OFFICE OF THE SECRETARY OF STATE
TOBIAS READ
SECRETARY OF STATE

MICHAEL KAPLAN
DEPUTY SECRETARY OF STATE

ARCHIVES DIVISION
STEPHANIE CLARK
DIRECTOR

800 SUMMER STREET NE
SALEM, OR 97310
503-373-0701

PERMANENT ADMINISTRATIVE ORDER

FILED
08/08/2025 10:08 AM
ARCHIVES DIVISION
SECRETARY OF STATE
& LEGISLATIVE COUNSEL

BP 6-2025
CHAPTER 855
BOARD OF PHARMACY

FILING CAPTION: Standard Vaccination Protocols

EFFECTIVE DATE: 08/08/2025

AGENCY APPROVED DATE: 08/07/2025

CONTACT: Rachel Melvin
971-673-0001
pharmacy.rulemaking@bop.oregon.gov

800 NE Oregon St., Suite 150
Portland,OR 97232

Filed By:
Rachel Melvin
Rules Coordinator

RULES:
855-104-0055, 855-115-0330, 855-115-0335, 855-115-0340, 855-115-0345

AMEND: 855-104-0055

NOTICE FILED DATE: 06/26/2025

RULE SUMMARY: Amends rule by removing “compendia” and “for 6 years” from (B) to provide clarity to licensees.

CHANGES TO RULE:

855-104-0055
Record and Document Retention
(1) Each licensee and registrant must create documents and retain records required by ORS 475, ORS 689, and OAR 855. Documents and records:¶
(a) May be in written or electronic format; ¶
(b) Must be stored securely;¶
(c) Must be made available to the board upon request; and¶
(d) Must be retained for 3 years except that:¶
(A) Clinical pharmacy records must be retained for 7 years; and¶
(B) Training records for immunization administration and protocol and formulary ~~compendia~~ prescribing, must be retained ~~for 6 years~~ or uploaded into the licensee's electronic licensing record with the board;¶
(2) Records generated by a registrant:¶
(a) Must be stored on-site by the registrant for at least 12 months and must be provided to the board immediately upon request at the time of inspection; ¶
(b) May be stored in a secured off-site location after 12 months of storage at the registrant and must be provided to the board upon request within 3 business days;¶
(3) Records generated in the practice of pharmacy that do not belong to a registrant must be stored by a Pharmacist in a secure manner and provided to the board upon request within 3 business days; and¶
(4) Records must be retained for longer periods of time than required under this rule if:¶
(a) Federal law provides for a longer retention schedule; or¶
(b) Licensee or registrant has received notice of a Board investigation to which the records would be relevant; ¶
(c) Licensee or registrant has received a Board request to retain the records for a longer period of time.
Statutory/Other Authority: ORS 689.205
Statutes/Other Implemented: ORS 689.155, ORS 689.508

AMEND: 855-115-0330

NOTICE FILED DATE: 06/26/2025

RULE SUMMARY: Amends rule by removing “compendia” and adds “pursuant to a statewide drug therapy protocol” in (1) to provide clarity to licensees and adds (8) pharmacist requirements related to reporting prescription and administration of vaccines to a patient’s primary health care provider and the Oregon Health Authority pursuant to ORS 689.654(4). Proposes differentiating prescribing requirements for protocols and formulary.

CHANGES TO RULE:

