

## Pharmacy Act, 1991

### ONTARIO REGULATION 256/24

#### PART III REGISTRATION — PHARMACISTS

##### Additional requirements

**10.** (1) In addition to the requirements in section 8, the following requirements apply to the issuance of a certificate of registration as a pharmacist:

1. The applicant must, have obtained a minimum of a baccalaureate degree in pharmacy,
  - i. from a Canadian program accredited by the Canadian Council for Accreditation of Pharmacy Programs, or from another program that is accredited by another accrediting body approved by the Council, or
  - ii. from a program that does not meet the requirements of subparagraph i, if the applicant passes an evaluation approved by the Council, and
    - A. successfully completes a bridging program or another program approved by the Council, or
    - B. successfully completes the qualifying examination of the Pharmacy Examining Board of Canada for pharmacists, or another examination approved by Council, on the applicant's first attempt.
2. The applicant must have obtained the degree referred to in paragraph 1 no more than two years prior to submitting an application for the issuance of a certificate of registration as a pharmacist, but this time limit does not apply if the applicant,
  - i. undergoes a review of their practice conducted in a manner approved by the Registration Committee, meets any requirements regarding continuing education or remediation set by a panel of the Registration Committee and pays the required fees, or
  - ii. successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacists, or another examination approved by Council, within two years prior to submitting an application for the issuance of a certificate of registration as a pharmacist.
3. No more than two years prior to submitting an application for the issuance of a certificate of registration as a pharmacist, the applicant must have successfully completed an assessment in pharmaceutical jurisprudence, ethics and professionalism approved by the Council.
4. No more than two years prior to submitting an application for the issuance of a certificate of registration as a pharmacist, the applicant must have successfully completed a practice assessment of competence approved by the Council.
5. The applicant must, have successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacists, or another examination approved by Council,
  - i. within the first three attempts,
  - ii. on the fourth attempt, if the applicant first successfully completes any further education or training required by the examining body responsible for the administration of the examination or by a panel of the Registration Committee, or
  - iii. on a fifth or subsequent attempt, if the applicant first obtains a new degree that meets the requirements of subparagraph 1 i.

(2) In addition to the requirements in section 8, the following are additional requirements for the issuance of a certificate of registration as a pharmacist to an applicant who previously held a certificate of registration as a pharmacist in Ontario:

1. The applicant must successfully complete the assessment in pharmaceutical jurisprudence, ethics and professionalism referred to in paragraph 3 of subsection (1).
2. The applicant must undergo a review of their practice conducted in a manner approved by the Registration Committee, meet any requirements regarding continuing education or remediation set by a panel of the Registration Committee and pay the required fees.

(3) An applicant to whom subsection (2) applies is not required to satisfy the requirements of subsection (1), except as required by subsection (2).

- (4) The requirements of subsections (1) and (2) are non-exemptible, except as provided under subsection (3).

**Terms, conditions and limitations, Part B pharmacists**

**11.** (1) Every certificate of registration of a pharmacist listed in Part B is subject to the following terms, conditions and limitations:

1. The member shall not provide any care to a patient, whether direct or indirect.
2. The member shall not perform any controlled act.
3. The member shall not supervise any part of the pharmacy where drugs are kept.
4. The member shall not be the designated manager of a pharmacy within the meaning of the *Drug and Pharmacies Regulation Act*.
5. The member shall not supervise the practice of the profession by another person.
6. The member shall, while working in a pharmacy or any other environment where patient care is being provided, clearly identify themselves as a non-patient care pharmacist.

(2) Despite subsection (1), a pharmacist listed in Part B may perform a controlled act and provide care to a patient with the prior written approval of the Registrar where,

- (a) the sole purpose of doing so is to assist the member in preparing to meet the requirements specified in subsection 6 (3); and
- (b) the member is under the direct supervision of a Part A pharmacist or a member holding a certificate of registration as a pharmacist (emergency assignment).

(3) Subject to subsection (4), an approval provided by the Registrar under subsection (2) must not be for a period exceeding six months.

(4) Where the Registrar is satisfied that it is appropriate to do so, the Registrar may extend the term of the approval provided under subsection (2), but in no case may the combined term exceed one year, unless a panel of the Registration Committee approves of a further extension.

**PART IV  
REGISTRATION — INTERNS**

**Additional requirements**

**12.** (1) In addition to the requirements in section 8, the following requirements apply to the issuance of a certificate of registration as an intern:

1. The applicant must satisfy the educational requirements of paragraph 1 of subsection 10 (1).
2. The applicant must have obtained the degree requirements referred to in paragraph 1 of subsection 10 (1) no more than two years prior to submitting an application for the issuance of a certificate of registration as an intern, but this time limit does not apply if the applicant successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacists, or another examination approved by Council, within two years prior to submitting an application for the issuance of a certificate of registration as an intern.

(2) The requirements in subsection (1) are non-exemptible.

**Terms, conditions and limitations, interns**

**13.** (1) Every certificate of registration as an intern is subject to the following terms, conditions and limitations:

1. When practising in a pharmacy accredited as a community pharmacy, other than a remote dispensing location, the member shall only engage in the practice of the profession while under the direct supervision of a Part A pharmacist or a member holding a certificate of registration as a pharmacist (emergency assignment).
2. When practising in any location other than the one described in paragraph 1, the member shall only engage in the practice of the profession while under the supervision of a Part A pharmacist or a member holding a certificate of registration as a pharmacist (emergency assignment).

3. The member shall not supervise any part of the pharmacy where drugs are kept.
4. The member shall not delegate a controlled act.

(2) A certificate of registration as an intern automatically expires on the earlier of the following:

1. The date on which the member is issued a certificate of registration as a pharmacist.
2. One year after the date on which the member's certificate of registration as an intern was issued, unless a panel of the Registration Committee specifies otherwise.

**PART V**  
**REGISTRATION — PHARMACY TECHNICIANS**

**Additional requirements**

**14.** (1) In addition to the requirements in section 8, the following requirements apply to the issuance of a certificate of registration as a pharmacy technician:

