

The new Pharmacy Practice E-Handbook and Practice Guidelines

The Society have launched a new Practice E-Handbook and Practice Guidelines.

This summary document provides a brief overview for all members on the location and functionality of the new tools. The handbook and guidelines are updated on a regular basis and any changes are available in real time.

The handbook will function on the following Browser's:

- Google Chrome
- Safari
- Firefox

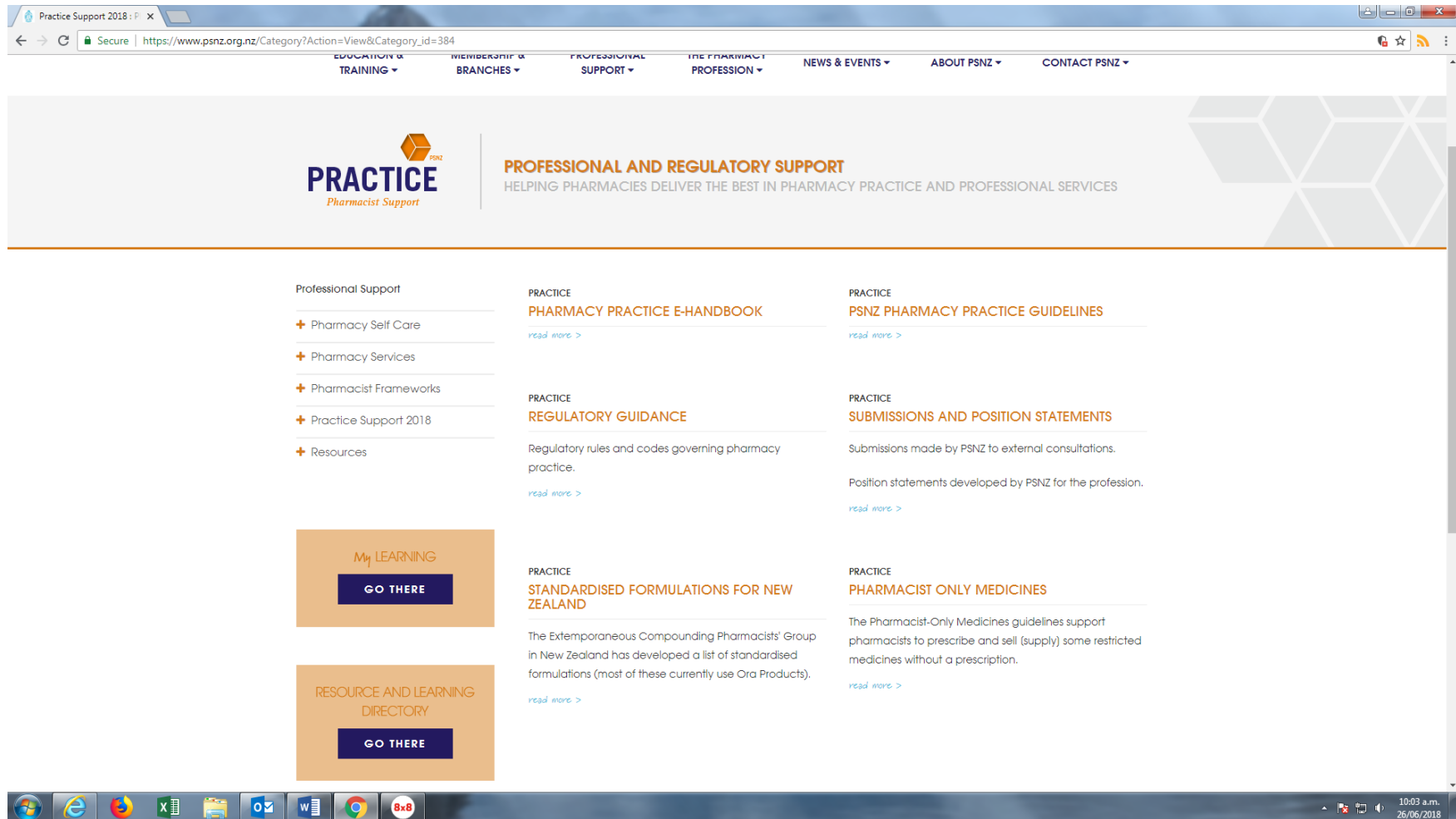
It is not designed to currently work on Internet Explorer or mobile devices at this time.

It is **not possible** to download or physically print the handbook or guidelines.

The handbook and guidelines are designed to be used as an online tool, which is up to date and available for **all members** of the Society.

Location

The Practice Handbook and Guidelines can be found on the Practice Support page of the Society's website:



The screenshot shows a web browser window displaying the PSNZ Practice Support page. The browser's address bar shows the URL: https://www.psnz.org.nz/Category?Action=View&Category_id=384. The website features a navigation menu with categories: EDUCATION & TRAINING, MEMBERSHIP & BRANCHES, PROFESSIONAL SUPPORT, THE PHARMACY PROFESSION, NEWS & EVENTS, ABOUT PSNZ, and CONTACT PSNZ. The main content area is titled "PRACTICE Pharmacist Support" and "PROFESSIONAL AND REGULATORY SUPPORT HELPING PHARMACIES DELIVER THE BEST IN PHARMACY PRACTICE AND PROFESSIONAL SERVICES".