855-115-0330
Services: Prescribing - Formulary or Protocol ~~Compendia~~
(1) A Pharmacist located and licensed in Oregon may prescribe and dispense an FDA-approved drug and device included on either the Formulary or ~~Protocol Compendia~~pursuant to a statewide drug therapy protocol (Protocol), set forth in this Division. ¶
(2) A Pharmacist may submit a concept, on a form prescribed by the board to the Public Health and Pharmacy Formulary Advisory Committee for consideration, for the addition of a drug or device to the Formulary ~~Compendia~~ or for the development of a ~~protocol for the Protocol Compendia~~Protocol. A Pharmacist may provide feedback on the Formulary or Protocol ~~Compendia~~s on a board prescribed form and located on the board website.¶
(3) A Pharmacist must only prescribe a drug or device consistent with the parameters of the Formulary ~~and~~or Protocol ~~Compendia~~, and in accordance with federal and state regulations.¶
(4) The Pharmacist is responsible for recognizing limits of knowledge and experience and for resolving situations beyond their expertise by consulting with or referring patients to another health care provider.¶
(5) For each drug or device the Pharmacist prescribes via ~~the Formulary or Protocol Compendia~~Protocol, the Pharmacist must:¶
(a) Ensure training and education requirements have been met prior to engaging in prescribing activities. A copy of all required training and education must be retained according to OAR 855-104-0055; ¶
(b) Collect subjective and objective information about the patient's health history and clinical status. If prescribing pursuant to the Formulary ~~Compendia~~ in OAR 855-115-0340, a diagnosis from the patient's healthcare provider is required. ¶
(c) Assess the information collected in (b). Any physical assessment must be performed in a face-to-face, in-person interaction and not through electronic means.¶
(d) Create an individualized patient-centered care plan that utilizes information obtained in the assessment to evaluate and develop a care plan; ¶
(e) Implement the care plan, to include:¶
(A) Addressing medication and health-related problems and engaging in preventive care strategies;¶
(B) Initiating, modifying, discontinuing, or administering medication therapy as permitted by the Formulary or Protocol ~~Compendia~~;¶
(C) Providing education and self-management training to the patient or caregiver;¶
(D) Contributing to coordination of care, including the referral or transition of the patient to another health care professional; and¶
(E) Scheduling follow-up care as needed to achieve goals of therapy.~~:~~;and¶
(f) Monitor and evaluate the effectiveness of the care plan and make modifications to the plan~~; and¶~~
~~(g.¶~~
(6) For each drug or device the Pharmacist prescribes via Formulary, the Pharmacist must:¶
(a) Ensure training and education requirements have been met prior to engaging in prescribing activities. A copy of all required training and education must be retained according to OAR 855-104-0055; and¶
(b) Ensure prescribing is pursuant to a diagnosis by a health care practitioner who has prescriptive authority and who is qualified to make the diagnosis. ¶
(7) Provide notification to the patient's identified primary care provider or other care providers when applicable within five business days following the prescribing of a Formulary or Protocol Compendia drug or device.¶
(~~6~~8) ~~If consultation is provided through an electronic means, the Oregon licensed~~All records and documents must be retained according to OAR 855-104-0055 and must be made available to the patient and provider upon request.¶
(9) Pharmacists must ~~use an audiovisual communication system to conduct the consultation.¶~~
~~(7) All~~report the prescription and administration of vaccines to a patient's primary health care provider if identified and to the Oregon Health Authority pursuant to ORS 689.645(4). The re~~e~~por~~ds and documents must be~~

~~retained according to OAR 855-104-0055 and must be made available to the patient and provider upon request~~ting of the prescription and administration of vaccines to a patient's primary health care provider and to the Oregon Health Authority can be accomplished by reporting to the ALERT Immunization Information System (ALERT-IIS) per ORS 433.090, ORS 433.092, ORS 433.094, ORS 433.095, ORS 433.096, ORS 433.098, ORS 433.100, ORS 433.102, ORS 433.103, and ORS 433.104.
Statutory/Other Authority: ORS 689.205
Statutes/Other Implemented: ORS 689.645, ORS 689.649

AMEND: 855-115-0335

NOTICE FILED DATE: 06/26/2025

RULE SUMMARY: Amends rules by adding “Formulary or Protocol” to (1)(b) and removes “compendia” to provide clarity to licensees.

CHANGES TO RULE:

855-115-0335
Services: Prescribing - Prohibited Practices
(1) A Pharmacist must not prescribe a drug or device via ~~the~~ Formulary or Protocol ~~Compendia~~:¶
(a) To self; or¶
(b) When the ~~compendia~~Formulary or Protocol requires referral to a non-Pharmacist provider.¶
(2) A Pharmacist must not require, but may allow, a patient to schedule an appointment with the Pharmacist for the prescribing or administering of an injectable hormonal contraceptive or the prescribing or dispensing of a self-administered hormonal contraceptive.
Statutory/Other Authority: ORS 689.205
Statutes/Other Implemented: ORS 689.645, ORS 689.649

AMEND: 855-115-0340

NOTICE FILED DATE: 06/26/2025

RULE SUMMARY: Amends rule by removing “compendium” and adds “Formulary” to provide clarity to licensees.

CHANGES TO RULE:

855-115-0340
Services: Prescribing - Formulary ~~Compendium~~
A Pharmacist may prescribe, according to OAR 855-115-0330 and OAR 855-115-0335, an FDA-approved drug and device listed in the ~~following compendium~~the Formulary, pursuant to a diagnosis by a health care practitioner who has prescriptive authority and who is qualified to make the diagnosis. ~~The diagnosis must be documented.~~
~~D~~Formulary devices and supplies:¶
(1) Diabetic blood sugar testing supplies;¶
(2) Injection supplies;¶
(3) Nebulizers and associated supplies;¶
(4) Inhalation spacers;¶
(5) Peak flow meters;¶
(6) International Normalized Ratio (INR) testing supplies;¶
(7) Enteral nutrition supplies; ¶
(8) Ostomy products and supplies; and¶
(9) Non-invasive blood pressure monitors; and ¶
(10) Continuous glucose monitors and associated supplies.
Statutory/Other Authority: ORS 689.205
Statutes/Other Implemented: ORS 689.645, ORS 689.649

AMEND: 855-115-0345

NOTICE FILED DATE: 06/26/2025

RULE SUMMARY: Amends rule by removing “compendium”, adds that protocols in their entirety are adopted by the board by specific effective dates referenced can be found on the board website to provide clarity and a path to resources licensees can utilize. Adds “protocol” to (1), (2), (3), (4) and proposes adding new vaccination protocols in (4)(a),(b),(c),(d) and (e) per Board and Formulary Committee directives to simplify and streamline vaccine protocols. Proposes repealing (A) through (V) individual existing vaccine protocols which would be relocated and incorporated into the new vaccination protocols in (4) (a) through (e).

