

Methadone Dispensing Notification Form

The owner/designated manager (DM) of a community pharmacy is required to inform the College **within seven days** of starting to dispense methadone for methadone maintenance treatment (MMT; opioid agonist treatment) and of any changes in this status. Refer to the [Opioid Policy and Fact Sheet -- Key Requirements for Methadone Dispensing](#) for more information.

Pharmacy Information			
A	Owner of Pharmacy/Corporation Name:		Accreditation Number:
	Name of Pharmacy (by which the pharmacy is known to the public):		Postal Code:
	Start Date of Methadone Dispensing (if applicable):	Stop Date of Methadone Dispensing (if applicable):	

Description of Methadone Services			
B	Methadone Maintenance Treatment:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Accepting new patients? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Does the pharmacy transfer custody of doses to a physician or another properly qualified health-care professional under delegation of the physician?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Initial Training Declaration			
C	Name of Designated Manager:		OCP Number:
	Date Course Completed OR Course Registration Date:		Signature:
	Name of Pharmacist:		OCP Number:
	Date Course Completed OR Course Registration Date:		Signature:

As per the [Opioid Policy](#), initial training and training updates for the DM and at least one staff pharmacist are required within certain time frames. All pharmacists should have the necessary knowledge and skills to provide MMT in accordance with the [Opioid Policy](#), prior to engaging in this practice. Refer to the [Fact Sheet – Key Requirements for Methadone Dispensing](#) for more information.

Designated Manager Acknowledgment			
D	Designated Manager Name:		OCP Number:
	Designated Manager Signature:		Date Signed:

Submit completed form by email to pharmacyapplications@ocpinfo.com, or fax to 416-847-8399, or mail to the attention of Pharmacy Applications & Renewals at 483 Huron St. Toronto, ON M5R 2R4