Professional Support

- + Pharmacy Self Care
- + Pharmacy Services
- + Pharmacist Frameworks
- + Practice Support 2018
- + Resources

My LEARNING GO THERE

RESOURCE AND LEARNING DIRECTORY GO THERE

PRACTICE PHARMACY PRACTICE E-HANDBOOK
[read more >](#)

PRACTICE PSNZ PHARMACY PRACTICE GUIDELINES
[read more >](#)

PRACTICE REGULATORY GUIDANCE
Regulatory rules and codes governing pharmacy practice.
[read more >](#)

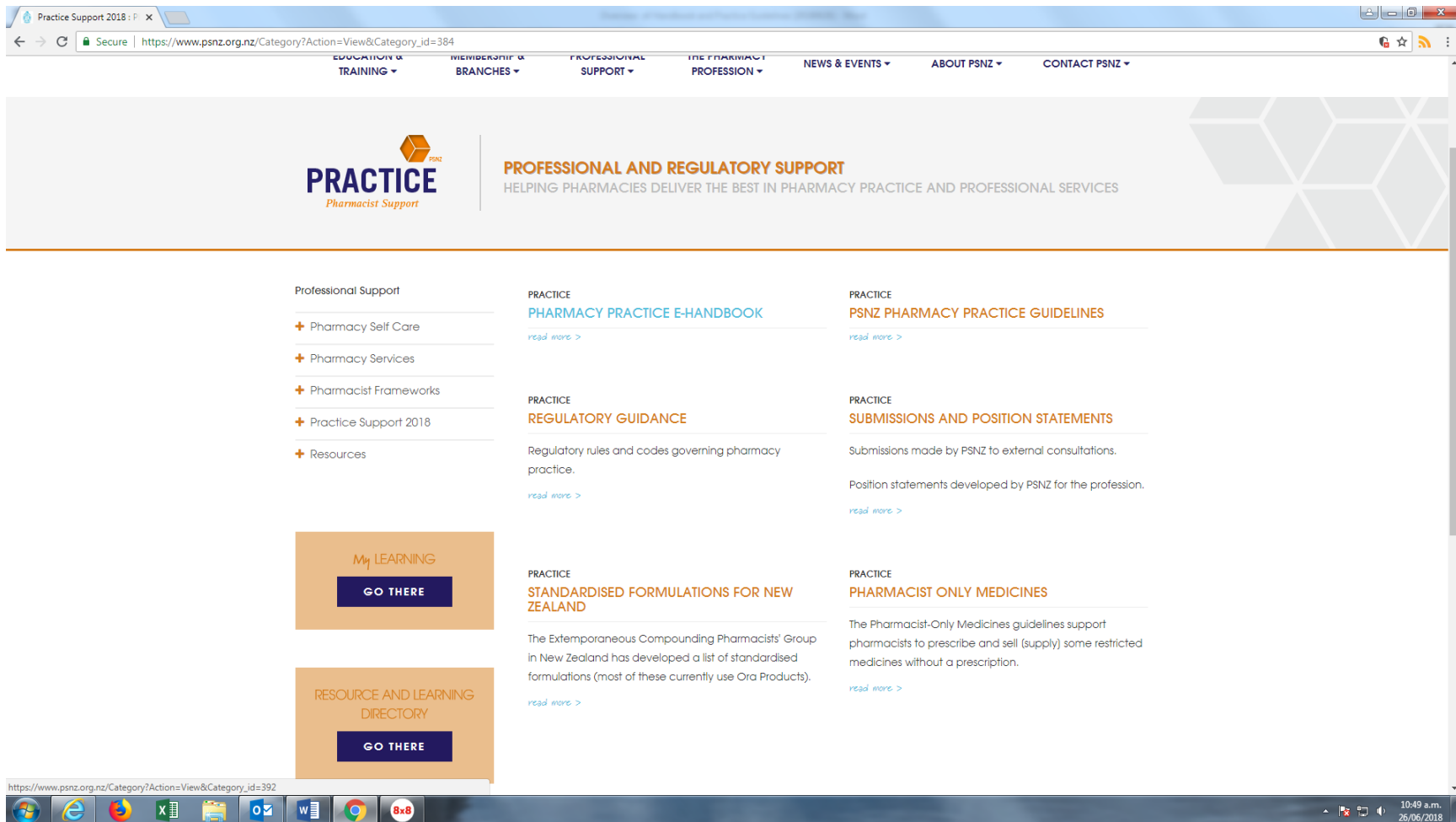
PRACTICE SUBMISSIONS AND POSITION STATEMENTS
Submissions made by PSNZ to external consultations.
Position statements developed by PSNZ for the profession.
[read more >](#)

PRACTICE STANDARDISED FORMULATIONS FOR NEW ZEALAND
The Extemporaneous Compounding Pharmacists' Group in New Zealand has developed a list of standardised formulations (most of these currently use Ora Products).
[read more >](#)

