Administration of Injections by Pharmacists

Updated 8/24/2023

Section 4729.45 of the Revised Code and rule 4729:1-3-03 of the Administrative Code authorizes a pharmacist to administer, by injection, any of the following dangerous drugs as long as the drug that is to be administered has been prescribed by a physician, is administered in accordance with a physician-approved protocol, and the individual to whom the dangerous drug was prescribed has an ongoing relationship with the physician, an advanced practice registered nurse practicing who has entered into a standard care arrangement with the physician or a physician assistant who has entered into a supervision agreement with the physician:

1. An addiction treatment drug administered in a long-acting or extended-release form (including injectable buprenorphine). **Effective 8/16/2023, the Board has updated its enforcement guidance to permit the administration of controlled substances used to treat addiction in a long-acting or extended-release form.**

2. An antipsychotic drug administered in a long-acting or extended-release form.

3. Hydroxyprogesterone caproate for pregnant women.


5. Cobalamin (including the administration of cyanocobalamin, hydroxocobalamin or any other FDA-approved B₁₂ injection).

For questions regarding the rules, please review the following frequently asked questions. If you need additional information, the most expedient way to have your questions answered will be to e-mail the Board office by visiting: [http://www.pharmacy.ohio.gov/contact.aspx](http://www.pharmacy.ohio.gov/contact.aspx).
**Frequently Asked Questions**

Q1) How does a pharmacist become authorized to administer injections?

A pharmacist must comply with all of the following:

1. Successfully complete a course in the administration of drugs that satisfies the requirements pursuant to paragraph (L) of rule 4729:1-3-03 of the Administrative Code.

2. Receive and maintain certification to perform basic life-support procedures by successfully completing a basic life-support training course certified by the American Red Cross, American Heart Association or the American Safety and Health Institute (ASHI). Certification shall be obtained and maintained through courses that are conducted in-person or, at a minimum, offer an in-person training component.

3. Practice in accordance with a physician-established protocol that meets the requirements of paragraphs (F) and (G) of rule 4729:1-3-03 of the Administrative Code.

Q2) Are pharmacy interns allow to administer injections?

No. The law limits administration to pharmacists.

Q3) Do I need to have a consult agreement with a physician in order to administer injections?

No. A consult agreement is not required. Please see the Q1 of this document for the requirements.

Q4) What cobalamin formulations are approved for administration?

The Board adopted the following resolution on August 7, 2017, that states:

*Cobalamin includes the administration of cyanocobalamin, hydroxocobalamin or any other FDA-approved B₁₂ injection.*

Q5) Where do I find training courses that meet the requirements set forth in the rule?

The Board does not have a list of courses available. Pharmacists are encouraged to contact their professional association or employer for more information.
Q6) What is being tested to determine whether it is appropriate to administer an opioid antagonist?

Naltrexone is contraindicated for any individual who has a positive drug screen for opioids. A pharmacist should consult the authorizing protocol or contact the prescribing physician for additional guidance.

Q7) Does the physician-established protocol need to be authorized by the physician who issued the prescription?

No.

Q8) What formulation of diphenhydramine may be administered to an individual in an emergency situation resulting from an adverse reaction to a drug administered by the pharmacist?

The specific formulation should be indicated in the physician-established protocol.

Q9) If I am an immunization-certified pharmacist, am I exempt from some of the training requirements?

Yes. Please refer to paragraphs (L)(3) and (L)(4) of rule 4729:1-3-03 of the Administrative Code.

Q10) Do I have to be the dispensing pharmacist in order to administer an injection?

No. The drug could be provided by a patient or another pharmacy. However, the pharmacist that administers the drug is required to notify the prescribing physician in accordance with the provisions of the rule.

Q11) Is the pharmacy permitted to maintain a multi-dose vial of a patient-specific drug for patient administration?

Yes. However, the pharmacy is responsible for the proper storage of the drug in accordance with the manufacturer’s labeling. NOTE: The drug is the property of the patient.

Q12) Does the drug have to be prescribed by a physician?

Yes. The drug has to be prescribed by a physician. While the rule does allow mid-level practitioners (PA/APRN) to manage a patient’s care, the law and the rule require a physician-issued prescription.
Q14) What basic life-support training courses satisfy the requirements of the law?

The Board has determined that a pharmacist may satisfy this training requirement by completing a certified course that either provides CPR & AED training for lay persons or a more advanced basic life-support training course for healthcare providers.

NOTE: A course that offers a blended learning model (offering in-person training and self-directed learning) meets the requirements of the law.

Q15) Has the Board approved additional basic life-support training courses?

Yes. The Board adopted the following resolution on April 3, 2017:

*The Board hereby recognizes that CPR/AED or Basic Life Support certification provided by American Safety and Health Institute (ASHI) meets the basic-life support training requirements pursuant to sections 4729.41 and 4729.45 of the Revised Code.*

Q16) Do I need a to comply with the requirements of this rule if I am administering injections pursuant to a consult agreement?

No. The provisions of this rule do not apply for pharmacists that are administering these drugs under a consult agreement. Please refer to the following guidance document for more information regarding consult agreements: [www.pharmacy.ohio.gov/consult](http://www.pharmacy.ohio.gov/consult)

Q17) Does a pharmacist need to obtain a DEA controlled substance registration to administer?

No. Like a nurse, the pharmacist who is administering the medication is not required to have an individual DEA registration to administer.