

# Prescribing and Dispensing Drugs

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**Standards and guidelines inform practitioners and the public of CDSBC's expectations for registrants. This document primarily contains standards, which are, by definition, mandatory and must be applied. Standards are clearly identified by mandatory language such as "must", "shall" and "required." This document also contains guidelines that are highly recommended but – while being evidence of a standard – are not, strictly speaking, mandatory. Guidelines contain permissive language such as "should" and "may."**



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# 1. Introduction

The purpose of these Standards is to assist registrants regarding dispensing and prescribing drugs.

The College of Dental Surgeons of BC (CDSBC) is committed to the safe and effective use of prescription medication. Dentists may need to administer drugs to provide treatment to a patient or a written prescription may be indicated afterwards. Therefore, it is essential that dental professionals know the requirements for prescribing and dispensing drugs. For example, opioid addiction is a troubling issue in health care, and it is important that practitioners appropriately record and label the name, quantity and strength of these drugs when prescribing them to patients in pain.

The following outlines the requirements for prescribing and dispensing drugs, including Controlled Prescription Program and Prescription Drug List drugs. It primarily contains standards, which are, by definition, mandatory and must be applied. Standards are clearly identified by words such as “must,” “shall” and “required.”

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# 2. Regulations

The federal and provincial laws and regulations governing the distribution of drugs by prescription in British Columbia are as follows:

- a. *Health Professions Act*
- b. *Food and Drugs Act of Canada*
- c. *Controlled Drugs and Substances Act*
- d. *Food and Drugs Regulations*
- e. *Narcotic Control Regulations*
- f. *Benzodiazepines and other targeted substances regulations*
- g. *Pharmacy Operations and Drug Scheduling Act*

Practitioners who can prescribe drugs under the *Health Professions Act* include dentists with a full, academic or restricted to specialty registration. Non-practising, retired or suspended practitioners, or those with a special permit for screening patients in long term care facilities, *cannot* prescribe drugs.

Dentists must not prescribe any drugs for family or friends unless they are patients of record. Dentists must only prescribe drugs for patients of record if the drug is required to provide dental treatment for the patient.



## 3. Controlled Prescription Program

The Controlled Prescription Program was established to prevent forgeries and reduce inappropriate prescribing of selected drugs. The list of drugs covered by the program has been agreed to by all participating organizations and is provided in Schedule IA to the *Pharmacy Operations and Drug Scheduling Act*, Bylaw 4(6) and 4(8). Unless otherwise specified, both single-entity products and preparations or mixtures of the scheduled drugs require the use of Controlled Prescription forms.

### Prescribing Requirements: Controlled Prescription Program Drugs

1. A practitioner may **prescribe** a drug under the Controlled Prescription Program to a person if that person is a patient under the practitioner's professional care, if the drug is required for the condition for which the patient is receiving treatment, and if the treatment is within the practitioner's scope of practice and training.
2. A practitioner who wishes to prescribe a drug under the Controlled Prescription Program must participate in the Controlled Prescription Program. Prescription forms are personalized and numerically recorded, and the prescription pad must be maintained intact in chronological order.
3. A practitioner who provides a drug under the Controlled Prescription Program shall ensure that it includes the information required in pharmacy legislation. Prescribers are advised that failure to complete the prescription forms may result in rejection of the prescription by the pharmacist with resulting patient and prescriber inconvenience. The following information is required on the Controlled Prescription Program:
  - a. Prescriber's name, initials, address and College registration number
  - b. Patient's name, initials, address, sex and date of birth
  - c. Patient's personal health number (if available)
  - d. Name, quantity, strength and form of drug (More than one medication or strength of medication can be included on one Controlled Prescription Program form, provided the orders are legible.)
  - e. Dosage instructions for use by the patient which shall include a specific frequency or interval or maximum daily dose
  - f. Date of prescription
  - g. Signature of practitioner
4. A practitioner shall record on the patient's chart the following information:
  - a. Date of prescription
  - b. Name, strength, quantity and form of drug
  - c. Directions for use of the drug
  - d. Condition being treated and/or dental treatment provided
  - e. Record if the drug is required to provide dental treatment for the patient.