PRACTICE PHARMACIST ONLY MEDICINES
The Pharmacist-Only Medicines guidelines support pharmacists to prescribe and sell (supply) some restricted medicines without a prescription.
[read more >](#)

Access

The Practice E-handbook and guidelines can be accessed by clicking on the title of the appropriate section. This is highlighted in blue below, as an example for the Practice E-handbook:

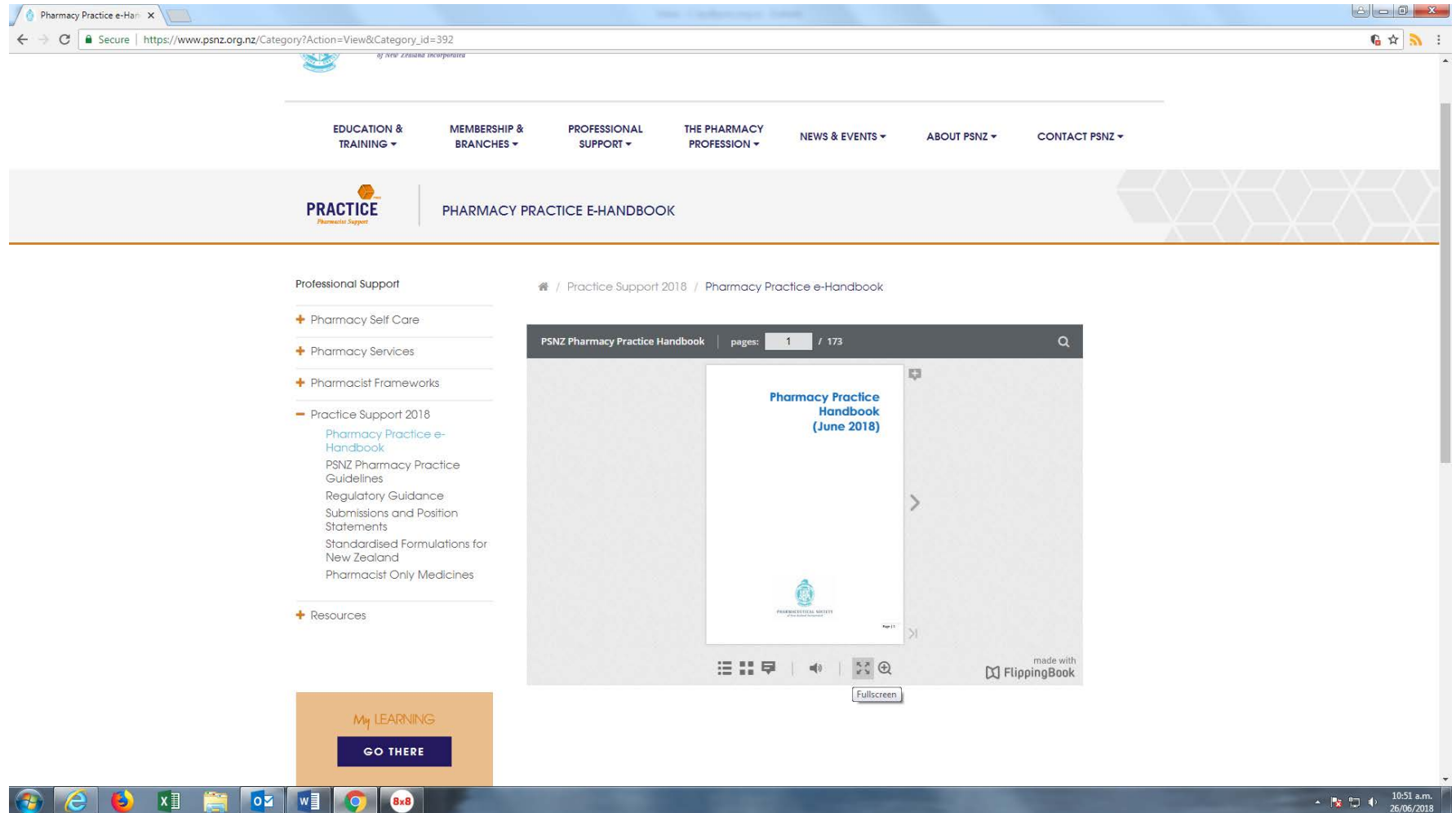


The screenshot shows a web browser window displaying the PSNZ Practice website. The address bar shows the URL: https://www.psnz.org.nz/Category?Action=View&Category_id=384. The navigation menu includes: EDUCATION & TRAINING, MEMBERSHIP & BRANCHES, PROFESSIONAL SUPPORT, THE PHARMACY PROFESSION, NEWS & EVENTS, ABOUT PSNZ, and CONTACT PSNZ. The main content area is titled "PROFESSIONAL AND REGULATORY SUPPORT" with the subtitle "HELPING PHARMACIES DELIVER THE BEST IN PHARMACY PRACTICE AND PROFESSIONAL SERVICES". A sidebar on the left lists: Professional Support, Pharmacy Self Care, Pharmacy Services, Pharmacist Frameworks, Practice Support 2018, and Resources. Two call-to-action buttons are visible: "My LEARNING GO THERE" and "RESOURCE AND LEARNING DIRECTORY GO THERE". The main content area features six items, with the first two highlighted in blue:

- PRACTICE PHARMACY PRACTICE E-HANDBOOK** (highlighted in blue)
[read more >](#)
- PRACTICE PSNZ PHARMACY PRACTICE GUIDELINES**
[read more >](#)
- PRACTICE REGULATORY GUIDANCE**
Regulatory rules and codes governing pharmacy practice.
[read more >](#)
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The browser's taskbar at the bottom shows various application icons and the system clock indicating 10:49 a.m. on 26/06/2018.