1. The applicant must have obtained a pharmacy technician certificate or diploma, or a university degree in pharmacy,
  - i. from a Canadian program accredited by the Canadian Council for Accreditation of Pharmacy Programs, or a program that is accredited by another accrediting body approved by Council, or
  - ii. from a program that does not meet the requirements of subparagraph i, if the applicant passes an evaluation approved by the Council and,
    - A. successfully completes a bridging program or another program approved by the Council, or
    - B. successfully completes the qualifying examination of the Pharmacy Examining Board of Canada for pharmacy technicians or another examination approved by Council on the applicant's first attempt.
2. The applicant must have obtained the certificate, degree or diploma referred to in paragraph 1 no more than two years prior to submitting an application for the issuance of a certificate of registration as a pharmacy technician, but this time limit does not apply if the applicant,
  - i. undergoes a review of their practice conducted in a manner approved by the Registration Committee, meets any requirements regarding continuing education or remediation set by a panel of the Registration Committee, and pays the required fees, or
  - ii. successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacy technicians, or another examination approved by Council, within two years prior to submitting an application for the issuance of a certificate of registration as a pharmacy technician.
3. No more than two years prior to submitting an application for the issuance of a certificate of registration as a pharmacy technician, the applicant must have successfully completed an assessment in pharmaceutical jurisprudence, ethics and professionalism approved by the Council.
4. No more than two years prior to submitting an application for the issuance of a certificate of registration as a pharmacy technician, the applicant must have successfully completed a practice assessment of competence approved by the Council.
5. The applicant must have successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacy technicians, or another examination approved by the Council,
  - i. within the first three attempts,
  - ii. on the fourth attempt, if the applicant successfully completes any further education or training required by the examining body responsible for the administration of the examination or by a panel of the Registration Committee, or
  - iii. on any subsequent attempt, if the applicant first obtains a new certificate, diploma or degree that meets the requirements of subparagraph 1 i.

(2) In addition to the requirements in section 8, the following additional requirements apply to an applicant who previously held a certificate of registration as a pharmacy technician in Ontario:

1. The applicant must successfully complete the assessment in pharmaceutical jurisprudence, ethics and professionalism referred to in paragraph 3 of subsection (1).
2. The applicant must undergo a review of their practice conducted in a manner approved by the Registration Committee, meet any requirements regarding continuing education or remediation set by a panel of the Registration Committee, and pay the required fees.

(3) An applicant to whom subsection (2) applies is not required to satisfy the requirements of subsection (1), except as required by subsection (2).

(4) The requirements of subsections (1) and (2) are non-exemptible, except as provided under subsection (3).

**Terms, conditions and limitations, pharmacy technicians**

**15.** Every certificate of registration as a pharmacy technician is subject to the following terms, conditions and limitations:

1. When practising in a pharmacy accredited as a community pharmacy, other than a remote dispensing location, the member shall only engage in the practice of the profession while under the direct supervision of a Part A pharmacist or a member holding a certificate of registration as a pharmacist (emergency assignment).

2. When practising in any location other than the one described in paragraph 1, the member shall only engage in the practice of the profession while under the supervision of a Part A pharmacist or a member holding a certificate of registration as a pharmacist (emergency assignment).
3. In a pharmacy accredited as a community pharmacy, the member shall not supervise any part of the pharmacy where drugs are kept.
4. The member shall not delegate a controlled act.
5. The member shall not provide information or education relating to drug use, either to or for a patient, where the provision of the information or education requires therapeutic knowledge, clinical analysis or clinical assessment.

**Terms, conditions and limitations, Part B pharmacy technicians**

**16.** (1) Every certificate of registration as a pharmacy technician listed in Part B is subject to the following additional terms, conditions and limitations:

1. The member shall not provide any care to a patient, whether direct or indirect.
2. The member shall not perform any controlled act.
3. The member shall not supervise the practice of the profession by another person.
4. The member shall, while working in a pharmacy or any other environment where patient care is being provided, clearly identify themselves as a non-patient care pharmacy technician.

(2) Despite paragraphs 1 and 2 of subsection (1), a pharmacy technician listed in Part B may perform a controlled act and provide care to a patient with the prior written approval of the Registrar as long as,

- (a) the sole purpose of doing so is to assist the member in preparing to meet the requirements specified in subsection 6 (3); and
  - (b) the member is under the direct supervision of a Part A pharmacy technician or a Part A pharmacist or a member holding a certificate of registration as a pharmacist (emergency assignment).
- (3) Subject to subsection (4), an approval provided by the Registrar under subsection (2) must not exceed six months.

(4) Where the Registrar is satisfied that it is appropriate to do so, the Registrar may extend the term of the approval provided under subsection (2) but in no case may the combined term exceed one year unless a panel of the Registration Committee approves a further extension.

## **PART XIV CONTROLLED ACTS**

**Interpretation**

**47.** (1) In this Part,

“adapt” means, subject to subsection (2), to change a patient’s prescription by changing any of the following, but does not include therapeutic substitution,

**Note: On September 30, 2026, the definition of “adapt” in subsection 47 (1) of the Regulation is amended by striking out “subject to subsection (2)” in the portion before clause (a). (See: O. Reg. 256/24, s. 67 (1))**

- (a) the dose of the prescribed drug,
- (b) the dosage form of the prescribed drug,
- (c) the directions for use of the prescribed drug, or
- (d) the route of administration for taking the prescribed drug; (“adapter”)

“coronavirus exemption” means the exemption issued by the Minister of Health for Canada on March 19, 2020 under subsection 56 (1) of the *Controlled Drugs and Substances Act* (Canada) entitled “Subsection 56 (1) Class Exemption for Patients, Practitioners and Pharmacists Prescribing and Providing Controlled Substances in Canada During the Coronavirus Pandemic”, available on a website of the Government of Ontario, including any renewal or replacement of the exemption; (“exemption applicable au coronavirus”)

**Note: On September 30, 2026, the definition of “coronavirus exemption” in subsection 47 (1) of the Regulation is revoked. (See: O. Reg. 256/24, s. 67 (2))**

“point-of-care test” means a test that employs a medical device authorized by the Minister of Health for Canada for point-of-care use; (“analyse hors laboratoire”)

“prescriber” means a person who is authorized under the laws of a province or territory of Canada to give a prescription within the scope of their practice of a health profession; (“prescripteur”)

“prescription” means a direction from a prescriber directing the dispensing of a drug or mixture of drugs for a specific patient; (“ordonnance”)

“renew” means to provide a patient with a prescription that repeats a prescription previously provided to that patient; (“renouveler”)

“therapeutic substitution” means the substitution of a drug that contains chemically different active ingredients that are considered to be therapeutically equivalent. (“substitution thérapeutique”)

(2) While the coronavirus exemption is in effect, in this Part,

“adapt” in relation to the adaptation of a prescription for a controlled substance under the *Controlled Drugs and Substances Act* (Canada), means to change the prescription by changing any of the following, but does not include therapeutic substitution,

- (a) the dose and regime of the prescribed drug,
- (b) the dosage form of the prescribed drug,
- (c) the de-prescribing of the prescribed drug, or
- (d) the part-filling of the prescription.

**Note: On September 30, 2026, subsection 47 (2) of the Regulation is revoked. (See: O. Reg. 256/24, s. 67 (3))**

(3) In this Part,

- (a) a reference to a Part A pharmacist includes a member who holds a certificate of registration as a pharmacist (emergency assignment); and
- (b) a reference to a Part A pharmacy technician includes a member who holds a certificate of registration as a pharmacy technician (emergency assignment).

