

# DISCUSSION AND DETERMINATION

JULY 2011

## COMPUTERIZED PHYSICIAN ORDER ENTRY IN A HOSPITAL

As I am certain you are all aware, the Center for Medicare and Medicaid Services is requiring hospitals to move toward a computerized physician order entry system. Unfortunately, the statutes and regulations addressing electronic signatures only pertain to "prescriptions" and not to "chart orders" (see NRS 639.013 for the definition of a "prescription") and NAC 639.484 specifically **requires** a signature on a chart order.

As these electronic systems creep into practice, most hospitals are struggling with obtaining this elusive signature. Must the hospital print from the electronic system a hard copy and then have it signed before sending it to the pharmacy? Often there is a signature; however it may appear on page 15 of a 15 page order with the drug orders appearing on page 5. Must the pharmacy then print page 5 and page 15 to comply?

Now toss in controlled substances and the DEA . . .

What to do??

(b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances, poisons, dangerous drugs or devices under the supervision of an osteopathic physician as required by chapter 633 of NRS; or

6. An optometrist who is certified by the Nevada State Board of Optometry to prescribe and administer therapeutic pharmaceutical agents pursuant to NRS 636.288, when he prescribes or administers therapeutic pharmaceutical agents within the scope of his certification.

(Added to NRS by 1979, 1696; A 1985, 876; 1989, 1121; 1991, 791; 1993, 2224; 1995, 1711; 1997, 687; 2001, 408, 775, 1631, 1635; 2007, 1844, effective January 1, 2008)

**NRS 639.013 "Prescription" defined.**

1. "Prescription" means:

(a) An order given individually for the person for whom prescribed, directly from the practitioner to a pharmacist or indirectly by means of an order signed by the practitioner or by an electronic transmission from the practitioner to a pharmacist.

(b) A chart order written for an inpatient specifying drugs which he is to take home upon discharge.

2. The term does not include a chart order written for an inpatient for use while he is an inpatient.

(Added to NRS by 1967, 1652; A 1973, 774; 1979, 343, 1684; 1987, 1650; 1991, 1948)

**NRS 639.0143 "Radiopharmaceutical" defined.** "Radiopharmaceutical" means any substance defined as a drug in 21 U.S.C. § 321(g)(1) which:

1. Exhibits spontaneous disintegration of unstable nuclei which emit nuclear particles or photons; or

2. Is intended to be made radioactive.

↪ The term includes nonradioactive reagent kits and nuclide generators which are used in the preparation of any substance. The term does not include drugs containing compounds of carbon or potassium or salts containing potassium which contain trace quantities of naturally occurring radionuclides.

(Added to NRS by 1989, 1750)

**ADMINISTRATIVE REGULATIONS.**

"Radiopharmaceutical" interpreted, NAC 639.5816

**NRS 639.0145 "Refill" defined.** "Refill" means to fill again.

(Added to NRS by 1979, 1696)

**NRS 639.015 "Registered pharmacist" defined.** "Registered pharmacist" means:

1. A person registered in this State as such on July 1, 1947;

2. A person registered in this State as such in compliance with the provisions of paragraph (c) of section 3 of chapter 195, Statutes of Nevada 1951; or

3. A person who has complied with the provisions of NRS 639.120 and whose name has been entered in the registry of pharmacists of this State by the Executive Secretary of the Board and to whom a valid certificate as a registered pharmacist or valid renewal thereof has been issued by the Board.

(Added to NRS by 1967, 1652; A 2003, 2280)

**NRS 639.0155 "Wholesale distribution" defined.** "Wholesale distribution" means the distribution of drugs to persons other than consumers or patients, but does not include:

1. Sales within a company.

2. The purchase or other acquisition of a drug by a health care facility or a pharmacy that is a member of a purchasing organization.

- (f) The time and date of the withdrawal; and
  - (g) The signature of the person making the withdrawal.
  - 4. The original or a direct copy of the order for the medication must be forwarded to the pharmacy.
  - 5. The pharmacist shall verify the withdrawal after a reasonable interval, but not later than 30 days after the withdrawal.
- (Added to NAC by Bd. of Pharmacy, eff. 3-27-90; A 9-11-91; 9-12-91)

**NAC 639.481 Withdrawal of drugs when facility uses floor stock and pharmacy is closed. (NRS 639.070, 639.071, 639.072)** If a medical facility or correctional institution uses a full or partial floor stock to distribute drugs and its pharmacy is closed:

- 1. Controlled substances, dangerous drugs and devices may be removed from the pharmacy only in the original manufacturer's container or prepackaged container.
  - 2. Only a designated licensed nurse or practitioner may remove those drugs and devices.
  - 3. The person authorized to make the withdrawal shall make a record at the time of the withdrawal containing:
    - (a) The name of the device or drug withdrawn;
    - (b) If a drug is withdrawn, its strength and the dosage form;
    - (c) The quantity removed;
    - (d) The location of the floor stock;
    - (e) The date and the time of the withdrawal; and
    - (f) The signature of the person making the withdrawal.
  - 4. A pharmacist shall verify the withdrawal pursuant to the following schedule:
    - (a) In a facility or institution with a full-time pharmacist, the withdrawal must be verified as soon as practicable, but not later than:
      - (1) Seventy-two hours after the time of the withdrawal for a pharmacist in a medical facility; or
      - (2) Ninety-six hours after the time of the withdrawal for a pharmacist in a correctional institution.
    - (b) In a facility or institution with a part-time or consultant pharmacist, the withdrawal must be verified after a reasonable interval, but not later than 30 days after the withdrawal.
- (Added to NAC by Bd. of Pharmacy, eff. 3-27-90; A 9-11-91; 9-12-91)

### Records

**NAC 639.482 Maintenance and availability of records. (NRS 639.070, 639.071, 639.072)**

- 1. Each record required to be kept pursuant to NAC 639.483 to 639.489, inclusive, must be kept by a pharmacy for at least 2 years after the date of the record.
  - 2. Records maintained by a pharmacy must be made available for inspection and copying upon the request of the Board, its representatives, or another authorized local, state or federal law enforcement agency.
- (Added to NAC by Bd. of Pharmacy, eff. 3-27-90; A 9-12-91)

**NAC 639.483 Statutes applicable to maintenance of records. (NRS 639.070, 639.071, 639.072)** A pharmacy must maintain records for outpatients pursuant to the provisions of chapters 453, 454 and 639 of NRS governing retail pharmacies.

