338, RSMo, must:

(A) Hold a current, unrestricted license to practice pharmacy in this state;

(B) Hold a current cardiopulmonary resuscitation (CPR) certification issued by the American Heart Association or the American Red Cross or equivalent;

(C) Successfully complete a certificate program in the administration of vaccines accredited by the Accreditation Council for Pharmacy Education (ACPE) or a similar health authority or professional body approved by the State Board of Pharmacy;

(D) Maintain documentation of the above certifications;

(E) Complete a minimum of two (2) hours (0.2 CEU) of continuing education as defined per calendar year related to administration of vaccines. A pharmacist may use the continuing education hours required in this subsection as part of the total continuing education hours required for pharmacist license renewal;

(F) Provide documentation of subsections (A), (B), (C), and (E) of this section to the authorizing physician(s) prior to entering into a protocol or administering vaccines; and

(G) On a yearly basis prior to administering vaccines, establish a new protocol with the authorizing physician and notify the State Board of Pharmacy of their qualifications to do so. This notification shall include the types of drugs being administered and a statement that the pharmacist meets the requirements of subsections (A), (B), (C), (E), and (F) of this section.

(5) Administration by Written Protocol with a Missouri Licensed Physician.

(A) A pharmacist may enter into a written protocol with a physician for the administration of vaccines authorized by Chapter 338, RSMo, provided that a pharmacist shall be prohibited from administering vaccines to patients under twelve (12) years of age. The physician must be no further than fifty (50) miles by road, using the most direct route available, from the pharmacist who is administering the vaccine. The written protocol may be valid for a time period not to exceed one (1) year. The protocol must include the following: 1. The identity of the participating pharmacist and physician, including signatures;

2. Time period of the protocol;

3. The identification of the vaccines which may be administered;

4. The identity of the patient or groups of patients to receive the authorized vaccine(s);

5. The identity of the authorized routes and anatomic sites of administration allowed;

6. A provision to create a prescription for each administration under the authorizing physician's name;

7. A provision establishing a course of action the pharmacist shall follow to address emergency situations including, but not limited to, adverse reactions, anaphylactic reactions, and accidental needle sticks;

8. A provision establishing a length of time the pharmacist shall observe an individual for adverse events following an injection;

9. A provision establishing the disposal of used and contaminated supplies;

10. The street addresses of the pharmacy or other locations at which the pharmacist may administer the authorized vaccine;

11. Record-keeping requirements and procedures for notification of administration; and

12. A provision that allows for termination of the protocol at the request of any party to it at any time.

(B) The protocol, and any subsequent amendments or alterations, shall be signed and dated by the pharmacist and authorizing physician prior to its implementation, signifying that both are aware of its content and agree to follow the terms of the protocol. The authorizing physician and pharmacist shall each maintain a copy of the protocol from the beginning of implementation to a minimum of eight (8) years after termination of the protocol.

(6) Record Keeping.

(A) A pharmacist administering vaccines pursuant to this rule shall maintain a record of each administration which shall include:

1. The name, address, and date of birth of the patient;

2. The date, route, and anatomic site of the administration;

3. The name, dose, manufacturer, lot number, and expiration date of the vaccine;

4. The name and address of the patient's primary health care provider, as identified by the patient;

5. The name or identifiable initials of the administering pharmacist; and

6. The nature of an adverse reaction and who was notified, if applicable.

(B) If the vaccine was administered on



behalf of a pharmacy, the pharmacist shall ensure the records required by subsection (6)(A) of this rule are promptly delivered to the pharmacy.

(C) Within seventy-two hours (72) hours after administration of a vaccine, the administering pharmacist shall obtain a prescription from the authorizing physician for the drug dispensed or shall create a prescription, as authorized by protocol documenting the dispensing of the drug. Notwithstanding any other provision of this rule, prescription records shall be maintained as provided by Chapter 338, RSMo, and the rules of the board.

(D) The records required by this rule shall be maintained securely and confidentially as follows:

1. If the vaccine is administered on behalf of a pharmacy, both the pharmacy and the administering pharmacist shall ensure that all records required by this rule are maintained at the pharmacy separate from the prescription files of the pharmacy. If the vaccine is not being administered on behalf of a pharmacy, all records shall be maintained securely and confidentially by the administering pharmacist at an address that shall be identified in the protocol prior to administering the vaccine; and

2. Records shall be maintained for two (2) years from the date of such record and shall be made available for inspecting and copying by the State Board of Pharmacy or the State Board of Registration for the Healing Arts and/or their authorized representatives. Records maintained at a pharmacy must be produced during an inspection by the board and/or their authorized representatives. Records not maintained at a pharmacy shall be produced within three (3) business days after a request from the State Board of Pharmacy and/or its authorized representative. Failure to maintain or produce records as provided by this rule shall constitute grounds for discipline.

(7) Notification Requirement.

(A) A pharmacist administering vaccines authorized by Chapter 338, RSMo, shall notify the authorizing physician within seventy-two (72) hours after administration of the following:

1. The identity of the patient;

2. The identity of the vaccine(s) administered;

3. The route of administration;

4. The anatomic site of the administration;

- 5. The dose administered; and
- 6. The date of administration.
- (B) The pharmacist shall provide a written

report to the patient's primary health care provider, if different than the authorizing physician, containing the documentation required in subsection (A) of this section within fourteen (14) days of the administration.