## Dispensing Requirements: Controlled Prescription Program Drugs

Registrants of the College of Dental Surgeons of British Columbia must not dispense (give, sell or provide) drugs under the Controlled Prescription Program, unless such a registrant is classified as a “provider under the Pharmacare Program” as described below.

### Provider Under The Pharmacare Program

In extenuating circumstances, individual practitioners can apply to the College for dispensing privileges for Controlled Prescription Program drugs. If the application is approved, the dentist must register with the College of Pharmacists of British Columbia as a “provider under the Pharmacare Program” and must give written assurance that he/she will comply with the requirements of the *Pharmacy Operations and Drug Scheduling Act* in the dispensing of medications.

### Administration Requirements

1. A practitioner may administer Controlled Prescription Program drugs to a person if that person is a patient under the practitioner’s professional care, if the drug is required to provide treatment for a patient having dental procedures performed, and if the treatment is within the practitioner’s scope of practice and training. (Drugs are administered immediately preceding or during treatment.)
2. A practitioner must keep a separate register for each Controlled Prescription Program drug obtained for office use by prescription; such information to be provided upon request to the College or the Health Canada Office of Research and Surveillance. The register should include the following:

#### General Information

- a. Name of drug
- b. Name of person who ordered drug
- c. Amount purchased
- d. Date received
- e. Controlled Prescription Form folio number
- f. Dates of periodic inventory (physical count of drugs)

#### Administration Information

- a. Date when drug was provided to patient
- b. Patient’s name, address
- c. Quantity administered
- d. Stock remaining
- e. Condition being treated and/or dental treatment provided
- f. Practitioner’s name, initials and College registration number
- g. Name of person who supplied drug to patient



The College has developed a “Register of In-Office Controlled Prescription Program Drugs” form which can be used to collect the required information. (See [Appendix A](#))

## Opioid Prescribing

*It is recognized that over-prescribing of opioid pharmaceuticals by health care professionals is a problem. Experts in the medical community support the following guidelines.*

Before prescribing controlled prescription drugs give consideration to the following questions:

- Is there a reasonable non-narcotic alternative?
- Is there evidence of drug seeking behaviour?
- What is the minimum dose and number of the medication necessary to provide pain control for the immediate post-operative period of a few days?

If there is a concern that the patient may have been prescribed narcotics by another practitioner or may be exhibiting drug seeking behaviour, consultation with the pharmacist and/or medical practitioner is strongly advised.

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## 4. Other Prescription (PDL) Drugs and Non-CPP Narcotics

### Prescribing Requirements: PDL Drugs and Non-CPP Narcotics (e.g. Tylenol No. 3, Frosst 292)

1. A practitioner may **prescribe** a drug for a person if that person is a patient under the practitioner’s professional care, if the drug is required to provide treatment for a patient having dental procedures performed that are within the practitioner’s scope of practice and training.
2. A practitioner shall give a written prescription to the patient or give a verbal prescription to a pharmacist chosen by the patient.
3. A practitioner who provides a written prescription shall ensure that the prescription includes:
  - a. Practitioner’s name, initials, address, telephone number and College registration number
  - b. Patient’s name, initials and address (date of birth optional)
  - c. Name, quantity, strength and form of drug
  - d. Directions for use of drug
  - e. If the prescription can be refilled and how many times (See the College of Pharmacists of British Columbia’s Prescription Regulations Chart for more information)
  - f. Date of prescription