#### Inconsistencies

48. (1) Where the provisions of this Part are inconsistent with a law of Canada respecting prescriptions, including those related to a targeted substance, the law of Canada shall prevail and the provisions of this Part to the extent they are inconsistent with that law shall not apply.

(2) Where the provisions of this Part are inconsistent with the provisions of the *Narcotics Safety and Awareness Act, 2010*, the provisions of that Act shall prevail and the provisions of this Part, to the extent they are inconsistent with that Act, shall not apply.

#### Controlled acts

49. A member shall not perform a controlled act under paragraph 2, 3, 4 or 5 of subsection 4 (1) of the Act except in accordance with this Part.

#### Substances

50. (1) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) of this section who meets all the requirements in subsection (4) is authorized to perform the following acts:

- 1. Administering a substance specified in Schedule 1 by injection.
- 2. Administering a substance specified in Schedule 2 by inhalation.
- 3. Administering a vaccine specified in Schedule 3 by injection.

(2) A Part A pharmacist or an intern is authorized to perform an act provided for in subsection (1), subject to the terms, conditions and limitations imposed on their certificate of registration.

(3) A Part A pharmacy technician or an intern technician who meets all the requirements in subsection (6) is authorized to perform an act provided for in paragraph 3 of subsection (1), ~~but only with respect to the influenza vaccine, respiratory syncytial virus vaccine and Coronavirus (COVID-19) vaccines and~~ subject to the terms, conditions and limitations imposed on their certificate of registration.

(4) A member referred to in subsection (2) may only perform an act provided for in subsection (1) if the member complies with the following:

- 1. Before performing the act, the member must explain the purpose of the act to the patient or the patient’s authorized agent and receive an informed consent from the patient or the patient’s authorized agent.
- 2. The member shall ensure that the member only performs the act in an environment that is clean, safe, private and comfortable for the patient.
- 3. The member shall ensure that appropriate infection control procedures are in place.

4. The member must possess sufficient knowledge, skill and judgment respecting the substance to be administered, and sufficient understanding of the condition of the patient, to be able to administer the substance safely.
  5. The member must consider whether administering a substance by injection or inhalation to the patient is appropriate, given the known risks and benefits to the patient and the safeguards and resources available to safely manage the outcome after administration and any other relevant circumstances.
  6. The member must maintain a patient record that includes,
    - i. the name and address of the patient,
    - ii. the name and address of the member,
    - iii. the date the act was performed,
    - iv. the name, strength (where applicable) and quantity of the substance that the member administered to the patient,
    - v. the circumstances relating to the administration of the substance to the patient and any adverse reaction experienced by the patient, and
    - vi. confirmation that an informed consent was given by the patient or their authorized agent.
  7. Where administering a substance specified in Schedule 1 by injection to a patient through an established central or peripheral venous access device, the member must only do so in collaboration with a member of the College of Nurses of Ontario who is a registered nurse in the extended class or a member of the College of Physicians and Surgeons of Ontario.
  8. Where the act is performed for a purpose other than that of patient education or demonstration the member must, within a reasonable time after performing the act, notify the following persons that the member performed the act, and provide details respecting the act:
    - i. The prescriber, if any, of the substance that was administered.
    - ii. The patient's primary care provider, where the member knows that the patient has such a care provider other than the prescriber.
  9. Where administering an influenza vaccine by injection, the member must administer the vaccine in accordance with Ontario's Universal Influenza Immunization Program as described on the Ministry's website.
  10. The member may only administer a vaccine to patients who are two years of age or older in the case of the influenza vaccine, six months of age and older in the case of the COVID-19 vaccines and five years of age or older in the case of every other vaccine.
- (5) Where a limitation or a route of administration is indicated with respect to a substance listed in Schedule 1, a member shall only administer the substance in compliance with the limitation and in accordance with the route of administration specified.
- (6) A member referred to in subsection (3) may only perform the act of administering the vaccine by injection provided for in paragraph 3 of subsection (1) if the patient is two years of age or older in the case of the influenza vaccine, ~~five years of age or older in the case of respiratory syncytial virus vaccine or~~ six months of age or older in the case of Coronavirus (COVID-19) vaccines, and five years of age or older in the case of every other vaccine, and if the member,
- (a) possesses sufficient knowledge, skill and judgment to be able to administer the vaccine safely;
  - (b) meets all the requirements in paragraphs 2, 3 and 6 of subsection (4);
  - (c) meets the requirement in paragraph 9 of subsection (4), when administering an influenza vaccine by injection; and
  - (d) has confirmed that a member referred to in subsection (2), or another regulated health professional authorized to administer the vaccine by injection, has,
    - (i) received an informed consent from the patient or the patient's authorized agent,
    - (ii) a sufficient understanding of the vaccine and condition of the patient for the vaccine to be administered safely, and
    - (iii) considered whether administering the vaccine by injection to the patient is appropriate, given the known risks and benefits to the patient and the safeguards and resources available to safely manage the outcome and any other relevant circumstances.

#### Prescribing

**51.** (1) For the purposes of paragraph 3 of subsection 4 (1) of the Act, a Part A pharmacist is authorized to prescribe the following drugs, subject to subsections (2) and (4) of this section and to the terms, conditions and limitations imposed on their certificate of registration:

1. For the sole purpose of smoking cessation, the following specified drugs:
    - i. Bupropion Hydrochloride.
    - ii. Varenicline Tartrate.
  2. For the sole purpose of treating a minor ailment listed in Column 1 of the Table to Schedule 4, a drug opposite the minor ailment in Column 3 of that Table.
  3. For the sole purpose of treating COVID-19, Nirmatrelvir/Ritonavir.
  4. For the sole purpose of treating influenza, Oseltamivir.
- (2) In the case of drug referred to in paragraph 3 of subsection (1),
- (a) the Part A pharmacist shall make a determination as to the patient's risk for any drug interactions that cannot be properly managed or that prevent Nirmatrelvir/Ritonavir from being prescribed and shall not prescribe the drug if such an interaction exists; and
  - (b) the Part A pharmacist shall notify the patient's primary care provider, if any, within a reasonable time that the pharmacist prescribed Nirmatrelvir/Ritonavir to the patient and provide details respecting the prescription.
- (3) For the purposes of paragraph 3 of subsection 4 (1) of the Act, an intern is authorized to prescribe the following drugs, subject to subsection (4) of this section and to the terms, conditions and limitations imposed on their certificate of registration:
1. For the sole purpose of smoking cessation, the following specified drugs:
    - i. Bupropion Hydrochloride.
    - ii. Varenicline Tartrate.
  2. For the sole purpose of treating a minor ailment listed in Column 1 of the Table to Schedule 4, a drug opposite the minor ailment in Column 3 of that Table.
- (4) A Part A pharmacist or an intern may only prescribe a drug under this section if they,
- (a) possess sufficient knowledge, skill and judgment respecting the drug and the patient's condition to prescribe the drug for the patient;
  - (b) have considered whether prescribing the drug for the patient is appropriate, given the known risks and benefits of prescribing the drug for the patient and other relevant factors respecting the patient;
  - (c) give the prescription to the patient or the patient's authorized agent;
  - (d) advise the patient or the patient's authorized agent, at the time of giving the prescription, that they may elect to take it to a pharmacy of their choosing for dispensing;
  - (e) notify the patient's primary care provider, if any, within a reasonable time, that the Part A pharmacist or intern prescribed a drug for the patient and provide details respecting the prescription;
  - (f) comply with the additional requirements under sections 53 and 54; and
  - (g) have determined, through a therapeutic assessment, that the drug is the most appropriate treatment for the patient's condition.