(C) In the event of any adverse event or reaction experienced by the patient pursuant to a written protocol, the pharmacist shall notify the patient's primary health care provider and authorizing physician, if different, within twenty-four (24) hours after learning of the adverse event or reaction.

(D) A pharmacist administering vaccine(s) shall report the administration to all entities as required by state or federal law.

(E) Documentation that notifications required by this rule have been sent must be maintained as provided in section (6) of this rule.

AUTHORITY: sections 338.010 and 338.220, RSMo Supp. 2009 and 338.140, RSMo 2000.\* Emergency rule filed Oct. 24, 2007, effective Nov. 3, 2007, expired April 30, 2008. Original rule filed Oct. 24, 2007, effective May 30, 2008. Emergency amendment filed Oct. 22, 2009, effective Nov. 1, 2009, expired April 29, 2010. Amended: Filed Oct. 22, 2009, effective June 30, 2010.

Original authority: 338.010, RSMo 1939, amended 1951, 1989, 1990, 2007, 2009; 338.140, RSMo 1939, amended 1981, 1989, 1997; and 338.220, RSMo 1951, amended 1969, 1981, 1989, 1997, 1999, 2001, 2004, 2007, 2009.

### 20 CSR 2220-6.055 Non-Dispensing Activities

PURPOSE: This rule establishes procedures and requirements for the performance of nondispensing activities outside of a pharmacy.

(1) Pursuant to section 338.220, RSMo, a pharmacist may perform the following nondispensing activities outside of a licensed pharmacy:

(A) Patient counseling/education, as authorized by Missouri law, provided the pharmacist shall be obligated to comply with 20 CSR 2220-2.190, when applicable;

(B) Obtain patient history/information;

(C) Review patient records/medical histories;

(D) Patient assessment/evaluation, as authorized by Missouri law;

(E) Billing and insurance claim submissions/review;

(F) Drug utilization review;

(G) Assess health plan and medication eligibility/coverage;

(H) Pharmacy compliance audits/evalua-

tions;

(I) Administer drugs, vaccines, or biologicals, as authorized by law and the rules of the board;

(J) Peer review/peer consultations;

(K) Review, select, and develop formularies or plan/practice guidelines;

(L) Review compliance with benefit guidelines;

(M) Manage inventory, including purchasing and ordering;

(N) Manage/review information systems;

(O) Patient medication review;

(P) Consultation with other health care professionals;

(Q) Patient referrals;

(R) Prescription order entry/review, provided that a pharmacist shall only be authorized to accept a prescription on the premises of a Missouri licensed pharmacy, as required by section 338.095.5, RSMo; and

(S) Medication therapy management, pursuant to and as authorized by Chapter 338, RSMo, and the rules of the board.

(2) Confidentiality. A pharmacist performing non-dispensing activities pursuant to this rule shall comply with all applicable state and federal confidentiality laws and regulations and shall provide sufficient storage and security for confidential documents and electronic data processing hardware. In addition, data processing systems must utilize sufficient security software to ensure confidentiality and prevent unauthorized access. Any breach in the security or confidentiality of the data processing systems or confidential documents shall be documented and reported to the board in writing within seven (7) days of the breach.

(3) Notwithstanding any other provision of this rule, a pharmacist shall not meet with patients in the pharmacist's residence or living quarters.

(4) A pharmacist performing non-dispensing activities pursuant to this rule shall ensure compliance with Chapter 338, RSMo, and the rules of the board at all times. Nothing in this rule shall be construed to eliminate or otherwise exempt any pharmacist from the record-keeping, confidentiality, or security requirements otherwise imposed by Chapter 338, RSMo, or the rules of the board. Violations of this section shall constitute grounds for discipline.

(5) This rule shall not be construed to authorized a pharmacist to conduct the unauthorized practice of medicine or to conduct any activity for which a license is required pursuant to Chapters 330, 331, 332, 334, or 337, RSMo.

(6) A pharmacy permit shall be required for performing non-dispensing activities if the pharmacist is using a pharmacy technician to assist in the practice of pharmacy at the location where non-dispensing activities are being performed, provided that a pharmacy permit shall not be required for sites used solely by the pharmacist for administering vaccines as authorized by Chapter 338, RSMo, and the rules of the board. Pharmacy technicians shall only be authorized to work under the direct supervision of a pharmacist as provided by section 338.013, RSMo, and 20 CSR 2220-2.700.

AUTHORITY: sections 338.010 and 338.220, RSMo Supp. 2009 and 338.140, RSMo 2000.\* Emergency rule filed Oct. 23, 2009, effective Nov. 2, 2009, expired April 30, 2010. Original rule filed Oct. 22, 2009, effective June 30, 2010.

\*Original authority: 338.010, RSMo 1939, amended 1951, 1989, 1990, 2007, 2009; 338.140, RSMo 1939, amended 1981, 1989, 1997; and 338.220, RSMo 1951, amended 1969, 1981, 1989, 1997, 1999, 2001, 2004, 2007, 2009.