

# Application for Registration as a Dispensing Physician or Physician Associate Revised 06/2024

Last Name	First Name	Middle Name	Middle Name	
Mailing Address Street	City	State	Zip Code	
License Number	Primary Practice Phone	Primary Email		
	n and delivery of a prescription drug, pabeled for subsequent administration	•		
Dispensing does <b>NOT</b> include:  1. Distribution of free samp 2. Drugs, vaccines, or other 3. Writing prescriptions that	parenterals administered in the office.			
	dispensing physician or physician a to renew this registration biennially	_	ration period. I	
PLEASE COMPLETE THE AREAS BI	ELOW:			
Primary dispensing (if different from		Other dispensing location	(s)	
of a dispensing physician or phy	olication and the enclosed federal and sician associate; that I have completed erstand that I must dispense all drugs distate laws.	d all areas of this form; and that t	the information	
Signature		Date		

### **Oregon Dispensing Physicians or Physician Associates**

### These federal and state regulations must be reviewed prior to submitting this application

### **Federal Regulations**

### Title 21 Code of Federal Regulations 1304.22(c)

http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/cfrsearch.cfm

#### Records for dispensers and researchers

Each person registered or authorized to dispense or conduct research with controlled substances shall maintain records with the same information required of manufacturers pursuant to paragraph (a)(2)(i), (ii), (iv), (vii), and (ix) of this section. In addition, records shall be maintained of the number of units or volume of such finished form dispensed, including the name and address of the person to whom it was dispensed, the date of dispensing, the number of units or volume dispensed, and the written or typewritten name or initials of the individual who dispensed or administered the substance on behalf of the dispenser. In addition to the requirements of this paragraph, practitioners dispensing gammahydroxybutyric acid under a prescription must also comply with 1304.26.

### **State Regulations**

#### **Oregon Revised Statutes**

https://www.oregonlegislature.gov/bills laws/ors/ors677.html

#### 677.010 Definitions

- (5) "Dispense" means the preparation and delivery of a prescription drug, pursuant to a lawful order of a practitioner, in a suitable container appropriately labeled for subsequent administration to or use by a patient or other individual entitled to receive the prescription drug.
- (6) "Dispensing physician" means a physician or podiatric physician and surgeon who purchases prescription drugs for the purpose of dispensing them to patients or other individuals entitled to receive the prescription drug and who dispenses them accordingly.
- (7) "Drug" means all medicines and preparations for internal or external use of humans, intended to be used for the cure, mitigation or prevention of diseases or abnormalities of humans, which are recognized in any published United States Pharmacopoeia or National Formulary, or otherwise established as a drug.

# 677.089 Physicians dispensing prescription drugs to do so personally; records; required labeling information

- (1) Prescription drugs dispensed by a physician shall be personally dispensed by the physician. Nonjudgmental dispensing functions may be delegated to staff associates when the accuracy and completeness of the prescription is verified by the physician.
- (2) The dispensing physician shall maintain records of receipt and distribution of prescription drugs. These records shall be readily accessible and subject to inspection by the Oregon Medical Board.
- (3) The dispensing physician shall label prescription drugs with the following information:
  - (a) Name of patient;
  - (b) The name and address of the dispensing physician;
  - (c) Date of dispensing;
- (d) The name of the drug but if the dispensed drug does not have a brand name, the prescription label shall indicate the generic name of the drug dispensed along with the name of the drug distributor or manufacturer, its quantity per unit and the directions for its use stated in the prescription. However, if the drug is a compound, the quantity per unit need not be stated;
  - (e) Cautionary statements, if any, as required by law; and
- (f) When applicable and as determined by the State Board of Pharmacy, an expiration date after which the patient should not use the drug.
- (4) Prescription drugs shall be dispensed in containers complying with the federal Poison Prevention Packaging Act unless the patient requests a noncomplying container.

# 677.511 Physician associate authority to dispense prescription drugs; requirements.

- (1) A physician associate is authorized to write prescriptions, including prescriptions for controlled substances listed in Schedules II through V.
- (2)(a) A physician associate may register with the Oregon Medical Board for authority to dispense prescription drugs.
- (b) Notwithstanding paragraph (a) of this subsection, and except as permitted under ORS 677.515 (5), a physician associate may not dispense controlled substances classified in Schedule I or II under the federal Controlled Substances Act, 21 U.S.C. 811 and 812, as modified under ORS 475.035.
- (3) A registration under this section must include any information required by the board by rule.
- (4) Prescription drugs dispensed by a physician associate must be personally dispensed by the physician associate, except that nonjudgmental dispensing functions may be delegated to staff assistants when the accuracy and completeness of the prescription is verified by the physician associate.
- (5) The physician associate shall maintain records of the receipt and distribution of prescription drugs. The records must be readily accessible for inspection by the board upon request of the board.
- (6) The physician associate shall ensure that a prescription drug dispensed by the physician associate is labeled in compliance with the requirements of ORS 677.089 (3).
- (7) The board has disciplinary authority regarding a physician associate who has prescription drug dispensing authority.

### **Oregon Administrative Rules**

https://secure.sos.state.or.us/oard/displayChapterRules.action?selectedChapter=14

### 847-015-0015 Maintenance of Controlled Substances Log by Prescribing Practitioners

Any practitioner dispensing or administering controlled substances from the practitioner's office must have a Drug Enforcement Administration registration indicating the address of that office. The practitioner shall maintain an inventory log showing all controlled substances received, and administered or dispensed. This log shall also list for each controlled substance, the patient's name, amounts used, and date administered or dispensed. This log shall be available for inspection on request by the Oregon Medical Board or its authorized agents. Controlled substances samples are included in this rule.