CHANGES TO RULE:

855-115-0345
Services: Prescribing Pursuant to - Protocol ~~Compendium~~
A Pharmacist may prescribe, according to OAR 855-115-0330 and OAR 855-115-0335, FDA-approved drugs and devices ~~listed in the following compendium, pursuant to a statewide drug therapy management protocol.~~ pursuant to a Protocol. Protocols in their entirety are adopted by the board by this rule pursuant to the respective effective date referenced and can be found on the board website at https://www.oregon.gov/pharmacy/Pages/PFAC.aspx.¶
(1) Continuation of therapy Protocol including emergency refills of insulin and early refills of opioid use disorder medications (v. 08/2024)¶
(2) Conditions Protocols:¶
(a) Cough and cold symptom management¶
(A) Benzonatate (v. 06/2021);¶
(B) Short-acting beta agonists (v. 06/2021);¶
(C) Intranasal corticosteroids (v. 06/2021);¶
(b) COVID-19 Antigen Self-Test (v. 12/2021);¶
(c) SARS-CoV-2 Antiviral (v. 08/2024)¶
(3) Preventative ~~c~~Care Protocols:¶
(a) Emergency Contraception (v. 06/2021);¶
(b) Male and female condoms (v. 06/2021);¶
(c) Tobacco Cessation, NRT (Nicotine Replacement Therapy) and Non-NRT (v. 06/2024);¶
(d) Travel Medications (v. 06/2024);¶
(e) HIV Post-exposure Prophylaxis (PEP) (v. 06/2023);¶
(f) HIV Pre-exposure Prophylaxis (PrEP) (v.06/2023); ¶
(g) Contraception (v. 06/2025);¶
(h) Sexually Transmitted Infections Post-exposure Prophylaxis (STI PEP) (v. 06/2024);¶
(i) Short-acting Opioid Antagonists (v. 06/2024); and¶
(j4) Vaccine Protocols:¶
(~~A~~a) ~~Standard~~Vaccination Protocol for A~~ll Vaccines: Cover Page & Assessment and Treatment Care Pathway~~dults 18 Years of Age and Older (v. 0~~6~~8/2024~~5~~);¶
(~~B~~b) ~~Standard~~Vaccination Protocol for A~~ll Vaccines: Managing Adverse Reactions (v. 06/2024); ¶~~
~~(C) Cholera (v. 02/2024); ¶~~
~~(D) Coronavirus 2019 (v. 06/2025); ¶~~
~~(E) Haemophilus Influenza type b~~ges 7 through 17 Years (v. 0~~6~~8/2024~~5~~);¶
(~~F~~c) ~~Hepatitis A containing vaccines (v. 02/2024); ¶~~
~~(G) Hepatitis B containing vaccines (v. 06/2025); ¶~~
~~(H) Human Papillomavirus (v. 02/2024); ¶~~
~~(I) Influenza - Inactivated Influenza Vaccines and Recombinant Influenza Vaccines 2024-2025~~Vaccination Protocol for Ages 3 through 6 Years (v. ~~12~~08/2024~~5~~); ¶
~~(J) Influenza - Live Attenuated Influenza Vaccine 2024-2025 (v. 12/2024); ¶~~
~~(K) Japanese Encephalitis (v. 06/2024); ¶~~
~~(L) Meningococcal containing vaccines (v. 06/2025); ¶~~
~~(M) Measles Mumps & Rubella containing vaccines (v. 02/2024); ¶~~
~~(N) Pneumococcal~~d) Vaccination Protocol for Ages 6 months through 2 Years (v. 0~~6~~8/2025); and¶
(~~O~~e) ~~Polio (v. 06/2024);¶~~
~~(P) Rabies (v. 02/2024); ¶~~
~~(Q) Respiratory Syncytial Virus (v. 06/2025);¶~~

~~(R) Tetanus Diphtheria containing vaccines (v. 06/2024);¶~~
~~(S) Typhoid (v. 02/2024); ¶~~
~~(T) Varicella containing vaccines (v. 02/2024);¶~~
~~(U) Yellow fever (v. 06/2024); and¶~~
~~(V) Zoster~~Vaccination Protocol for Managing Adverse Reactions (v. 0~~2~~8/20245).¶
[Publications: Publications referenced are available from the agency.]
Statutory/Other Authority: ORS 689.205, ORS 689.005
Statutes/Other Implemented: ORS 689.645, ORS 689.649, ORS 689.689, ORS 689.005