#### **Adapting and renewing prescriptions**

**52.** (1) For the purposes of paragraph 4 of subsection 4 (1) of the Act, a member referred to in subsection (4) who complies with the other provisions of this section is authorized to perform the following acts:

1. Adapting a patient's prescription.
2. Renewing a patient's prescription for the purpose of continuity of care.

(2) Subject to subsection (3), subsection (1) does not authorize a member referred to in subsection (3) to adapt or renew a prescription for a controlled substance as defined in the *Controlled Drugs and Substances Act* (Canada) or a drug designated as a monitored drug by the regulations under the *Narcotics Safety and Awareness Act, 2010*.

**Note:** On September 30, 2026, subsection 52 (2) of the Regulation is amended by striking out "Subject to subsection (3)" at the beginning. (See: O. Reg. 256/24, s. 67 (4))

(3) During the period of time in which the coronavirus exemption is in effect, subsection (2) does not apply to the extent that the coronavirus exemption or the *Controlled Drugs and Substances Act* (Canada) authorizes the member to adapt or renew a prescription for a controlled substance under that Act.

**Note:** On September 30, 2026, subsection 52 (3) of the Regulation is revoked. (See: O. Reg. 256/24, s. 67 (5))

(4) A Part A pharmacist and an intern are authorized to perform an act provided for in subsection (1), subject to the terms, conditions and limitations imposed on their certificate of registration.

(5) A member may only perform an act provided for in subsection (1) if the member complies with the following:

1. The member must either possess the patient's prescription to be adapted or renewed or,
  - i. receive a copy of the prescription directly from the pharmacy where the prescription was dispensed to the patient,
  - ii. be satisfied based on verbal confirmation from a pharmacist at the pharmacy where the prescription was dispensed to the patient as to the existence and details of the prescription,
  - iii. have access to the medical record that contains information about the prescription, or
  - iv. during the period of time in which the coronavirus exemption is in effect, if the criteria set out in subparagraphs i, ii and iii cannot be met, be satisfied as to the existence and details of the prescription from an alternative source, including, but not limited to, the prescription label, the prescription receipt with medication history, a photograph of the prescription or a facsimile of the prescription.

**Note: On September 30, 2026, paragraph 1 of subsection 52 (5) of the Regulation is amended by adding "or" at the end of subparagraph ii, by striking out "or" at the end of subparagraph iii and by revoking subparagraph iv. (See: O. Reg. 256/24, s. 67 (6))**

2. If the member is renewing a prescription, the member must not prescribe a quantity of the drug that exceeds the lesser of,
  - i. the quantity that was originally prescribed, including any refills that were authorized by the prescriber, and
  - ii. a 12 months' supply.
3. The member must, within a reasonable time, notify the prescriber identified on the prescription adapted or renewed by the member, as well as the patient's primary care provider if the member knows that the patient has such a care provider other than the prescriber, providing details about the patient's prescription, when the member,
  - i. renews a patient's prescription, or
  - ii. adapts a patient's prescription, if, in the member's opinion,
    - A. adapting the prescription is clinically significant in relation to the patient, or
    - B. the notification is necessary to support the patient's care.
4. At the time that the member adapts or renews the patient's prescription, the member must advise the patient or the patient's authorized agent,
  - i. that they are entitled to the prescription, and
  - ii. that they may take the prescription to a pharmacy of their choosing for dispensing.
5. The member must comply with the additional requirements under sections 53 and 54.

#### **Recording information**

**53.** A member who performs an act provided for in section 51 or 52 must ensure that the following information is recorded on the prescription:

1. The name and address of the patient for whom the drug is prescribed.
2. The name, strength (where applicable) and quantity of the prescribed drug.
3. Directions for the use of the drug, including its dose, frequency, route of administration and any special instructions.
4. The name, address, telephone number and College registration number of the member issuing the prescription.
5. The date the prescription was issued by the member.
6. If applicable, reference to the prescription that the member adapted or renewed, including the name and contact details of the original prescriber.
7. The number of refills that the member authorized, if applicable.
8. Any other information required by law.

#### **Patient record**

**54.** A member who performs an act under section 51 or 52 must maintain a patient record that includes details of the member's rationale for their decision to act under section 51 or 52 and the following information, if applicable:

1. Reference to, or a copy of, the patient's prescription that the member renewed or adapted, including the name and contact information of the prescriber.



2. A copy of the prescription that the member gave to the patient or their authorized agent under clause 51 (4) (c) or that the member gave to the patient or their authorized agent to take to a pharmacy of their choosing under clause 51 (4) (d) or paragraph 4 of subsection 52 (5).
3. A record of the results of laboratory or other tests that the member considered in making the decision to act under section 51 or 52.
4. The date on which the member notified the following persons, as applicable, and the method by which the notification occurred:
  - i. The patient's primary care provider notified under clause 51 (4) (e) or paragraph 3 of subsection 52 (5).
  - ii. The patient's prescriber notified under paragraph 3 of subsection 52 (5).

#### Piercing dermis

**55.** (1) For the purposes of paragraph 5 of subsection 4 (1) of the Act, a member referred to in subsection (2) of this section who meets all the requirements of subsection (4) is authorized to perform the act of piercing a patient's dermis with a lancet-type device to obtain blood.

(2) A Part A pharmacist, an intern, a Part A pharmacy technician and an intern technician are authorized to perform the act provided for in subsection (1), subject to the terms, conditions and limitations imposed on their certificate of registration.

