

855-019-0260

Collaborative Drug Therapy Management

(1) As used in this rule "Collaborative Drug Therapy Management" (CDTM) means the participation by a practitioner and a pharmacist in the management of drug therapy pursuant to a written agreement that includes information on the dosage, frequency, duration and route of administration of the drug, authorized by a practitioner and initiated upon a prescription order for an individual patient and:

(a) Is agreed to by one practitioner and one pharmacist; or

(b) Is agreed to by one or more practitioners in a single organized medical group, such as a hospital medical staff, clinic or group practice, including but not limited to organized medical groups using a pharmacy and therapeutics committee, and one or more pharmacists.

(2) A pharmacist shall engage in collaborative drug therapy management with a practitioner only under a written arrangement that includes:

(a) The identification, either by name or by description, of each of the participating pharmacists;

(b) The identification, by name or description, of each of the participating practitioners or group of practitioners;

(c) The name of the principal pharmacist and practitioner who are responsible for development, training, administration, and quality assurance of the arrangement;

(d) The types of decisions that the pharmacist is allowed to make, which may include:

(A) A detailed description of the types of diseases, drugs, or drug categories involved, and the activities allowed in each case;

(B) A detailed description of the methods, procedures, decision criteria, and plan the pharmacist is to follow when conducting allowed activities;

(C) A detailed description of the activities the pharmacist is to follow including documentation of decisions made and a plan or appropriate mechanism for communication, feedback, and reporting to the practitioner concerning specific decisions made. In addition to the agreement, documentation shall occur on the prescription record, patient profile, a separate log book, or in some other appropriate system;

(D) Circumstances which will cause the pharmacist to initiate communication with the practitioner, including but not limited to the need for a new prescription order and a report of a patient's therapeutic response or any adverse effect.

(e) Training requirement for pharmacist participation and ongoing assessment of competency, if necessary;

(f) Quality assurance and periodic review by a panel of the participating pharmacists and practitioners;

(g) Authorization by the practitioner for the pharmacist to participate in collaborative drug therapy; and

(h) A requirement for the collaborative drug therapy arrangement to be reviewed and updated, or discontinued at least every two years;

(3) The collaborative drug therapy arrangement and associated records must be kept on file in the pharmacy and made available to any appropriate health licensing board upon request.

(4) Nothing in this rule shall be construed to allow therapeutic substitution outside of the CDTM agreement.

Stat. Auth.: ORS 689.205

Stats. Implemented: ORS 689.151, 689.155

Hist.: Hist.: BP 4-1998, f. & cert. ef. 8-14-98; BP 1-1999(Temp), f. & cert. ef. 1-29-99 thru 7-28-99; Administrative correction 8-9-99; BP 1-2000, f. & cert. ef. 2-16-00; Renumbered from 855-041-0400, BP 2-2008, f. & cert. ef. 2-20-08

Administration of Vaccines by Pharmacists

855-019-0280

Protocols, Policies and Procedures

- (1) Prior to administering a vaccine to a person who is at least 11 years of age a pharmacist must follow protocols written and approved by the Oregon Health Authority (OHA) for administration of vaccines and the treatment of severe adverse events following administration of a vaccine.
- (2) The pharmacy must maintain written policies and procedures for handling and disposal of used or contaminated equipment and supplies.
- (3) The pharmacist must give the appropriate Vaccine Information Statement (VIS) to the patient or legal representative with each dose of vaccine covered by these forms. The pharmacist must ensure that the patient or legal representative is available and has read, or has had read to them, the information provided and has had their questions answered prior to administering the vaccine.
- (4) The pharmacist must report adverse events as required by the Vaccine Adverse Events Reporting System (VAERS) and to the primary care provider as identified by the patient.
- (5) The pharmacist must make available the Adolescent Well Visit Referral document, provided by the OHA, to a patient aged 11 through 18 years of age or their legal representative.
- (6) The pharmacist may administer or dispense an oral vaccine as established by written protocols approved by OHA.

Stat. Auth.: ORS 689.205

Stats. Implemented: ORS 689.151, 689.155, 689.645

Hist.: BP 7-2000, f. & cert. ef. 6-29-00; BP 3-2006, f. & cert. ef. 6-9-06; Renumbered from 855-041-0510, BP 2-2008, f. & cert. ef. 2-20-08; BP 11-2010, f. 10-22-10, cert. ef. 1-1-11

855-019-0290

Record Keeping and Reporting

- (1) A pharmacist who administers a vaccine to a patient must fully document the administration in the patient's permanent record.
- (2) A pharmacist who administers any vaccine must report the following elements to the OHA ALERT Immunization Information System in a manner prescribed by OHA within 15 days of administration. This replaces the former requirement to notify the primary health care provider. A pharmacist is not required to notify the primary health care provider.
 - (a) The name, address, gender and date of birth of the patient;
 - (b) The date of administration of the vaccine;

- (c) The NDC number of the vaccine, or other acceptable standardized vaccine code set;
 - (d) The address of the pharmacy where vaccine was administered unless automatically embedded in the electronic report provided to the OHA ALERT Immunization System;
 - (e) The phone number of the patient when available;
 - (f) The dose amount, manufacturer, site of administration, lot number and expiration date of the vaccine when available;
- (3) A pharmacist who administers any vaccine will keep documentation of current CPR training. This documentation will be kept on site and available for inspection.
- (4) A pharmacist who administers any vaccine will follow storage and handling guidance from the vaccine manufacturer and the Centers for Disease Control and Prevention (CDC).
- (5) For the purpose of participation in the Oregon Vaccines for Children program,
- (a) The vaccine eligibility code for each dose must be reported to the ALERT Immunization Information System in the manner prescribed by OHA, and
 - (b) The pharmacist is recognized as a prescriber.
- (6) If providing state or federal vaccines during a pandemic as determined by the CDC, the event and priority code as specified by OHA must be provided upon request in the manner prescribed by OHA.

Stat. Auth.: ORS 689.205

Stats. Implemented: ORS 689.151, 689.155, 689.645

Hist.: BP 7-2000, f. & cert. ef. 6-29-00; BP 3-2006, f. & cert. ef. 6-9-06: Renumbered from 855-041-0520, BP 2-2008, f. & cert. ef. 2-20-08; BP 11-2010, f. 10-22-10, cert. ef. 1-1-11