(Added to NAC by Bd. of Pharmacy, eff. 3-27-90; A 9-12-91)

**NAC 639.484 Contents and maintenance of chart orders. (NRS 639.070, 639.071, 639.072)**

- 1. Each original chart order must contain:
  - (a) The patient's name and the medical facility's or correctional institution's identification of that patient;

- (b) The name of the drug, its strength and the route of administration;
- (c) Directions for the use of the drug;
- (d) The date; and
- (e) The practitioner's signature. Any verbal order signed by a practitioner's agent must be cosigned by the practitioner.

2. An original chart order must be maintained in the medical records of the patient along with the record of the administration of the medication.

(Added to NAC by Bd. of Pharmacy, eff. 3-27-90; A 9-12-91; R190-01, 3-4-2002)

**NAC 639.485 Maintenance of records for controlled substances. (NRS 639.070, 639.071, 639.072)**

1. A pharmacy shall maintain records for controlled substances:

- (a) In a readily retrievable manner.
- (b) In a manner that establishes the receipt, distribution and destruction of all controlled substances handled by the pharmacy.

2. A pharmacy shall maintain a perpetual inventory of any controlled substance listed in schedule II.

3. Records of the distribution of controlled substances listed in schedule II, schedule III or schedule IV must include:

- (a) The name of the drug, dosage form and strength.
- (b) The name of the pharmacist distributing or authorizing the distribution of the controlled substance.
- (c) The name of the authorized person receiving the controlled substance. This information may be included on the record of administration.
- (d) The location to which the controlled substance is being distributed.
- (e) Controlled substances returned to the pharmacy.
- (f) A record of any waste of any prepared or partially administered dose of a controlled substance, which must be witnessed and cosigned by another person who is licensed to provide medical care.

(Added to NAC by Bd. of Pharmacy, eff. 3-27-90; A 9-12-91; R156-99, 3-1-2000)

**NAC 639.486 Maintenance of records of controlled substances administered from floor stock. (NRS 639.070, 639.071, 639.072)**

1. A pharmacy shall maintain records of controlled substances administered from floor stock. The records must include:

- (a) The name of the patient to whom the controlled substance was administered.
- (b) The name of the controlled substance, its dosage form and strength.
- (c) The time and date on which the controlled substance was administered to the patient.
- (d) The quantity of the controlled substance administered.
- (e) The signature of the person removing the controlled substance.
- (f) Controlled substances returned to the pharmacy.
- (g) A record of any waste of a controlled substance which, except as otherwise provided in subsection 2, must be witnessed and cosigned by another person who is licensed to provide medical care.

2. A record of any waste of a controlled substance kept pursuant to subsection 1 is not required to be witnessed and cosigned as required by subsection 1 if:

- (a) The record of waste is for a controlled substance which was administered by a practitioner authorized to administer anesthesia; and
- (b) Other current, complete and accurate records for the controlled substance administered and wasted are created and maintained.

3. Records maintained pursuant to this section must be maintained separately from records of patients.

(Added to NAC by Bd. of Pharmacy, eff. 3-27-90; A 9-12-91; 5-22-96; R157-99, 3-1-2000; R042-04, 5-25-2004)



NATIONAL ASSOCIATION OF  
CHAIN DRUG STORES

June 21, 2011

Larry Pinson  
Executive Secretary  
Nevada Board of Pharmacy  
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Fax: 775-850-1444

RE: Request for Discussion Item to be Added to July 13-14, 2011 Agenda

Dear Larry:

As you know, the Drug Enforcement Administration issued an interim final rule on March 31, 2010 that outlined the requirements that prescribers, pharmacists, their computer vendors, and e-prescription networks will need to observe should they want to participate in the electronic prescribing. Since that time, the National Association of Chain Drug Stores (NACDS) and SureScripts have been working diligently with stakeholders to make the necessary changes to their systems and operations to be ready to implement the electronic prescribing of controlled substances (EPCS) later this year.

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We were pleased to learn that Nevada legislators included language in SB 329 that allows the prescribing and dispensing of Schedule II controlled substance prescriptions pursuant to electronic prescriptions that comply with regulations adopted by the Board of Pharmacy. Electronic prescribing provides physicians and pharmacies with effective and efficient means to enhance the management of patients' medications.

We greatly appreciate the Board of Pharmacy's guidance in achieving the advancement of electronic prescribing in Nevada. To that end, we ask the Board for their gracious consideration in granting our request that an item be placed on the July 13-14 agenda to allow board members to begin a discussion on amending the electronic prescribing rules to relative to electronic prescriptions for Schedule II drugs.

NACDS thanks you for consideration of our request to add this discussion item to the agenda for the July 13-14, 2011 meeting. Please do not hesitate to contact me at 817-442-1155 or [mstaples@nacds.org](mailto:mstaples@nacds.org) if you have any questions or need us to provide additional information in advance of the meeting.

Sincerely,

Mary Staples

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cc: Members of the Nevada Board of Pharmacy

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