

Health (Drugs and Poisons) Regulation 1996

Drug Therapy Protocol – Pharmacist

Opioid Treatment Program



Environmental Health Branch
15 Butterfield Street
PO Box 2368
Fortitude Valley BC 4006
Telephone (07) 3328 9310
Facsimile (07) 3328 9354

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Drug Therapy Protocol - Pharmacist

This drug therapy protocol, made under section 64(1)(f) of the *Health (Drugs and Poisons) Regulation 1996* states the circumstances and conditions under which a pharmacist is authorised to administer or supply a controlled drug listed in Appendix 1 to this document .

Conditions and circumstances of this drug therapy protocol

1. A pharmacist may only administer or supply those controlled drugs listed in Appendix 1 for which a Health Management Protocol has been developed and approved by the Chief Health Officer of Queensland Health. The minimum requirements for a Health Management Protocol are contained in Appendix 2.
2. The actions of the pharmacist must at all times be in accordance with this Drug Therapy Protocol and the Health Management Protocol.
3. The pharmacist must have access to current versions of the following literature:
 - 3.1 A copy of this Drug Therapy Protocol; and
 - 3.2 The Queensland Health Opioid Treatment Program Health Management Protocol relevant to this Drug Therapy Protocol; and
 - 3.3 A current MIMS Annual and Australian Medicines Handbook; and
 - 3.4 A copy of the *Health (Drugs and Poisons) Regulation 1996*.
4. The pharmacist must be aware that practising within the Drug Therapy Protocol does not relieve that person of their legal responsibility or accountability for that person's actions and may not provide immunity in case of negligence.
5. Prior to the administration or supply of a controlled drug, the pharmacist must be familiar with the contra-indication(s) and known side effects of the controlled drug, and advise the patient accordingly.
6. When Consumer Medicine Information is available for a particular controlled drug, the pharmacist should provide this information to each person when administering or supplying medication.
7. A pharmacist, to the extent necessary to practise pharmacy is authorised to administer or supply a controlled drug listed in Appendix 1 to a drug dependent or class of drug dependent person identified by the Chief Executive or delegate as participating in an Opioid Treatment Program, on the oral or written instruction of a doctor who holds a written approval under section 122(5) or an oral approval under section 122(6) of the *Health (Drugs and Poisons) Regulation 1996* and under the conditions contained in this Drug Therapy Protocol.
8. A pharmacist practising under this Drug Therapy Protocol must:
 - 8.1 Confirm the identity of the person referred to in the written or oral instruction.
 - 8.2 Label the primary medicine container in accordance with section 85 of the *Health (Drugs and Poisons) Regulation 1996*, where a controlled drug is supplied by a pharmacist.

Certification

Certified at Brisbane on this 2nd day of April 2012.

Dr Jeannette Young
Chief Health Officer
Queensland Health

Appendix 1

DRUG THERAPY PROTOCOL: Pharmacist - Opioid Treatment Program

SCHEDULED SUBSTANCES	APPROVED ROUTES OF ADMINISTRATION	RESTRICTIONS/CONDITIONS
Methadone Syrup	Oral	For use in Opioid Treatment Program
Biodone Forte	Oral	For use in Opioid Treatment Program
Buprenorphine (Subutex)	Sublingual	For use in Opioid Treatment Program
Buprenorphine-Naloxone (Suboxone tablets)	Sublingual	For use in Opioid Treatment Program
Buprenorphine-Naloxone (Suboxone sublingual film)	Sublingual	For use in Opioid Treatment Program

Appendix 2

Health Management Protocol – Minimum Requirements

1. The employer must have a current Health Management Protocol that supports and details the clinical use, administration or supply of controlled drugs listed in Appendix 1 of this Drug Therapy Protocol.
2. The employer must use the Queensland Health Opioid Treatment Program Health Management Protocol that supports and details the clinical use, administration or supply of the controlled drugs listed in Appendix 1 of this Drug Therapy Protocol.
3. The Queensland Health Opioid Treatment Program Health Management Protocol must be developed by an inter-disciplinary team appointed by Queensland Health. As a minimum, the team must consist of a medical practitioner, pharmacist and a consumer representative and may include other identified professional personnel as considered appropriate by the employing organisation.
4. Following a period of two years or sooner if considered necessary, the Health Management Protocol must be reviewed by the inter-disciplinary team.

Content of a Health Management Protocol

The Health Management Protocol clearly identifies the following:

1. The procedures for clinical assessment, management and follow-up of patients, including the recommended drug therapy for the relevant clinical problem.
2. A clinical indication or time when medical referral/consultation must occur for that condition.
3. The name, form and strength of the controlled drug and the condition/situation for which it is intended.
4. The recommended dose protocol of the controlled drug.
5. The route of administration of the controlled drug.
6. The frequency of administration of the controlled drug.
7. Details of potential side effects and major interactions.
8. The requirement for documented consent of the person to be administered the controlled drug.
9. The type of equipment and management procedures required for management of an emergency associated with the use of the controlled drug.

Endorsement of and Renewal of the Health Management Protocol by the Chief Health Officer of Queensland Health

1. A new or reviewed Health Management Protocol must be endorsed and dated by the Chief Health Officer.
2. The Health Management Protocol shall be effective for a maximum of two (2) years from the date of endorsement by the Chief Health Officer.