Dispensing of an Emergency Refill of Medication Without a Prescription

Updated 5/13/2019

Section 4729.281 of the Ohio Revised Code authorizes a pharmacist to dispense medications without a prescription under certain conditions.

NOTE: In addition to this guidance, there is additional guidance on dispensing naltrexone without a prescription: www.pharmacy.ohio.gov/EmergencyNaltrexone.

For questions regarding the dispensing of an emergency refill, please review this guidance document. 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.

Q1) What are the requirements for a pharmacist to dispense an emergency refill of medication without a prescription?

A pharmacist is permitted to dispense medication, other than a schedule II controlled substance, without a written or oral prescription if all the following conditions are met:

1. The pharmacy at which the pharmacist works has a record of a prescription for the drug in the name of the patient who is requesting it, but the prescription does not provide for a refill or the time permitted for providing refills has elapsed. Refills are good for one year from the date the prescription was written on a non-controlled prescription and six months for a controlled substance.

2. The pharmacist is unable to obtain authorization to refill the prescription from the health care professional who issued the prescription or another health professional responsible for the patient's care.

3. In the exercise of the pharmacist's professional judgment:
   (a) The drug is essential to sustain the life of the patient or continue therapy for a chronic condition of the patient.
   (b) Failure to dispense or sell the drug to the patient could result in harm to the health of the patient.

Q2) What are the days’ supply limits for dispensing a medication without a prescription?

Upon completion of the steps in Q1, and the pharmacist has determined the patient has been on a consistent drug therapy as demonstrated by records maintained by the pharmacy, a pharmacist is permitted to dispense the following:
Up to a 72-hour supply for any schedule III – V controlled substances; or

Up to a thirty-day supply for a non-controlled dangerous drug or, if the standard unit of dispensing for the drug exceeds a thirty-day supply, the amount of the drug dispensed or sold does not exceed the standard unit of dispensing.

NOTE: A pharmacist is not permitted to dispense up to a thirty-day supply of a particular drug to the same patient more than once in any twelve-month period.

Q3) Am I required to dispense a full thirty-day supply of a non-controlled dangerous drug?

No. The Board would like to remind all pharmacists that they are not required to dispense a full thirty-day supply and should use their professional judgment to determine what supply is in the best interest of the patient.

Q4) Do I create a new prescription document when dispensing an emergency refill of medication?

Yes. A pharmacist is should create a new prescription document for the emergency refill.

Q5) What documentation am I supposed to maintain following the dispensing of an emergency refill?

For one year after the date of dispensing or sale, a pharmacist is required to maintain a record of the drug dispensed or sold, including the name and address of the patient and the individual receiving the drug, if the individual receiving the drug is not the patient, the amount dispensed or sold, and the original prescription number.

Q6) Will insurance cover the emergency refill of medication?

The law does not specifically address insurance coverage for the dispensing of an emergency refill.

Q7) Are there any additional requirements following the dispensing of an emergency refill?

Yes. A pharmacist is required to do all the following:

1. Notify the health professional who issued the original prescription or another health professional responsible for the patient's care no later than seventy-two hours after the drug is sold or dispensed; and

2. If applicable, obtain authorization for additional dispensing from the health professional who issued the original prescription or another health professional responsible for the patient's care.
Q8) The commercially available size of the product will last only 10-days (i.e. patient is on a high dose of insulin). Am I limited to dispensing only one unit (i.e. the 10-day supply) or may I dispense enough to last up to the full thirty-day supply?

You are permitted to dispense up to a thirty-day supply. However, as stated in Q2, pharmacists are not required to dispense a full thirty-day supply and should use their professional judgment to determine what supply is in the best interest of the patient.

Q9) The law only addresses prescriptions for which I have a record at my pharmacy. Does this include pharmacies that share a real-time database or does the record have to be from the same physical store which filled the prescription?

The law states that the pharmacy must have a record of the prescription. However, it does not specify that the record must be specific to that pharmacy. Therefore, pharmacists may utilize a real-time database to access patient records in order to determine whether it is appropriate to dispense an emergency refill.

Q10) Does the law cover me for a patient who is not my regular patient but is the patient of a pharmacy which is not open that day (i.e. closed on Sundays) and to go without might cause patient harm?

The law specifically requires that a pharmacist must have a record of a prescription for the drug in the name of the patient who is requesting it.

Q11) What about the dispensing of an emergency supply of schedule II controlled substance medications?

The Ohio Revised Code does not permit the dispensing of a schedule II controlled substance without a valid prescription. If an emergency situation arises, the prescriber has the authority under 21 CFR 1306.11(d) to phone in an emergency supply of a C-II which must be followed up with a hard copy prescription with the prescriber’s original signature.