Definitions

In this Division of Rules:

(1) “Clinical Pharmacy Agreement” means an agreement between a pharmacist or pharmacy and a health care organization or a physician that permits the pharmacist to engage in the practice of clinical pharmacy for the benefit of the patients of the health care organization or physician.

(2) "Collaborative Drug Therapy Management (CDTM)" has the same meaning as defined in OAR 855-006-0005.

(3) "Counseling" means an oral or other appropriate communication process between a pharmacist and a patient or a patient's agent in which the pharmacist obtains information from the patient or patient's agent, and, where appropriate, the patient's pharmacy records, assesses that information and provides the patient or patient's agent with professional advice regarding the safe and effective use of the drug or device for the purpose of assuring therapeutic appropriateness.

(4) "Drug Regimen Review (DRR)" means the process conducted by a pharmacist who is consulting for a long-term-care facility or other institution, either prior to dispensing or at a later time, with the goal of ensuring that optimal patient outcomes are achieved from the drug therapy.

(5) "Drug Utilization Review (DUR)" has the same meaning as defined in OAR 855-006-0005.

(6) "Medication Therapy Management (MTM)" means a distinct service or group of services that is intended to optimize therapeutic outcomes for individual patients. Medication Therapy Management services are independent of, but can occur in conjunction with, the provision of a medication product.

(7) “Practice of Clinical Pharmacy” means:

(a) The health science discipline in which, in conjunction with the patient’s other practitioners, a pharmacist provides patient care to optimize medication therapy and to promote disease prevention and the patient’s health and wellness;

(b) The provision of patient care services, including but not limited to post-diagnostic disease state management services; and

(c) The practice of pharmacy by a pharmacist pursuant to a clinical pharmacy agreement.

(8) “Practice of Pharmacy” is as defined in ORS 689.005.
General Responsibilities of a Pharmacist

ORS 689.025 states that "the practice of pharmacy in the State of Oregon is declared a health care professional practice affecting the public health, safety and welfare". Pharmacy practice is a dynamic patient-oriented health service that applies a scientific body of knowledge to improve and promote patient health by means of appropriate drug use, drug-related therapy, and communication for clinical and consultative purposes. A pharmacist licensed to practice pharmacy by the Board has the duty to use that degree of care, skill, diligence and professional judgment that is exercised by an ordinarily careful pharmacist in the same or similar circumstances.

(1) A pharmacist while on duty must ensure that the pharmacy complies with all state and federal laws and rules governing the practice of pharmacy.

(2) Only a pharmacist shall perform the duties of a pharmacist may practice pharmacy as defined in ORS 689.005, to include the provision of patient care services, that Activities that require the professional judgment of a pharmacist include, but are not limited to:

(a) Drug Utilization Review;
(b) Counseling;
(c) Drug Regimen Review;
(d) Medication Therapy Management;
(e) Collaborative Drug Therapy Management or other post-diagnostic disease state management, pursuant to a valid agreement;
(f) Practice pursuant to State Drug Therapy Management Protocols;
(g) Ordering, interpreting and monitoring of a laboratory test;
(h) Oral receipt or transfer of a prescription; and
(i) Final verification of the work performed by those under their supervision.

(3) A pharmacist may not delegate any task listed in OAR 855-019-0200(2), except that requires the professional judgment of a pharmacist. Such tasks include but are not limited to:
(a) Counseling to a patient or patient's agent, or other healthcare provider;

(b) Verification;

(c) Performing DUR;

(d) Providing a CDTM, DRR, or MTM service;

(e) Ordering, interpreting and monitoring of a laboratory test; and

(f) Oral receipt or transfer of a prescription, except that

g) a pharmacist may permit an intern to perform the duties of a pharmacist under their
direction and supervision, after the intern has successfully completed his or her first
academic year, and only after successful completion of coursework corresponding to those
duties. An intern under the supervision of a pharmacist may perform all the duties of a
technician and the following:

(A) Counseling;

(B) Performing DUR;

(C) Oral receipt or transfer of a prescription;

(D) Immunizations if appropriately trained, and supervised by an immunization qualified
pharmacist;

(E) Other activities approved in writing by the Board.

(4) An intern cannot perform final verification.

(5)(4) A pharmacist who is supervising an intern is responsible for the actions of that intern;
however, this does not absolve the intern from responsibility for their own actions.

(6)(5) A pharmacist on duty is responsible for supervising all pharmacy personnel, and ensuring
that pharmacy personnel only work within the scope of duties allowed by the Board.

(7)(6) A pharmacist may not permit non-pharmacist personnel to perform any duty they are not
licensed and trained to perform.

(8)(7) A pharmacist while on duty is responsible for the security of the pharmacy area including:

(a) Providing adequate safeguards against theft or diversion of prescription drugs, and records for
such drugs;
(b) Ensuring that all records and inventories are maintained in accordance with state and federal laws and rules;

(c) Ensuring that only a pharmacist has access to the pharmacy when the pharmacy is closed.

Stat. Auth.: ORS 689.205
Stats. Implemented: ORS 689.025, 689.151, 689.155

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State Drug Therapy Management Protocols

(1) A pharmacist may participate in statewide drug therapy management protocols developed by the Oregon Health Authority to provide approved patient care services including but not limited to:

(a) Smoking cessation therapy;

(b) Travel health services; and

(c) Immunizations.

(2) The pharmacy must maintain written or electronic policies and procedures for each state drug therapy management protocol in which it participates.

(3) A pharmacist who participates in a state drug therapy management protocol must:

(a) Retain the required training documentation set forth by the protocol and make available to the Board upon request; and

(b) Document the prescription, administration, and patient interaction in the patient’s record, and provide notification to the patient’s primary care provider when available.

Stat. Auth.: ORS 689.205
Stats. Implemented: ORS 689.155, 2015 OL Ch. 362