- g. Signature of practitioner
4. A practitioner who provides a verbal prescription must do so personally and shall ensure that the prescription includes:
    - a. Practitioner’s name, initials, address, telephone number and College registration number
    - b. Patient’s name, initials and address (date of birth optional)
    - c. Name, quantity, strength and form of drug
    - d. Directions for use of drug
    - e. If the prescription can be refilled and how many times (only Prescription Drug List drugs)
  5. A practitioner shall record on the patient’s chart the following information:
    - a. Date of prescription and method (written or verbal)
    - b. Name, quantity, strength and form of drug
    - c. Directions for use of drug if copy of written prescription is not kept in the chart

### **Dispensing Requirements: PDL Drugs and Non-CPP Narcotics (e.g. Tylenol No. 3, Frosst 292)**

1. A practitioner may dispense a drug to a person if that person is a patient under the practitioner’s professional care, if the drug is required to provide treatment for a patient having dental procedures performed that are within the practitioner’s scope of practice and training.
2. A practitioner who **dispenses** a drug shall comply with all the federal and provincial laws relating to the storage, handling, distribution, labeling, packaging and recording of information.
3. A practitioner shall **dispense** a prescription in a “child-resistant” package.
4. A practitioner shall **dispense** a prescription with a label containing the following information:
  - a. Name, address and telephone number of **dispensing** practitioner (and institution where applicable)
  - b. Dispensing date
  - c. Name of patient
  - d. Directions for use
  - e. Identification of contents:
    - Proper, common or brand name of drug
    - Quantity and strength of drug
    - Name of manufacturer or DIN # (unless brand name is used)



5. A practitioner shall have a record of the particulars of the dispensing in the patient's chart including:
  - a. Date prescription dispensed
  - b. Name, quantity, strength and form of drug
  - c. Directions for use of drug

## Administration Requirements

1. A practitioner may administer PDL Drugs or non-CPP narcotics to a person if that person is a patient under the practitioner's professional care, if the drug is required to provide treatment for a patient having dental procedures performed that are within the practitioner's scope of practice and training. (Drugs are administered immediately preceding or during treatment.)
2. A practitioner must record the name, strength and dosage of the drug administered on the patient's chart.

## Register for "In-Office" Non-CPP Narcotics

A practitioner must keep a separate register for each non-CPP narcotic obtained for office use by prescription, such information to be provided upon request to the College or the Health Canada Office of Research and Surveillance. The register must include the following:

1. General Information
  - a. Name of drug
  - b. Name of person who ordered drug
  - c. Amount purchased
  - d. Date received
  - e. Prescription number (where applicable)
  - f. Dates of periodic inventory (physical count of drugs)
2. Dispensing/Administration Information
  - a. Date when drug was provided to patient
  - b. Patient's name, address, and date of birth
  - c. Quantity dispensed/administered
  - d. Stock remaining
  - e. Packaging for dispensing (provided in a labeled, child resistant container)
  - f. Condition being treated and/or dental treatment provided
  - g. Practitioner's name, initials and CDSBC registration number
  - h. Name of person who supplied drug to patient

The College has developed a "Register of In-Office Non-CPP Narcotics" form which can be used to collect the required information. (See [Appendix B](#))



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## 5. Sedation and General Anaesthetic Drugs

Sedation and general anaesthetic services in dentistry may only be provided by practitioners who have successfully completed a training program designed to produce competency in the specific modality of sedation or general anaesthetic utilized. Practitioners must follow the College's guidelines for sedation and general anaesthetic services, and where applicable, registration and/or accreditation requirements of the College must also be fulfilled. In addition, a practitioner must maintain a Narcotic and Controlled Drug Register as required by the Health Canada Office of Research and Surveillance.

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## 6. Local Anaesthetic Drugs

The type of local anaesthetic, actual doses and patient response shall be documented in the patient's chart.





