



Dispensing Prescription Drugs

Physicians and physician assistants (PA) may register with the Oregon Medical Board (OMB) for dispensing authority. Physicians and PAs may not dispense medications until registered with the Board.

Registration

To register for dispensing authority, licensees may submit an [application form](#) to licensing@omb.oregon.gov. At each subsequent license renewal, an OMB licensee will need to indicate they wish to maintain dispensing registration.

OMB licensees may check for dispensing authority on the [License Verification](#) website.

Jones, Jane, MD

MD License: MD133344

Originally Issued: 07/22/1998

Current Status: Active

Status Effective: 1/1/2022

Expires: 12/31/2023

Basis: USMLE

Expedited Endorsement: No

Dispensing: Yes

PA Dispensing

A PA with dispensing authority may dispense drugs commensurate with a practice agreement or practice description and the PA's prescriptive authority (or a collaboration agreement starting July 15, 2022).

Dispensing COVID-19 Therapeutics

Non-judgmental dispensing functions would reasonably include completing and affixing a label with required information as described below, and transferring a medication to the patient or a patient representative. Per the manufacturers, both Paxlovid and molnupiravir containers are Poison Prevention Packaging Act-compliant.

Dispensing References

Physicians — [ORS 677.089](#), [OAR 847-015-0025](#), see page 2

PAs — [ORS 677.511](#), [OAR 847-050-0041](#), see pages 3 & 4



Physician Dispensing Authority

Below are portions of the Oregon Revised Statutes and Oregon Administrative Rules related to physician dispensing authority.

ORS 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 assistants 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.

OAR 847-015-0025

Dispensing, Distribution and Administration

- (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) A physician must register with the Board as a dispensing physician before supervising a physician assistant or any other health care provider with dispensing privileges.
- (3) At the time of license registration renewal, all dispensing physicians must indicate their status as a dispensing physician on the registration renewal form.
- (4) Dispensing of drugs must be documented in the patient record. Documentation must include the name of the drug, the dose, the quantity dispensed, the directions for use and the name of the physician or physician assistant dispensing the drugs. The physician or physician assistant must verbally counsel the patient concerning any new medications and must provide written information on the directions for use.
- (5) 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 physician assistant must verbally counsel the patient concerning any new medications and must provide written information on the directions for use.
- (6) 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.
- (7) Any physician or podiatric physician who dispenses drugs or who supervises a physician assistant with drug dispensing authority without first registering with the Board will be fined \$195 and may be subject to further disciplinary action by the Board.



Physician Assistant Dispensing Authority

Below are portions of the Oregon Revised Statutes and Oregon Administrative Rules related to physician assistant dispensing authority.

ORS 677.511 Physician assistant authority to dispense prescription drugs; requirements.

- (1)(a) A physician assistant 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 (4), a physician assistant 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.
- (2) A registration under this section must include any information required by the board by rule.
- (3) Prescription drugs dispensed by a physician assistant must be personally dispensed by the physician assistant, except that nonjudgmental dispensing functions may be delegated to staff assistants when the accuracy and completeness of the prescription is verified by the physician assistant.
- (4) The physician assistant 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.
- (5) The physician assistant shall ensure that a prescription drug dispensed by the physician assistant is labeled in compliance with the requirements of ORS 677.089 (3).
- (6) The board has disciplinary authority regarding a physician assistant who has prescription drug dispensing authority.

OAR 847-050-0041

Prescribing and Dispensing Privileges

- (2) A physician assistant may issue written, electronic, or oral prescriptions for Schedule III-V medications, for which the physician assistant is qualified to prescribe commensurate with the practice agreement or Board-approved practice description, if the physician assistant has met the requirements of OAR 847-050-0020(1).
- (3) A physician assistant may issue written or electronic prescriptions or emergency oral prescriptions followed by a written authorization for Schedule II medications if the requirements in (1) or (2) are fulfilled and if the following conditions are met:
 - (a) A statement regarding Schedule II controlled substances prescription privileges is included in the practice agreement or Board-approved practice description. The Schedule II controlled substances prescription privileges of a physician assistant are limited by the practice agreement or Board-approved practice description and may be restricted further by the supervising physician at any time.
 - (b) The physician assistant is currently certified by the National Commission for the Certification of Physician Assistants (NCCPA) and must complete all required continuing medical education coursework.
 - (4) A physician assistant may prescribe and dispense buprenorphine for medication-assisted treatment for opioid dependency if the requirements in (1) or (2) are fulfilled and the following conditions are met:
 - (a) The physician assistant has obtained a buprenorphine waiver from the Drug Enforcement Administration;
 - (b) The physician assistant has been granted dispensing authority if the physician assistant will dispense buprenorphine;
 - (c) The scope of practice of the physician assistant includes use of buprenorphine for medication-assisted treatment for opioid dependency;
 - (d) The physician assistant's practice agreement includes use of buprenorphine for medication-assisted



OAR 847-050-0041

Prescribing and Dispensing Privileges

continued ...

treatment for opioid dependency as a medical service;
and

(e) The physician assistant complies with all federal and state requirements for recordkeeping specific to buprenorphine treatment.

(5) All prescriptions given whether written, electronic, or oral must include the name, office address, and telephone number of the physician assistant. The prescription must also bear the name of the patient and the date on which the prescription was written. The physician assistant must sign the prescription and the signature must be followed by the letters "P.A." Also the physician assistant's Federal Drug Enforcement Administration number must be shown on prescriptions for controlled substances.

(6) A physician assistant may register with the Board for a physician assistant to dispense drugs commensurate with the practice agreement or Board-approved practice description.

(a) The physician assistant must have prescribing privileges and be in good standing with the Board and the NCCPA to qualify for dispensing authority. The physician assistant may dispense Schedule II medications only if the physician assistant's practice agreement or Board-approved practice description allows Schedule II prescription privileges.

(b) If the facility where the physician assistant 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.

(c) If the facility where the physician assistant will be dispensing medications is not in one of the designated areas or populations described in subsection (6)(b) of

this rule, the physician assistant may not dispense Schedule I through II controlled substances.

(7) A physician assistant with dispensing authority must:

(a) Dispense medications personally, except that nonjudgmental dispensing functions may be delegated to staff assistants when the accuracy and completeness of the prescription is verified by the physician assistant;

(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.

(8) 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.

(9) Failure to comply with any subsection 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.