Once the page has opened click on the full screen icon as shown below:



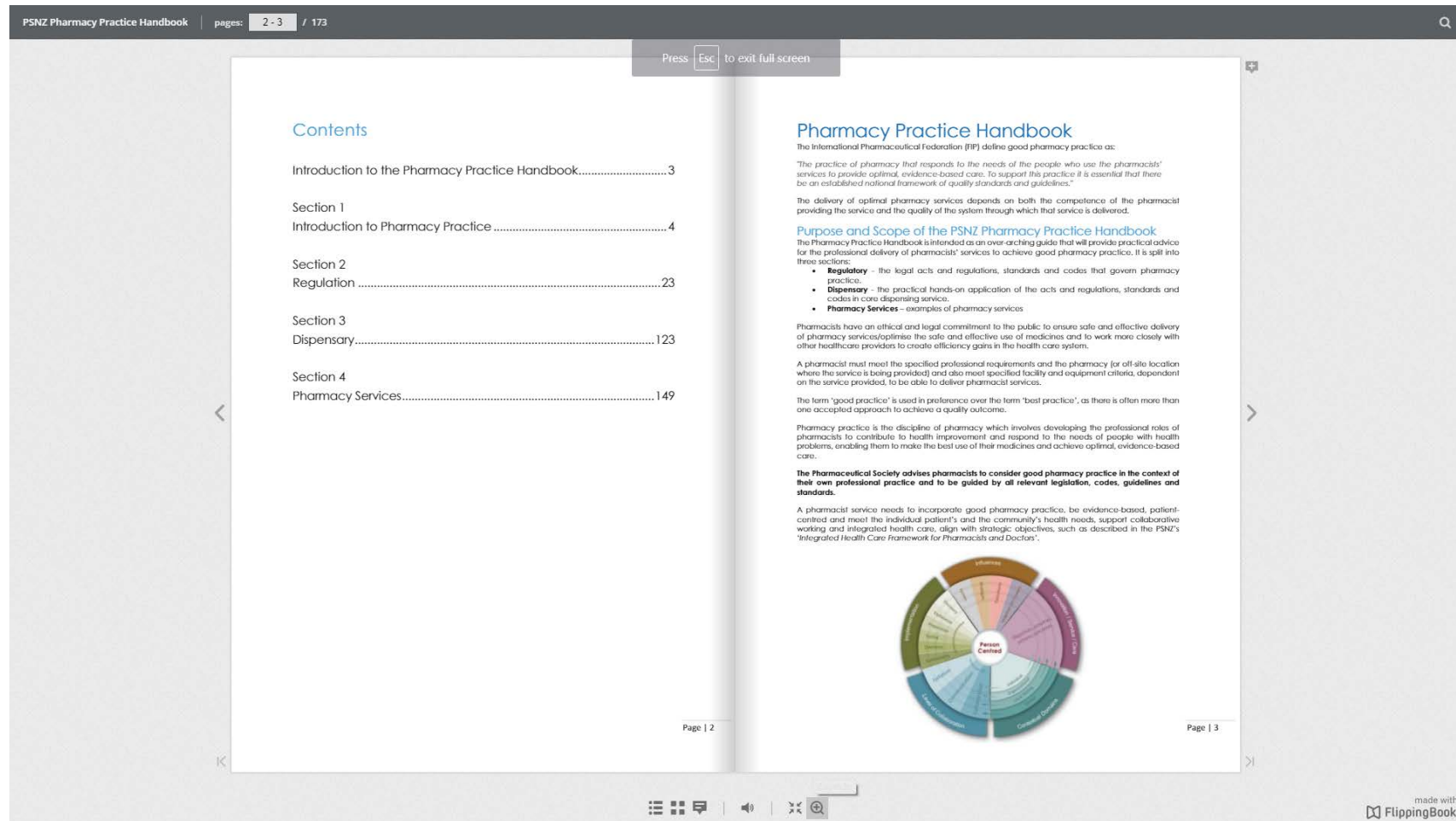
The screenshot shows a web browser window with the URL https://www.psnz.org.nz/Category?Action=View&Category_id=392. The page features a navigation menu with items: EDUCATION & TRAINING, MEMBERSHIP & BRANCHES, PROFESSIONAL SUPPORT, THE PHARMACY PROFESSION, NEWS & EVENTS, ABOUT PSNZ, and CONTACT PSNZ. The main content area is titled "PHARMACY PRACTICE E-HANDBOOK". On the left, there is a sidebar menu under "Professional Support" with sub-items: Pharmacy Self Care, Pharmacy Services, Pharmacist Frameworks, Practice Support 2018 (including Pharmacy Practice e-Handbook, PSNZ Pharmacy Practice Guidelines, Regulatory Guidance, Submissions and Position Statements, Standardised Formulations for New Zealand, and Pharmacist Only Medicines), and Resources. A "My LEARNING GO THERE" button is located below the sidebar. The main content area displays a preview of the "PSNZ Pharmacy Practice Handbook" (June 2018) in a full-screen viewer. The viewer shows the title page of the handbook, which includes the PSNZ logo and the text "Pharmacy Practice Handbook (June 2018)". The viewer interface includes a search bar, page navigation (pages: 1 / 173), and a "Fullscreen" button. The bottom of the browser window shows the Windows taskbar with various application icons and the system tray displaying the time as 10:51 a.m. on 26/06/2018.