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# Glossary

**Administration:** Provision of medications immediately preceding or during treatment e.g., local anaesthetic

**“Child Resistant” Package:** A container that complies with the requirements of the Canadian Standards Association

**Controlled Drug Substance:** a drug which includes a substance listed in Schedule I, II, III, IV or V of the *Controlled Drugs and Substances Act* (Canada)

**Dispense:** Means give, sell or provide medications including drugs purchased by the practitioner and/or samples, but does not include administration by or on behalf of the practitioner to a patient in the course of treatment

**Drug Schedules to the *Pharmacy Operations and Drug Scheduling Act of British Columbia*:** Alphabetical list of all drugs and their status in British Columbia

**Schedule I:** Require a prescription for sale and are provided to the public by a pharmacist following the diagnosis and professional intervention of a practitioner. The sale is controlled in a regulated environment as defined by provincial pharmacy legislation.

**Schedule IA:** Controlled Prescription Program drugs which may be sold by a pharmacist to a practitioner or on the prescription of a practitioner in accordance with *Pharmacy Operations and Drug Scheduling Act*, Bylaw 4(6) and 4(8). The list of drugs covered by the program has been agreed to by all the participating organizations. Unless otherwise specified, both single-entity products and preparations or mixtures of the scheduled drugs require the use of Controlled Prescription forms under the Controlled Prescription Program.

**Inspector:** A person designated by the Minister of Health Canada as an inspector for the purposes of the Regulations to the *Food and Drugs Act* and the *Controlled Drugs and Substances Act Regulations*

**Minister:** Refers to the Minister of Health Canada

**Monitored Drug:** Any drug that requires a Controlled Prescription Form under the Controlled Prescription Program

**Narcotic:** Any drug or substance included in the Narcotic Control Regulations

*Controlled Prescription Program (CPP) Narcotic:* Any narcotic that requires a Controlled Prescription Form

*Non-CPP Narcotic:* Preparation containing only one narcotic drug plus two (or more) non-narcotic drugs in a therapeutic dose that does not require a Controlled Prescription Form

**Practitioner:** means a person

(a) who is authorized to practise medicine, dentistry, podiatry or veterinary medicine, or



(b) who is

- (i) in a class of persons prescribed by the minister for the purpose of this definition, and
- (ii) authorized under the *Health Professions Act* to prescribe drugs or devices in the course of providing the services of a designated health profession as defined in section 1 of that Act

**Prescription:** means an authorization from a practitioner to dispense a specified drug or device for use by a designated individual or animal

**Prescription Drug List (PDL) to the *Food and Drugs Act*:** is a list of medicinal ingredients that when found in a drug, require a prescription. It does not include medicinal ingredients that when found in a drug, require a prescription if those ingredients are listed in *Controlled Drugs and Substances Act Schedules*.

**Schedule G to the *Food and Drugs Act*:** List of controlled drugs

**Controlled Prescription Program:** Monitoring program to help eliminate abuse and diversion of certain pharmaceutical drugs (DP)

# APPENDIX A

## REGISTER OF "IN-OFFICE" CONTROLLED PRESCRIPTION PROGRAM DRUGS

(For Administration Only)

NAME OF DRUG \_\_\_\_\_ STRENGTH \_\_\_\_\_ FORM \_\_\_\_\_ QUANTITY \_\_\_\_\_

ORDERED BY \_\_\_\_\_ PRESCRIPTION # (Where Applicable) \_\_\_\_\_ DATE RECEIVED \_\_\_\_\_

### PERIODIC INVENTORY

Date \_\_\_\_\_ Qty in Stock \_\_\_\_\_ Qty on Record \_\_\_\_\_ Difference \_\_\_\_\_ Reason \_\_\_\_\_ Initials \_\_\_\_\_

Date \_\_\_\_\_ Qty in Stock \_\_\_\_\_ Qty on Record \_\_\_\_\_ Difference \_\_\_\_\_ Reason \_\_\_\_\_ Initials \_\_\_\_\_

Date \_\_\_\_\_ Qty in Stock \_\_\_\_\_ Qty on Record \_\_\_\_\_ Difference \_\_\_\_\_ Reason \_\_\_\_\_ Initials \_\_\_\_\_