- (3) A Part A pharmacy technician and an intern technician shall not perform the act provided for in subsection (1) unless,
  - (a) a Part A pharmacist is physically present on the premises at the time the act is performed;
  - (b) they are under the direction of a Part A pharmacist at the time the act is performed; and
  - (c) if the act is performed to administer a point-of-care test, a Part A pharmacist interprets the results of the test and makes any professional decision arising from those results.
- (4) A member may only perform the act provided for in subsection (1) if the member complies with the following:
  1. The member may only perform the act for the purpose of demonstrating the appropriate use of lancet-type devices for the patient's self-care and education or for the patient's self-monitoring of their chronic disease, unless the act is performed to administer a point-of-care test.
  2. The member may only perform the act to administer a point-of-care test if the test is listed in subsection 28 (2) of Ontario Regulation 45/22 (General) made under the *Laboratory and Specimen Collection Centre Licensing Act* and if it is administered for the purpose of assisting patients with the management of their medication to treat chronic disease.
  3. Before performing an act described in paragraphs 1 or 2 the member must,
    - i. explain the purpose to the patient or their authorized agent, and
    - ii. receive an informed consent from the patient or their authorized agent.
  4. The member shall ensure that the member only performs the act in an environment that is clean, safe, private and comfortable for the patient.
  5. The member shall ensure that appropriate infection control procedures are in place.
  6. The member must possess the knowledge, skill and judgment respecting the performance of the act and understand the condition of the patient, to perform it safely and effectively.
  7. The member must consider whether performing the act on the patient is appropriate, given the known risks and benefits to the patient and the safeguards and resources available to safely manage the outcome and any other relevant circumstances.
  8. The member must maintain a patient record that includes,
    - i. the name and address of the patient,
    - ii. the name and work address of the member,
    - iii. the date the act was performed,
    - iv. the circumstances relating to the performance of the act and any adverse reaction experienced by the patient,
    - v. confirmation that an informed consent was given by the patient or their agent, and
    - vi. if the act was performed to administer a point-of-care test,
      - A. the results of the test, and

- B. the professional decision arising from the results of the test and the rationale for the decision.
9. If the act is performed to administer a point-of-care test, the member must notify the patient's primary care provider, if any, within a reasonable time that the member performed the act and provide details respecting the act.

## PART XV INSPECTION OF DRUG PREPARATION PREMISES

### Interpretation

**56.** (1) In this Part,

"designated member" means,

- (a) the member designated for a drug preparation premises in accordance with section 61, or
- (b) where only one member engages in or supervises drug preparation activities at or in connection with a drug preparation premises, that member; ("membre désigné")

"drug" means a substance or a preparation containing a substance referred to in clauses (a) to (d) of the definition of "drug" in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*, but does not include,

- (a) a substance or preparation referred to in those clauses that is manufactured, sold or represented for use in animals or fowl, or
- (b) a substance or preparation referred to in clause (e), (f), (g), (h) or (i) of that definition; ("médicament")

"drug preparation activities" means reconstituting, diluting or otherwise preparing a drug or combining, admixing or mixing together two or more substances, at least one of which is a drug, to create a final product for the purposes of the sale or provision to another person, other than pursuant to or in anticipation of a prescription; ("activités de préparation de médicaments")

"drug preparation premises" means any place where a member engages in drug preparation activities, or where drug preparation activities take place that a member supervises, but does not include,

- (a) a pharmacy in respect of which a valid certificate of accreditation has been issued under the *Drug and Pharmacies Regulation Act*,
- (b) a premises in respect of which a valid establishment licence has been issued under the *Food and Drugs Act* (Canada), or
- (c) a hospital or a health or custodial institution approved or licensed under any general or special Act; ("locaux de préparation de médicaments")

"inspector" means a person appointed by the College to carry out an inspection on behalf of the College; ("inspecteur")

"supervise" means to supervise either directly or indirectly. ("surveiller")

(2) Anything that may be done by the College under this Part may be done by the Council or by a committee established under clause 94 (1) (i) of the Health Professions Procedural Code.

### Inspection

**57.** (1) All drug preparation premises are subject to inspection by the College in accordance with this Part.

(2) In carrying out an inspection of a drug preparation premises under subsection (1), the College may also require any or all of the following:

- 1. Inspection, examination or testing regarding any equipment, instrument, materials or any other thing that may be used in the drug preparation premises.
- 2. Examination and copying of books, accounts, reports, records or similar documents that are, in the opinion of the College, relevant to the member's practice with respect to the drug preparation activities at or in connection with the drug preparation premises.
- 3. Inquiries or questions to be answered by the member that are relevant to the member's practice with respect to the drug preparation activities at or in connection with the drug preparation premises.
- 4. Direct observation of a member in their practice with respect to drug preparation activities at or in connection with the drug preparation premises.

### Entrance by inspector

**58.** An inspector may, on the production of information identifying them as an inspector, enter and have access to any drug preparation premises at reasonable times and may inspect the drug preparation premises and do any of the things mentioned in subsection 57 (2) on behalf of the College.

#### **Duties of members**

**59.** (1) It is the duty of every member engaging in or supervising drug preparation activities at or in connection with drug preparation premises that are subject to an inspection to,

- (a) submit to an inspection of the drug preparation premises in accordance with this Part;
- (b) promptly answer a question or comply with a requirement of the inspector that is relevant to an inspection under this Part; and
- (c) co-operate fully with the College and the inspector who is conducting an inspection of a drug preparation premises in accordance with this Part.

(2) A member shall not engage in or supervise drug preparation activities at or in connection with a drug preparation premises where an inspector has been denied entry or access.

#### **Notice**

**60.** (1) No member shall commence engaging in or supervising drug preparation activities at or in connection with drug preparation premises unless the member has previously given notice in writing to the College in accordance with subsection (3) of the member's intention to do so.

(2) Where a member has provided notice in writing to the College in accordance with subsection (1) and the drug preparation premises have not passed an inspection or passed an inspection with conditions within the previous five years, the College shall ensure that an inspection of the drug preparation premises is performed within 60 days from the day that the College receives the member's notice.

(3) The notice required in subsection (1) must include the following information, submitted in the form and manner required by the College:

- 1. The full name of the member giving the notice and the full name of the individual or corporation who is the owner or occupier of the drug preparation premises, if they are not the member who is required to give notice under this section.
- 2. The full address of the drug preparation premises.
- 3. The date when the member first began engaging in or supervising drug preparation activities at or in connection with the drug preparation premises or the proposed date when the member intends to begin engaging in or supervising drug preparation activities at or in connection with the drug preparation premises.
- 4. Any other information the College requires that is relevant to an inspection of the drug preparation premises conducted under this Part.

#### **Designated member**

**61.** Where two or more members engage in or supervise drug preparation activities at or in connection with a drug preparation premises, the members shall designate a member as the designated member for the drug preparation premises, and shall immediately notify the College of the designated member's identity.

#### **Intervals for inspections**

**62.** All drug preparation premises are subject to an inspection by the College once every five years after the initial inspection of the premises or more often if, in the opinion of the College, it is necessary or advisable to do so.

#### **Determination of pass**

**63.** (1) After an inspection of a drug preparation premises, the College shall determine, in accordance with the accepted standards of practice, whether the drug preparation premises pass, pass with conditions or fail.