Using the Handbook and Guideline

Reading the Handbook and Guidelines online

Both the handbook and guidelines function like an electronic book. The reader can flip pages or click on specific sections to find information. The document also contains embedded hyperlinks which will enable the reader to access other references mentioned in the text.

If the font is too small to read on the screen, click on the Zoom button as shown below:



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Press **Esc** to exit full screen

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Pharmacy Practice Handbook

The International Pharmaceutical Federation (IFP) define good pharmacy practice as:

"The practice of pharmacy that responds to the needs of the people who use the pharmacists' services to provide optimal, evidence-based care. To support this practice it is essential that there be an established national framework of quality standards and guidelines."

The delivery of optimal pharmacy services depends on both the competence of the pharmacist providing the service and the quality of the system through which that service is delivered.

Purpose and Scope of the PSNZ Pharmacy Practice Handbook

The Pharmacy Practice Handbook is intended as an over-arching guide that will provide practical advice for the professional delivery of pharmacists' services to achieve good pharmacy practice. It is split into three sections:

- **Regulatory** – the legal acts and regulations, standards and codes that govern pharmacy practice.
- **Dispensary** – the practical hands-on application of the acts and regulations, standards and codes in core dispensing services.
- **Pharmacy Services** – examples of pharmacy services

Pharmacists have an ethical and legal commitment to the public to ensure safe and effective delivery of pharmacy services/optimize the safe and effective use of medicines and to work more closely with other healthcare providers to create efficiency gains in the health care system.

A pharmacist must meet the specified professional requirements and the pharmacy (or off-site location where the service is being provided) and also meet specified facility and equipment criteria, dependent on the service provided, to be able to deliver pharmacist services.

The term "good practice" is used in preference over the term "best practice", as there is often more than one accepted approach to achieve a quality outcome.

Pharmacy practice is the discipline of pharmacy which involves developing the professional roles of pharmacists to contribute to health improvement and respond to the needs of people with health problems, enabling them to make the best use of their medicines and achieve optimal, evidence-based care.

The Pharmaceutical Society advises pharmacists to consider good pharmacy practice in the context of their own professional practice and to be guided by all relevant legislation, codes, guidelines and standards.

A pharmacist service needs to incorporate good pharmacy practice, be evidence-based, patient-centred and meet the individual patient's and the community's health needs, support collaborative working and integrated health care, align with strategic objectives, such as described in the PSNZ's 'Integrated Health Care Framework for Pharmacists and Doctors'.

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This will enable the reader to see sections of the pages with larger font as shown below:

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Use the mouse wheel to scroll up and down the page and then click on the Zoom out button to return to the original book.

Searching the Handbook or Guidelines

Click on the magnifying glass at the top of the handbook or guideline to open the search tool, as shown below:

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Enter a search term and pages containing that word or sentence will appear as a list in the drop down box below the search term. For example, searching the word Ketamine will display the following:

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4 pages found.


p. 26: 82
9.7.3 **Ketamine**

p. 72: ... buprenorphine, butobarbitone, glutethimide, **ketamine**, secobarbital, or secobarbital sodium. x M...