Date \_\_\_\_\_ Qty in Stock \_\_\_\_\_ Qty on Record \_\_\_\_\_ Difference \_\_\_\_\_ Reason \_\_\_\_\_ Initials \_\_\_\_\_

Date	Patient's Name, Address	Qty Admin	Stock Left	Condition Being Treated and/or Dental Treatment Provided	Dentist's Name, Initials, College Reg. #	Name of Person Who Supplied Drugs to Patient

## REGISTER FOR “IN OFFICE” CONTROLLED PRESCRIPTION PROGRAM DRUGS

1. A practitioner must keep a separate register for each narcotic or controlled drug prescription obtained for office use which includes the following:

General Information	Administration Information
<ul style="list-style-type: none"> <li>a. Name of drug</li> <li>b. Name of person who ordered drug</li> <li>c. Amount purchased</li> <li>d. Date received</li> <li>e. Prescription number (where applicable)</li> <li>f. Dates of periodic inventory (physical count of drugs)</li> </ul>	<ul style="list-style-type: none"> <li>a. Date when drug was provided to patient</li> <li>b. Patient’s name, address</li> <li>c. Quantity administered</li> <li>d. Stock remaining</li> <li>e. Condition being treated and/or dental treatment provided</li> <li>f. Practitioner’s name, initials and College registration number</li> <li>g. Name of person who administered drugs to patient</li> </ul>

The College has developed a “Register of In-Office Controlled Prescription Program Drugs” form which can be used to collect the required information.

2. A practitioner must provide access to records to authorized inspectors as outlined in the *Health Professional Act, Food and Drugs Act, Controlled Drugs and Substances Act, Food and Drugs Regulations, Narcotic Control Regulations, Benzodiazepines and Other Targeted Substances Regulations, and Pharmacy Operations and Drug Scheduling Act*, and must:
- a. Furnish on request such information respecting (i) the receipt and use by the practitioner of narcotic and controlled drugs (including the administering and furnishing thereof to a person, i.e. “in-office drugs”) and (ii) the prescriptions for narcotic and controlled drugs issued by the practitioner (i.e. all prescriptions written for patients), as the Minister may require:
  - b. Produce to an inspector upon request any records that the *Regulations* require the practitioner to keep
  - c. Permit an inspector to make copies of such records or to take extracts there from
  - d. Permit an inspector to check all stocks of narcotic and controlled drugs on the practitioner’s premises
  - e. Retain in their possession for at least two years any record that the *Regulations* require them to keep
  - f. Take adequate steps to protect controlled drugs in their possession
  - g. Report to the Minister (Bureau of Drug Surveillance) any loss (including breakage) or theft of a narcotic or controlled drug **within ten days** of the practitioner’s discovery of the loss or theft

Where a practitioner alleges or, in any prosecution for an offense under the laws or regulations, pleads that their possession of a narcotic or controlled drug was for use in their practice or that they prescribed, administered, gave, sold or furnished a narcotic or controlled drug to any person as a patient under their professional treatment and that such narcotic or controlled drug was required for the condition for which the patient received treatment, the burden of proof thereof shall be on such practitioner. The evidence needed to support this would be detailed records.

## APPENDIX B

### REGISTER OF "IN-OFFICE" NON-CONTROLLED PRESCRIPTION PROGRAM NARCOTICS

(For Administration Only)

NAME OF DRUG \_\_\_\_\_ STRENGTH \_\_\_\_\_ FORM \_\_\_\_\_ QUANTITY \_\_\_\_\_

ORDERED BY \_\_\_\_\_ PRESCRIPTION # (Where Applicable) \_\_\_\_\_ DATE RECEIVED \_\_\_\_\_

#### PERIODIC INVENTORY

Date \_\_\_\_\_ Qty in Stock \_\_\_\_\_ Qty on Record \_\_\_\_\_ Difference \_\_\_\_\_ Reason \_\_\_\_\_ Initials \_\_\_\_\_

