



OHIO STATE BOARD OF PHARMACY

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OHIO STATE BOARD OF PHARMACY'S POLICY ON MAKING CHANGES TO A SCHEDULE II PRESCRIPTION

Pursuant to the DEA's letter of October 15, 2008 on this topic and as first outlined in the February, 2000 Ohio State Board News, the Board is in total agreement with the statement below which was taken from the DEA's Frequently Asked Questions contained on their website (http://www.deadiversion.usdoj.gov/faq/general.htm#rx_change):

Question: What changes may a pharmacist make to a prescription written for a controlled substance?

Answer: The pharmacist may add the patient's address or change the patient's address upon verification. The pharmacist may change or add the dosage form, drug strength, drug quantity, directions for use, or issue date only after consultation with and agreement of the prescribing practitioner. Such consultations and corresponding changes should be noted on the prescription as well as the patient's medical record. Pharmacists and practitioners must comply with any state/local laws, regulations, or policies prohibiting any of these changes to controlled substance prescriptions.

The majority of changes can be made only after the pharmacist contacts the prescribing practitioner.

After consultation with the prescribing practitioner, the pharmacist is permitted to add or change the dosage form, drug strength, drug quantity, directions for use, and issue date.

The pharmacist is permitted to make information additions that are provided by the patient or bearer, such as the patient's address, and such additions should be verified.

The pharmacist is never permitted to make changes to the patient's name, controlled substance prescribed (except for generic substitution permitted by state law) or the prescriber's signature.

In all cases, the Board would expect pharmacists to act in the best interests of the patient. In most cases, that would involve speaking directly with the prescriber (not an agent) and making the appropriate corrections to the CII prescription instead of sending the patient back to get a new prescription.