(2) In determining whether drug preparation premises pass, pass with conditions or fail an inspection, the College may consider,

- (a) the inspection results provided to the College by the inspector;
- (b) information provided by one or more members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises respecting the inspection, including the answers given by them in response to inquiries or questions asked by the inspector;
- (c) the information contained in a notice given by a member under subsection 60 (1);
- (d) any submissions made by the member or members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises that are relevant to the inspection; and
- (e) any other information that is directly relevant to the inspection of the drug preparation premises conducted under this Part.

(3) The College shall deliver a report, in writing and in accordance with section 39 of the *Regulated Health Professions Act, 1991*, to the individual or corporation that is the owner or occupier of the drug preparation premises and to the designated member for the drug preparation premises, within a reasonable time after the inspection is completed.

(4) Any report made by the College respecting an inspection of drug preparation premises where a member is engaging in or in respect of which the member is supervising drug preparation activities shall make a finding that the drug preparation premises passed, passed with conditions or failed the inspection and shall provide reasons where the drug preparation premises passed with conditions or failed the inspection.

(5) Any report made by the College that finds that drug preparation premises failed an inspection or passed with conditions is effective on the day that it is received, in accordance with section 39 of the *Regulated Health Professions Act, 1991*, by the designated member for the drug preparation premises.

(6) The designated member who receives a report made by the College that finds that a drug preparation premises failed an inspection or passed with conditions shall promptly provide copies of the report to all members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises.

(7) A member shall not engage in or supervise drug preparation activities at or in connection with a drug preparation premises that fail an inspection until,

- (a) the College delivers a report indicating that the drug preparation premises passed a subsequent inspection, or passed with conditions; or
- (b) after considering submissions under subsection (9), the College substitutes a finding that the drug preparation premises pass or pass with conditions.

(8) A member shall not engage in or supervise drug preparation activities at or in connection with drug preparation premises that pass an inspection with conditions except in accordance with the conditions set out in the report until,

- (a) the College delivers a report indicating that the drug preparation premises passed a subsequent inspection; or
- (b) after considering submissions under subsection (9), the College substitutes a finding that the drug preparation premises pass.

(9) A member may make submissions in writing to the College within 14 days from the date on which a report made by the College that finds that the drug preparation premises passed with conditions or failed the inspection becomes effective in accordance with subsection (5).

(10) The College may or may not elect to reinspect the drug preparation premises after receiving a member's submissions, but no more than 60 days after a member provides their submissions, the College shall do one or more of the following:

1. Confirm its finding that the drug preparation premises failed the inspection or passed with conditions.
2. Make a report and find that the drug preparation premises passed with conditions.
3. Make a report and find that the drug preparation premises passed the inspection.

(11) Drug preparation premises that fail an inspection or pass with conditions may be subject to one or more further inspections within a reasonable time after the College delivers its report, at the request of a member, any other person to whom the College gave the report, or at any time at the discretion of the College.

(12) Where, as a result of an inspection carried out under this Part, a report made by the College finds that a member's knowledge, skill or judgment is unsatisfactory, the College may direct the Registrar to refer the report to the Quality Assurance Committee.

(13) Where, as a result of an inspection carried out under this Part, a report made by the College finds that a member may have committed an act of professional misconduct or may be incompetent or incapacitated, the College may direct the Registrar to refer the report to the Inquiries, Complaints and Reports Committee.

## SCHEDULE 1 INJECTED SUBSTANCES

### Analgesics and Antipyretics

- Codeine — For patient education and demonstration only
- Hydromorphone — For patient education and demonstration only
- Morphine — For patient education and demonstration only
- Nalbuphine — For patient education and demonstration only

### Antibacterials

- Amikacin

Ampicillin  
Cefazolin  
Cefepime  
Cefotaxime  
Cefoxitin  
Ceftazidime  
Ceftriaxone  
Clindamycin  
Cloxacillin  
Ertapenem  
Gentamicin  
Penicillin G

#### Anticholinergic Agents

Glycopyrrolate — Must not be administered intravenously  
Hyoscine — Must not be administered intravenously  
Scopolamine — Must not be administered intravenously

#### Anticoagulants

Dalteparin — Must not be administered intravenously  
Danaparoid — Must not be administered intravenously  
Enoxaparin — Must not be administered intravenously  
Fondaparinux — Must not be administered intravenously  
Heparin — For patient education and demonstration only  
Nadroparin — Must not be administered intravenously  
Tinazaparin

#### Antidiabetic Agents

Dulaglutide  
Exenatide  
Insulins  
Liraglutide  
Lixisenatide  
Semaglutide  
Tirzepatide

#### Antihemorrhagic Agents

Emicizumab

#### Antihistamines

Dimenhydrinate — Must not be administered intravenously  
Diphenhydramine — Only for monitoring and management of allergic reactions

#### Antimigraine Agents

Erenumab  
Sumatriptan

#### Antiparkinsonian Agents

Apomorphine  
Benzotropine  
Antivirals  
  Enfuvirtide  
  Interferons  
  Peginterferon alfa-2a  
Central Nervous System Agents, Miscellaneous  
  Inotersen  
Complement Inhibitors  
  Icatibant  
  Lanadelumab  
Disease-modifying Antirheumatic Drugs  
  Abatacept  
  Adalimumab  
  Anakinra  
  Etanercept  
  Golimumab — Must not be administered intravenously  
  Methotrexate — Must not be administered intravenously  
  Sarilumab  
  Tocilizumab — Must not be administered intravenously  
  Ustekinumab — Must not be administered intravenously  
Enzymes  
  Asfotase Alfa  
GI Drugs, Miscellaneous  
  Certolizumab Pegol  
  Methylnaltrexone  
Gonadotropins and Antigonadotropins  
  Follitropin-alpha  
  Follitropin-beta  
  Follitropin-delta  
  Gonadotropin-chorionic  
  Gonadotropin-chorionic-alfa  
  Goserelin — For patient education and demonstration only  
  Leuprolide — For patient education and demonstration only  
  Lutropin-alfa  
  Menotropins  
  Triptorelin acetate  
Gonadotropin-releasing Hormone Antagonists  
  Cetrorelix  
  Ganirelix  
Heavy Metal Antagonists

Deferoxamine — For patient education and demonstration only

#### Hematopoietic Agents

Darbepoetin alfa — Must not be administered intravenously

Epoetin alfa — Must not be administered intravenously

Filgrastim — Must not be administered intravenously

Pegfilgrastim

Romiplostim — For patient education and demonstration only

#### Immunomodulatory Agents

Denosumab

Glatiramer

Interferon-Beta-1A

Interferon-Beta-1B

Natalizumab

#### Immunosuppressive Agents

Belimumab — Must not be administered intravenously

Mepolizumab

#### Miscellaneous Agents

Sodium Chloride

Sterile Water for Injection (Diluent)