# 847-015-0020 Maintenance of Controlled Substances Log — Ambulance and Medical Rescue Services Receiving Controlled Substances from Physicians

Any physician providing controlled substances for use by ambulance and medical rescue services must have a Drug Enforcement Administration registration for the address where the controlled substances and inventory log are stored. The inventory log at the registered address shall be maintained showing all controlled substances received, or dispensed to the emergency vehicle. The administration log shall also show for each controlled substance, the patient's name and amount used, date, and by whom administered or dispensed, and may be maintained in the emergency vehicle. This log should be reviewed for accuracy on a monthly basis and be readily retrievable for inspection on request by the Board, the ambulance licensing authority as specified in ORS 682.015, or their authorized agents.

#### 847-015-0025 Dispensing, Distribution and Administration (Physicians)

- (1) Any actively licensed physician or podiatric physician who dispenses drugs must register with the Board as a dispensing physician before beginning to dispense drugs.
- (2) At the time of license registration renewal, all dispensing physicians and podiatric physicians must indicate their status as a dispensing physician on the registration renewal form.
- (3) Dispensing of drugs must be documented in the patient record. Documentation must include the name of the drug, the dose, the quantity

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dispensed, the directions for use and the name of the physician or podiatric physician dispensing the drugs. The physician or podiatric physician must verbally counsel the patient concerning any new medications and must provide written information on the directions for use.

- (4) Distribution of samples, without charge, is not dispensing under this rule. Distribution of samples must be documented in the patient record. Documentation must include the name of the drug, the dose, the quantity distributed and the directions for use. The physician or podiatric physician must verbally counsel the patient concerning any new medications and must provide written information on the directions for use.
- (5) Administering drugs in the physician's or podiatric physician's office is not dispensing under this rule. Administration of drugs must be documented in the patient record. Documentation must include the name of the drug, the dose and the quantity administered.
- (6) Failure to comply with any section of this rule is a violation of the ORS Chapter 677 and is grounds for a \$195 fine. The licensee may be subject to further disciplinary action by the Board.

### 847-050-0041 Prescribing and Dispensing Privileges (Physician Associates)

- (1) A physician associate registered prior to July 12, 1984, who does not possess the qualifications of OAR 847-050-0020 may retain all practice privileges which have been granted prior to July 12, 1984. Under these conditions, a physician associate may issue written, electronic or oral prescriptions for Schedule III-V medications, based on the physician associate's education, training, experience, and commensurate with the collaboration agreement, if the physician associate has passed a specialty examination approved by the Board prior to July 12, 1984, and the following conditions are met:
  - (a) The physician associate has passed the Physician Associate National Certifying Examination (PANCE); and
  - (b) The physician associate has documented adequate education or experience in pharmacology commensurate with the collaboration agreement.
- (2) A physician associate may issue written, electronic, or oral prescriptions for Schedule III-V medications, based on the physician associate's education, training, experience, and commensurate with the collaboration agreement.
- (3) A physician associate may issue written or electronic prescriptions or emergency oral prescriptions followed by a written authorization for Schedule II medications if the requirements in section (1) or (2) of this rule are fulfilled and if the physician associate is currently certified by the National Commission for the Certification of Physician Associates (NCCPA).
- (4) All prescriptions given whether written, electronic, or oral must include the name, office address, and telephone number of the physician associate. The prescription must also bear the name of the patient and the date on which the prescription was written, except as provided in OAR 847-015-0050 for expedited partner therapy for sexually transmitted disease. The physician associate must sign the prescription and the signature must be followed by the letters "PA" Also the physician associate's Federal Drug Enforcement Administration number must be shown on prescriptions for controlled substances.
- (5) A physician associate may register with the Board to dispense drugs commensurate with the collaboration agreement and the physician associate's prescriptive authority.
  - (a) If the facility where the physician associate will dispense medications serves population groups federally designated as underserved, geographic areas federally designated as health professional shortage areas or medically underserved areas, or areas designated as medically disadvantaged and in need of primary health care providers as designated by the State, the application must include:
    - (A) Location of the practice site;
    - (B) Accessibility to the nearest pharmacy; and
    - (C) Medical necessity for dispensing.

- (b) If the facility where the physician associate will be dispensing medications is not in one of the designated areas or populations described in subsection (5)(a) of this rule, the physician associate may not dispense Schedule I through II controlled substances.
- (6) A physician associate with dispensing authority must:
  - (a) Dispense medications personally, except that nonjudgmental dispensing functions may be delegated to staff associates when the accuracy and completeness of the prescription is verified by the physician associate;
  - (b) Maintain records of the receipt and distribution of prescription drugs and the records must be readily accessible for inspection by the Board upon request;
  - (c) Dispense only medications that are pre-packaged by a licensed pharmacist, manufacturing drug outlet or wholesale drug outlet authorized to do so under ORS 689;
  - (d) Label dispensed prescription drugs in compliance with the requirements of ORS 677.089(3);
  - (e) Dispense prescription drugs in containers complying with the federal Poison Prevention Packaging Act unless the patient requests a noncomplying container; and
  - (f) Register with the Drug Enforcement Administration and maintain a controlled substances log as required in OAR 847-015-0015.
- (7) Distribution of samples, without charge, is not dispensing under this rule. Administering drugs in the facility is not dispensing under this rule. Distribution of samples and administration of drugs must be documented in the patient record. Documentation must include the name of the drug, the dose, the quantity distributed or administered, and the directions for use if applicable.
- (8) Failure to comply with any section of this rule is a violation of the ORS Chapter 677 and is grounds for a \$195 fine. The licensee may be subject to further disciplinary action by the Board.