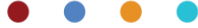


College of Pharmacists
of British Columbia



HPA BYLAWS SCHEDULE F
Part 4 – CERTIFIED PRACTICE – DRUG ADMINISTRATION BY INJECTION
AND INTRANASAL ROUTE
STANDARDS, LIMITS AND CONDITIONS

Application

This Part applies to all practising pharmacists, and should be read in conjunction with sections 4 (c.1) and 4.1(1) of the *Pharmacists Regulation*, B.C. Reg. 417/2008 under the *Health Professions Act*, R.S.B.C. 1996 c. 183, and in conjunction with sections 43, 43.1 and 46(5.1) of the College bylaws made under the *Health Professions Act*.

Standards

1. A pharmacist who administers a drug acts in the best interest of the patient and takes all appropriate steps to ensure that the drug is administered safely.
2. A pharmacist who administers a drug does so within the scope of their education, training and competence.
3. A pharmacist must assess the appropriateness of the drug for a patient, including:
 - (a) Appropriate indication for the patient
 - (b) Appropriate dose and route of administration
 - (c) Appropriate time and frequency for administration
 - (d) Allergy status
 - (e) Risk factors, including immunosuppression and pregnancy
 - (f) Contraindications and precautions including anaphylaxis and fainting
 - (g) Prior immunization history, if applicable
4. Obtain informed consent from the patient or patient's representative with regards to:
 - (a) Drug to be administered
 - (b) Purpose of the drug
 - (c) Benefits and risks of the drug
 - (d) Expected reaction
 - (e) Remaining for an appropriate wait period following administration of the drug
5. If administering a drug by injection, prepare and provide care of the injection site including:
 - (a) Assessing the injection site
 - (b) Selecting and landmarking the injection site
 - (c) Determining the requirement for dressings
6. Prepare for drug administration including:
 - (a) Taking appropriate steps to ensure the right drug is administered to the right patient
 - (b) Ensuring the drug is stable, and has been stored and labelled appropriately prior to administration
 - (c) Using aseptic technique and universal precautions for infection control in preparation, administration, and disposal of the drug



7. Following drug administration, a pharmacist must
 - (a) Ensure devices, supplies and any remaining drug are disposed of safely and appropriately
 - (b) Ensure the patient is appropriately monitored
 - (c) Notify and provide relevant information to other health professionals, as appropriate
 - (d) Report adverse events or reactions to the applicable government agency, as required
8. A pharmacist must document for each drug given:
 - (a) Informed consent
 - (b) Assessment of the appropriateness of the drug for the patient
 - (c) Drug and dose administered
 - (d) Lot number and expiry date of the drug
 - (e) Route of administration
 - (f) Site of administration
 - (g) Date and time of administration
 - (h) The identification of the pharmacist who administered the drug
 - (i) Patient response
 - (j) Any adverse reaction experienced due to the drug administered and management provided
 - (k) Patient or patient's representative contact information
 - (l) Providing patient or patient's representative with the administering pharmacist's contact information
 - (m) Patient teaching done, including adverse reactions and management and plans for follow-up
9. Ensure there is ready access to drugs, devices and other necessary equipment and supplies used to treat reactions to administered drugs.
10. Respond appropriately to complications and emergencies if they arise.
11. Develop, maintain and review, at least annually, a policy and procedure manual including:
 - (a) Emergency procedure and treatment protocol
 - (b) Precautions required for patients with latex allergies
12. Maintain a setting within which the drug is to be administered that is clean, safe, comfortable and appropriately private and furnished for the patient.

Limits

1. A practising pharmacist may only administer a drug or substance if it has been prescribed by a practitioner, unless it is for the purpose of immunization, to treat anaphylaxis arising from administering a drug or substance, or to administer naloxone to a person suspected of suffering from an overdose of opioids.
2. A practising pharmacist must not administer allergy serums, nor administer drugs and substances for cosmetic purposes by injection.
3. A practising pharmacist must not administer an injection to a child under 4 years old.
4. A practising pharmacist must not administer a drug by intranasal route to a child under 2 years old.



Conditions

1. A practising pharmacist must apply to the College of Pharmacists of B.C. for certification to administer Schedule I, IA and II drugs by injection or intranasal route within 1 year of successful completion of the required certification program.
2. A practising pharmacist must not administer a drug or substance by injection or intranasal route in B.C. prior to receiving notification from the College of Pharmacists of B.C. of their certification to administer drugs and substances by injection or intranasal route.