#### Opioid partial agonists-antagonists

Buprenorphine

#### Parathyroid

Calcitonin Salmon — For patient education and demonstration only

Teriparatide

#### Pituitary

Desmopressin — For patient education and demonstration only

Vasopressin — For patient education and demonstration only

#### Progestins

Medroxyprogesterone

Progesterone

#### Prokinetic Agents

Metoclopramide

#### Proprotein Convertase Subtilisin Kexin Type 9 (Pcsk9) Inhibitors

Alirocumab

Evolocuma

#### Psychotherapeutic Agents

Haloperidol — For patient education and demonstration only

Methotrimeprazine — For patient education and demonstration only

#### Respiratory Tract Agents

Omalizumab

#### Skin And Mucous Membrane Agents

Brodalumab  
Dupilumab  
Guselkumab  
Ixekezumab  
Risankizumab — Must not be administered intravenously  
Secukinumab

#### Somatostatin Agonists and Antagonists

Lanreotide  
Octreotide — Must not be administered intravenously  
Pasireotide

#### Somatotropin Agonists and Antagonists

Pegvisomant  
Somatropin  
Tesamorelin

#### Sympatholytic (Adrenergic Blocking) Agents

Dihydroergotamine — Must not be administered intravenously

#### Vitamins

Ascorbic Acid — Must not be administered intravenously  
Cyanocobalamin  
Folic Acid — Must not be administered intravenously  
Pyridoxine — Must not be administered intravenously  
Thiamine — Must not be administered intravenously  
Vitamin K

#### SCHEDULE 3 VACCINES

1. Bacille Calmette-Guerin (BCG) Vaccines
2. Haemophilus Influenzae type b (Hib) Vaccines
3. Meningococcal Vaccines
4. Pneumococcal Vaccines
5. Typhoid Vaccines
6. Combined Typhoid and Hepatitis A Vaccines
7. Hepatitis A Vaccines
8. Hepatitis B Vaccines
9. Hepatitis A and B combined Vaccines
10. Herpes Zoster Vaccines
11. Human Papillomavirus (HPV) Vaccines
12. Japanese Encephalitis Vaccines
13. Rabies Vaccines
14. Varicella Vaccines
15. Yellow Fever Vaccines
16. Respiratory Syncytial Virus (RSV) Vaccines
17. Influenza Vaccines



18. Coronavirus (COVID-19) Vaccines

19. Tetanus Vaccines

20. Diphtheria Vaccines

21. Pertussis Vaccines

SCHEDULE 4  
DRUGS — MINOR AILMENTS

Item	Column 1 Minor Ailment	Column 2 Drug Classes	Column 3 Specified Drugs
1.	Acne (mild)	Skin and Mucous Membrane Agents	Adapalene Azelaic acid Benzoyl peroxide Clindamycin Dapsone Erythromycin Glycolic acid Salicylic acid Tazarotene Tretinoin Trifarotene
2a.	Allergic rhinitis	Antihistamines	Azelastine Bilastine Cetirizine Cyproheptadine Desloratadine Fexofenadine Loratadine Olopatadine Rupatadine
2b.	Allergic rhinitis	Corticosteroids	Beclomethasone Budesonide Ciclesonide Fluticasone Mometasone Triamcinolone
3.	Candidal stomatitis	Antifungals	Nystatin
4a.	Conjunctivitis (bacterial, allergic or viral)	Antiallergic Agents	Antazoline Bepotastine Cromolyn sodium (Sodium cromoglycate) Ketotifen Lodoxamide Olopatadine Pheniramine
4b.	Conjunctivitis (bacterial, allergic or viral)	Antibacterials	Erythromycin Fusidic acid Gramicidin Polymyxin B Tobramycin Trimethoprim
4c.	Conjunctivitis (bacterial, allergic or viral)	Vasoconstrictors	Naphazoline Oxymetazoline Phenylephrine Tetrahydrozoline
5.	Dermatitis (atopic/eczema, allergic or contact)	Anti-inflammatory Agents	Beclomethasone Betamethasone valerate Clobetasone Crisaborole Desonide Fluocinolone Hydrocortisone Prednicarbate Triamcinolone
6a.	Dermatitis (diaper)	Antifungals	Ciclopirox Clotrimazole

			Ketoconazole Miconazole Nystatin
6b.	Dermatitis (diaper)	Anti-inflammatory Agents	Desonide Hydrocortisone
7.	Dysmenorrhea	Nonsteroidal Anti-inflammatory Agents	Acetylsalicylic acid (ASA) Celecoxib Diclofenac Flurbiprofen Ibuprofen Ketoprofen Mefenamic acid Naproxen
8a.	Gastroesophageal reflux disease (GERD)	Antacids and Adsorbents	Alginic acid Aluminum hydroxide Calcium carbonate Magnesium salts
8b.	Gastroesophageal reflux disease (GERD)	Histamine H2-Antagonists	Cimetidine Famotidine Nizatidine Ranitidine
8c.	Gastroesophageal reflux disease (GERD)	Proton-Pump Inhibitors	Dexlansoprazole Esomeprazole Lansoprazole Omeprazole Pantoprazole Rabeprazole
9.	Hemorrhoids	Skin and Mucous Membrane Agents	Dibucaine (Cinchocaine) Esculin (Aesculin) Framycetin (Neomycin B) Hydrocortisone Phenylephrine Pramoxine Zinc sulfate
10a.	Herpes labialis	Anti-inflammatory Agents	Hydrocortisone
10b.	Herpes labialis	Antivirals	Acyclovir Docosanol Famciclovir Valacyclovir
11.	Impetigo	Antibacterials	Bacitracin Fusidic acid (Sodium fusidate) Gramicidin Mupirocin Ozenoxacin Polymyxin B
12a.	Insect bites and urticaria	Antihistamines	Bilastine Cetirizine Chlorpheniramine Cyproheptadine Desloratadine Diphenhydramine Fexofenadine Hydroxyzine Loratadine Rupatadine
12b.	Insect bites and urticaria	Antipruritics and Anti-inflammatory Agents	Benzocaine Calamine Camphor Desonide Hydrocortisone Lidocaine Menthol Pramoxine Zinc oxide
13a.	Musculoskeletal sprains and strains	Analgesics	Acetaminophen
13b.	Musculoskeletal sprains and strains	Nonsteroidal Anti-inflammatory Agents	Acetylsalicylic acid (ASA) Celecoxib

			Diclofenac Flurbiprofen Ibuprofen Ketoprofen Mefenamic acid Naproxen
14.	Nausea and vomiting of pregnancy	Antiemetics and Antinauseants	Dimenhydrinate Diphenhydramine Doxylamine Promethazine Pyridoxine
15.	Oral aphthae	Anti-inflammatory Agents	Triamcinolone
16.	Pinworms/Threadworms	Anthelmintics	Mebendazole Pyrantel pamoate
17.	Tick bites, post-exposure prophylaxis to prevent Lyme disease	Antibacterials	Doxycycline
18.	Urinary tract infection (uncomplicated)	Urinary Anti-infectives	Fosfomycin Nitrofurantoin Sulfamethoxazole Trimethoprim
19.	Vulvovaginal candidiasis	Antifungals	Clotrimazole Fluconazole Miconazole Terconazole