Date \_\_\_\_\_ Qty in Stock \_\_\_\_\_ Qty on Record \_\_\_\_\_ Difference \_\_\_\_\_ Reason \_\_\_\_\_ Initials \_\_\_\_\_

Date \_\_\_\_\_ Qty in Stock \_\_\_\_\_ Qty on Record \_\_\_\_\_ Difference \_\_\_\_\_ Reason \_\_\_\_\_ Initials \_\_\_\_\_

Date \_\_\_\_\_ Qty in Stock \_\_\_\_\_ Qty on Record \_\_\_\_\_ Difference \_\_\_\_\_ Reason \_\_\_\_\_ Initials \_\_\_\_\_

Date	Patient's Name, Address	Qty Admin	Stock Left	Disp. in Labeled, Child-proof Container	Condition Being Treated and/or Dental Treatment Provided	Dentist's Name, Initials, College Reg. #	Name of Person Who Supplied Drugs to Patient

## REGISTER FOR “IN OFFICE” NON-CONTROLLED PRESCRIPTION PROGRAM NARCOTICS

1. A practitioner must keep a separate register for each narcotic or controlled drug prescription obtained for office use which includes the following:

General Information	Administration Information
<ul style="list-style-type: none"> <li>a. Name of drug</li> <li>b. Name of person who ordered drug</li> <li>c. Amount purchased</li> <li>d. Date received</li> <li>e. Prescription number (where applicable)</li> <li>f. Dates of periodic inventory (physical count of drugs)</li> </ul>	<ul style="list-style-type: none"> <li>a. Date when drug was provided to patient</li> <li>b. Patient’s name, address</li> <li>c. Quantity dispensed/administered</li> <li>d. Stock remaining</li> <li>e. Packaging for dispensing (provided in a labeled, child-proof container)</li> <li>f. Condition being treated and/or dental treatment provided</li> <li>g. Practitioner’s name, initials and College registration number</li> <li>h. Name of person who supplied drugs to patient</li> </ul>

The College has developed a “Register of In-Office Non-Controlled Prescription Program Narcotics” form which can be used to collect the required information.

2. A practitioner must provide access to records to authorized inspectors as outlined in the *Health Professional Act, Food and Drugs Act, Controlled Drugs and Substances Act, Food and Drugs Regulations, Narcotic Control Regulations, Benzodiazepines and Other Targeted Substances Regulations, and Pharmacy Operations and Drug Scheduling Act*, and must:
- a. Furnish on request such information respecting (i) the receipt and use by the practitioner of narcotic and controlled drugs (including the administering and furnishing thereof to a person, i.e. “in-office drugs”) and (ii) the prescriptions for narcotic and controlled drugs issued by the practitioner (i.e. all prescriptions written for patients), as the Minister may require
  - b. Produce to an inspector upon request any records that the *Regulations* require the practitioner to keep
  - c. Permit an inspector to make copies of such records or to take extracts there from
  - d. Permit an inspector to check all stocks of narcotic and controlled drugs on the practitioner’s premises
  - e. Retain in their possession for at least two years any record that the *Regulations* require them to keep
  - f. Take adequate steps to protect controlled drugs in their possession
  - g. Report to the Minister (Bureau of Drug Surveillance) any loss (including breakage) or theft of a narcotic or controlled drug **within ten days** of the practitioner’s discovery of the loss or theft

Where a practitioner alleges or, in any prosecution for an offense under the laws or regulations, pleads that their possession of a narcotic or controlled drug was for use in their practice or that they prescribed, administered, gave, sold or furnished a narcotic or controlled drug to any person as a patient under their professional treatment and that such narcotic or controlled drug was required for the condition for which the patient received treatment, the burden of proof thereof shall be on such practitioner. The evidence needed to support this would be detailed records.

**Board Approved**

- 25 November 2016

**Published**

- 2017

**Originating Committee**

- Sedation and General Anaesthetic Services Committee



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