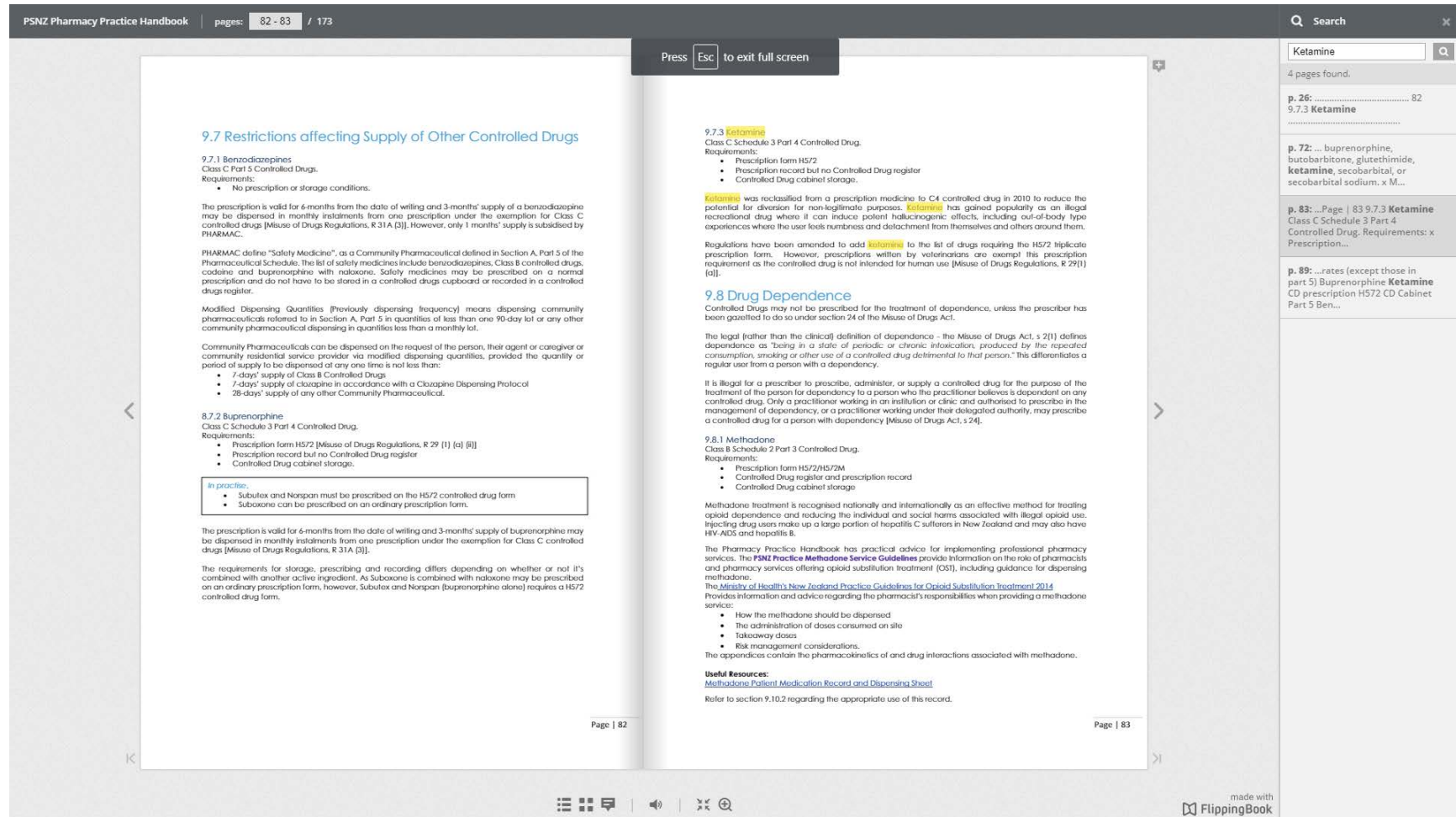
p. 83: ...Page | 83 9.7.3 **Ketamine**
Class C Schedule 3 Part 4
Controlled Drug. Requirements: x Prescription...

p. 89: ...rates (except those in part 5) Buprenorphine **Ketamine**
CD prescription H572 CD Cabinet Part 5 Ben...

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Clicking on the right hand side tab(s) will open the book to the appropriate page.
This is shown using the Ketamine example below:



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Press Esc to exit full screen

Search Ketamine

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9.7.3 Ketamine

p. 72: ... buprenorphine, butobarbitone, glutethimide, ketamine, secobarbital, or secobarbital sodium: x M...

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p. 89: ... rates (except those in part 5) Buprenorphine Ketamine CD prescription H572 CD Cabinet Part 5 Ben...

9.7 Restrictions affecting Supply of Other Controlled Drugs

9.7.1 Benzodiazepines
Class C Part 5 Controlled Drugs.
Requirements:

- No prescription or storage conditions.

The prescription is valid for 6-months from the date of writing and 3-months' supply of a benzodiazepine may be dispensed in monthly instalments from one prescription under the exemption for Class C controlled drugs [Misuse of Drugs Regulations, R 31A (3)]. However, only 1 month's supply is subsidised by PHARMAC.

PHARMAC define "Safety Medicine", as a Community Pharmaceutical defined in Section A, Part 5 of the Pharmaceutical Schedule. The list of safety medicines include benzodiazepines, Class B controlled drugs, cocaine and buprenorphine with naloxone. Safety medicines may be prescribed on a normal prescription and do not have to be stored in a controlled drugs cupboard or recorded in a controlled drugs register.

Modified Dispensing Quantities (Previously dispensing frequency) means dispensing community pharmaceuticals referred to in Section A, Part 5 in quantities of less than one 90-day lot or any other community pharmaceutical dispensing in quantities less than a monthly lot.

Community Pharmaceuticals can be dispensed on the request of the person, their agent or caregiver or community residential service provider via modified dispensing quantities, provided the quantity or period of supply to be dispensed at any one time is not less than:

- 7-days' supply of Class B Controlled Drugs
- 7-days' supply of clozapine in accordance with a Clozapine Dispensing Protocol
- 28-days' supply of any other Community Pharmaceutical.