<u>Acute pharyngitis</u>	<u>Oral analgesics</u>	<ul style="list-style-type: none"> <li>• <u>acetaminophen</u></li> <li>• <u>ibuprofen</u></li> </ul>
	<u>Local analgesics (anesthetics)</u>	<ul style="list-style-type: none"> <li>• <u>amylmetacresol</u></li> <li>• <u>dichlorobenzyl alcohol</u></li> <li>• <u>dyclonine hydrochloride</u></li> <li>• <u>benzylamine</u></li> </ul>
	<u>Antibiotics (Cephalosporins)</u>	<ul style="list-style-type: none"> <li>• <u>cefadroxil</u></li> <li>• <u>cephalexin</u></li> <li>• <u>cefprozil</u></li> <li>• <u>cefuroxime</u></li> <li>• <u>cefixime</u></li> </ul>
	<u>Antibiotics (Lincosamides)</u>	<ul style="list-style-type: none"> <li>• <u>clindamycin</u></li> </ul>
	<u>Antibiotics (Macrolides)</u>	<ul style="list-style-type: none"> <li>• <u>azithromycin</u></li> <li>• <u>clarithromycin</u></li> </ul>
	<u>Antibiotics (Penicillins)</u>	<ul style="list-style-type: none"> <li>• <u>amoxicillin</u></li> <li>• <u>penicillin V potassium</u></li> </ul>
<u>Calluses and corns</u>	<u>Keratolytic Agents</u>	<ul style="list-style-type: none"> <li>• <u>salicylic acid</u></li> </ul>
<u>Mild Headache (Tension-Type)</u>	<u>Analgesics</u>	<ul style="list-style-type: none"> <li>• <u>acetaminophen</u></li> <li>• <u>acetylsalicylic acid (ASA)</u></li> <li>• <u>ibuprofen</u></li> <li>• <u>naproxen</u></li> </ul>
<u>Herpes Zoster</u>	<u>Nucleoside Analogues (Oral Antivirals)</u>	<ul style="list-style-type: none"> <li>• <u>acyclovir</u></li> <li>• <u>famciclovir</u></li> <li>• <u>valacyclovir</u></li> </ul>
	<u>Analgesics (for acute pain associated with an active episode)</u>	<ul style="list-style-type: none"> <li>• <u>acetaminophen</u></li> <li>• <u>acetylsalicylic acid (ASA)</u></li> <li>• <u>ibuprofen</u></li> <li>• <u>naproxen</u></li> <li>• <u>oral (systemic) corticosteroids</u></li> </ul>
<u>Acute Insomnia</u>	<u>Benzodiazepine Receptor Agonists (short term use only)</u>	<ul style="list-style-type: none"> <li>• <u>eszopiclone</u></li> <li>• <u>zopiclone</u></li> </ul>
	<u>Orexin Receptor Antagonists</u>	<ul style="list-style-type: none"> <li>• <u>daridorexant</u></li> <li>• <u>lemborexant</u></li> </ul>
	<u>Tricyclic Antidepressants</u>	<ul style="list-style-type: none"> <li>• <u>doxepin</u></li> </ul>
	<u>Antihistamine</u>	<ul style="list-style-type: none"> <li>• <u>diphenhydramine</u></li> </ul>
<u>Onychomycosis</u>	<u>Topical antifungals</u>	<ul style="list-style-type: none"> <li>• <u>ciclopirox olamine</u></li> <li>• <u>efinaconazole</u></li> </ul>

<u>Otitis externa</u>	<u>Acidifying Agents</u>	• <u>acetic acid</u>
	<u>Topical Antibiotics</u>	• <u>ciprofloxacin</u> • <u>gramicidin</u> • <u>polymyxin B</u> • <u>clioquinol</u> • <u>framycetin</u>
	<u>Topical Corticosteroids</u>	• <u>dexamethasone</u> • <u>flumethasone pivalate</u>
<u>Pediculosis</u>	<u>Pediculicides</u>	• <u>permethrin</u> • <u>pyrethrins</u> • <u>piperonyl butoxide</u> • <u>dimeticone</u> • <u>isopropyl myristate</u> • <u>cyclomethicone</u>
<u>Viral Rhinitis, rhinosinusitis</u>	<u>Intranasal antihistamine</u>	• <u>pheniramine</u>
	<u>Decongestants</u>	• <u>pseudoephedrine</u> • <u>phenylephrine</u>
	<u>Intranasal Corticosteroids</u>	• <u>mometasone</u>
	<u>Intranasal Decongestants</u>	• <u>oxymetazoline</u> • <u>phenylephrine</u> • <u>xylometazoline</u>
	<u>Anticholinergics, nasal</u>	• <u>ipratropium bromide</u>
<u>Seborrheic dermatitis (dandruff)</u>	<u>Topical Antifungals</u>	• <u>ciclopirox</u> • <u>ketoconazole</u> • <u>selenium sulfide</u> • <u>triclosan</u> • <u>zinc pyrithione</u>
	<u>Topical Corticosteroids</u>	• <u>hydrocortisone</u> • <u>betamethasone valerate</u>
	<u>Keratolytic Agents</u>	• <u>coal tar</u> • <u>salicylic acid</u>
<u>Tinea corporis</u>	<u>Topical Antifungals</u>	• <u>terbinafine</u> • <u>clotrimazole</u> • <u>ketoconazole</u> • <u>miconazole</u> • <u>ciclopirox</u> • <u>tolnaftate</u> • <u>undecylenic acid</u>
<u>Tinea cruris</u>	<u>Topical Antifungals</u>	• <u>terbinafine</u> • <u>clotrimazole</u> • <u>ketoconazole</u> • <u>miconazole</u> • <u>ciclopirox</u> • <u>tolnaftate</u> • <u>undecylenic acid</u>
<u>Verrucae (warts; excluding face and genitals)</u>	<u>Keratolytic Agents</u>	• <u>salicylic acid</u>
<u>Xerophthalmia; dry eye disease</u>	<u>Ophthalmic Lubricants</u>	• <u>carboxymethylcellulose</u> • <u>dextran 70</u> • <u>glycerin</u> • <u>hypromellose (hydroxypropyl methylcellulose)</u> • <u>hydroxypropyl-guar (HP-guar)</u> • <u>lanolin</u> • <u>mineral oil</u> • <u>petrolatum</u> • <u>polyvinyl alcohol</u> • <u>polyvinyl pyrrolidone (povidone)</u> • <u>propylene glycol</u> • <u>polyethylene glycol-400</u>

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