8.7.2 Buprenorphine
Class C Schedule 3 Part 4 Controlled Drug.
Requirements:

- Prescription form H572 [Misuse of Drugs Regulations, R 29 (1) (a) (B)]
- Prescription record but no Controlled Drug register
- Controlled Drug cabinet storage.

in practice:

- Subutex and Norspan must be prescribed on the H572 controlled drug form
- Suboxone can be prescribed on an ordinary prescription form.

The prescription is valid for 6-months from the date of writing and 3-months' supply of buprenorphine may be dispensed in monthly instalments from one prescription under the exemption for Class C controlled drugs [Misuse of Drugs Regulations, R 31A (3)].

The requirements for storage, prescribing and recording differs depending on whether or not it's combined with another active ingredient. As Suboxone is combined with naloxone may be prescribed on an ordinary prescription form, however, Subutex and Norspan (buprenorphine alone) requires a H572 controlled drug form.

9.7.3 Ketamine
Class C Schedule 3 Part 4 Controlled Drug.
Requirements:

- Prescription form H572
- Prescription record but no Controlled Drug register
- Controlled Drug cabinet storage.

Ketamine was reclassified from a prescription medicine to C4 controlled drug in 2010 to reduce the potential for diversion for non-legitimate purposes. Ketamine has gained popularity as an illegal recreational drug where it can induce potent hallucinogenic effects, including out-of-body type experiences where the user feels numbness and detachment from themselves and others around them.

Regulations have been amended to add ketamine to the list of drugs requiring the H572 triplicate prescription form. However, prescriptions written by veterinarians are exempt this prescription requirement as the controlled drug is not intended for human use [Misuse of Drugs Regulations, R 29(1) (a)].

9.8 Drug Dependence
Controlled Drugs may not be prescribed for the treatment of dependence, unless the prescriber has been gazetted to do so under section 24 of the Misuse of Drugs Act.

The legal (rather than the clinical) definition of dependence – the Misuse of Drugs Act, s 2(1) defines dependence as "being in a state of periodic or chronic intoxication, produced by the repeated consumption, smoking or other use of a controlled drug detrimental to that person." This differentiates a regular user from a person with a dependency.

It is illegal for a prescriber to prescribe, administer, or supply a controlled drug for the purpose of the treatment of the person for dependency to a person who the practitioner believes is dependent on any controlled drug. Only a practitioner working in an institution or clinic and authorised to prescribe in the management of dependency, or a practitioner working under their delegated authority, may prescribe a controlled drug for a person with dependency [Misuse of Drugs Act, s 24].

9.8.1 Methadone
Class B Schedule 2 Part 3 Controlled Drug.
Requirements:

- Prescription form H572/H572M
- Controlled Drug register and prescription record
- Controlled Drug cabinet storage

Methadone treatment is recognised nationally and internationally as an effective method for treating opioid dependence and reducing the individual and social harms associated with illegal opioid use. Injecting drug users make up a large portion of hepatitis C sufferers in New Zealand and may also have HIV/AIDS and hepatitis B.

The Pharmacy Practice Handbook has practical advice for implementing professional pharmacy services. The PSNZ Practice Methadone Service Guidelines provide information on the role of pharmacists and pharmacy services offering opioid substitution treatment (OST), including guidance for dispensing methadone.

The Ministry of Health's New Zealand Practice Guidelines for Opioid Substitution Treatment 2014 Provides information and advice regarding the pharmacist's responsibilities when providing a methadone service:

- How the methadone should be dispensed
- The administration of doses consumed on site
- Talkaway doses
- Risk management considerations.

The appendices contain the pharmacokinetics of and drug interactions associated with methadone.

Useful Resources:
[Methadone Patient Medication Record and Dispensing Sheet](#)

Refer to section 9.10.2 regarding the appropriate use of this record.

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To search for another word or sentence just change the information in the search term box.

Adding personal notes

The user can add Browser specific notes to a page. This information will only be displayed on the computer being used at the time. To add a note click on the + icon as shown below:

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9.7 Restrictions affecting Supply of Other Controlled Drugs

9.7.1 Benzodiazepines
Class C Part 5 Controlled Drug.
Requirements:

- No prescription or storage conditions.

The prescription is valid for 6-months from the date of writing and 3-months' supply of a benzodiazepine may be dispensed in monthly instalments from one prescription under the exemption for Class C controlled drugs [Misuse of Drugs Regulations, R 31A (3)]. However, only 1 months' supply is subsidised by PHARMAC.

PHARMAC define "Safety Medicine", as a Community Pharmaceutical defined in Section A, Part 5 of the Pharmaceutical Schedule. The list of safety medicines include benzodiazepines, Class B controlled drugs, codeine and buprenorphine with naloxone. Safety medicines may be prescribed on a normal prescription and do not have to be stored in a controlled drugs cupboard or recorded in a controlled drugs register.

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Requirements:

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In practice:

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Regulations have been amended to add **Ketamine** to the list of drugs requiring the H572 triplicate prescription form. However, prescriptions written by veterinarians are exempt this prescription requirement as the controlled drug is not intended for human use [Misuse of Drugs Regulations, R 29(1) (a)].

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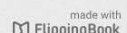
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This will open a note box and the reader can add their own information. This will remain on the page once the book is closed and the read can access that information at a future stage.
An example of the note function is show below:

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PHARMAC define "Safety Medicine", as a Community Pharmaceutical defined in Section A, Part 5 of the Pharmaceutical Schedule. The list of safety medicines include benzodiazepines, Class B controlled drugs, codeine and buprenorphine with naloxone. Safety medicines may be prescribed on a normal prescription and do not have to be stored in a controlled drugs cupboard or recorded in a controlled drugs register.

Modified Dispensing Quantities (Previously dispensing frequency) means dispensing community pharmaceuticals referred to in Section A, Part 5 in quantities of less than one 90-day lot or any other community pharmaceutical dispensing in quantities less than a monthly lot.

Community pharmaceuticals can be dispensed on the request of the person, their agent or caregiver or community residential service provider via modified dispensing quantities, provided the quantity or period of supply to be dispensed of any one time is not less than:

- 7-days' supply of Class B Controlled Drugs
- 7-days' supply of clozapine in accordance with a Clozapine Dispensing Protocol
- 28-days' supply of any other Community Pharmaceutical.

8.7.2 Buprenorphine
Class C Schedule 3 Part 4 Controlled Drug.
Requirements:

- Prescription form H5/2 [Misuse of Drugs Regulations, R 29 (1) (a) (ii)]
- Prescription record but no Controlled Drug register
- Controlled Drug cabinet storage.

In practice:

- Subutex and Naspam must be prescribed on the H5/2 controlled drug form
- Suboxone can be prescribed on an ordinary prescription form.

The prescription is valid for 6-months from the date of writing and 3-months' supply of buprenorphine may be dispensed in monthly instalments from one prescription under the exemption for Class C controlled drugs [Misuse of Drugs Regulations, R 31A (3)].

The requirements for storage, prescribing and recording differs depending on whether or not it's combined with another active ingredient. As Suboxone is combined with naloxone may be prescribed on an ordinary prescription form, however, Subutex and Naspam (buprenorphine alone) requires a H5/2 controlled drug form.

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9.7.3 Ketamine
Class C Schedule 3 Part 4 Controlled Drug.
Requirements:

- Prescription form H5
- Prescription record
- Controlled Drug cabinet storage.

Ketamine was reclassified from a prescription medicine to C4 controlled drug in 2010 to reduce the potential for diversion for non-legitimate purposes. **Ketamine** has gained popularity as an illegal recreational drug where it can induce potent hallucinogenic effects, including out-of-body type experiences where the user feels numbness and detachment from themselves and others around them.

Regulations have been amended to add **Ketamine** to the list of drugs requiring the H5/2 triplicate prescription form. However, prescriptions written by veterinarians are exempt this prescription requirement as the controlled drug is not intended for human use [Misuse of Drugs Regulations, R 29(1) (a)].

9.8 Drug Dependence
Controlled Drugs may not be prescribed for the treatment of dependence, unless the prescriber has been gazetted to do so under section 24 of the Misuse of Drugs Act.

The legal (rather than the clinical) definition of dependence - the Misuse of Drugs Act, s 2(1) defines dependence as "being in a state of periodic or chronic intoxication, produced by the repeated consumption, smoking or other use of a controlled drug detrimental to that person." This differentiates a regular user from a person with a dependency.

It is illegal for a prescriber to prescribe, administer, or supply a controlled drug for the purpose of the treatment of the person for dependency to a person who the practitioner believes is dependent on any controlled drug. Only a practitioner working in an institution or clinic and authorised to prescribe in the management of dependency, or a practitioner working under their delegated authority, may prescribe a controlled drug for a person with dependency [Misuse of Drugs Act, s 24].

9.8.1 Methadone
Class B Schedule 2 Part 3 Controlled Drug.
Requirements:

- Prescription form H5/2/H5/2M
- Controlled Drug register and prescription record
- Controlled Drug cabinet storage

Methadone treatment is recognised nationally and internationally as an effective method for treating opioid dependence and reducing the individual and social harms associated with illegal opioid use. Injecting drug users make up a large portion of hepatitis C sufferers in New Zealand and may also have HIV/AIDS and hepatitis B.

The Pharmacy Practice Handbook has practical advice for implementing professional pharmacy services. The **PSNZ Practice Methadone Service Guidelines** provide information on the role of pharmacists and pharmacy services offering opioid substitution treatment (OST), including guidance for dispensing methadone.

The **Ministry of Health's New Zealand Practice Guidelines for Opioid Substitution Treatment 2014** provides information and advice regarding the pharmacist's responsibilities when providing a methadone service:

- How the methadone should be dispensed
- The administration of doses consumed on site
- Takeaway doses
- Risk management considerations.

The appendices contain the pharmacokinetics of and drug interactions associated with methadone.

Useful Resources:
[Methadone Patient Medication Record and Dispensing Sheet](#)

Refer to section 9.10.2 regarding the appropriate use of this record.

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