Administrative Guidelines for Practitioner Dispensing in North Dakota

These guidelines are intended to apply to practitioners who in North Dakota include: physicians, physician assistants and nurse practitioners, as well as others authorized to prescribe or dispense, who may find themselves in similar circumstances.

Let us begin by saying; physicians are exempt from the pharmacy practice statutory requirements under North Dakota Century Code (NDCC) 43-15-02. Exemptions - “A duly licensed practitioner of medicine supplying the practitioner’s own patients with such remedies as the practitioner may desire.” And North Dakota Administrative Code (NDAC) 61-04-02-01 – The exemption contained in subsection 1 of NDCC 43-15-02 for a duly licensed practitioner of medicine supplying the practitioner’s own patients with such remedies as the practitioner may desire shall exempt such practitioners who dispense remedies as an incident to the practice of their profession for a patient’s immediate needs, which would be those drugs required for a seventy-two hour time period, full course of antibiotic treatment, starter pack of pre-packaged medications, or up to a ten day supply of initial therapy of maintenance medication that should be started immediately, but shall not exempt such a practitioner who regularly engages in dispensing such remedies to the practitioner’s patients for which such patients are charged either separately or together with charges for other professional services, from recordkeeping, dispensing, labeling, counseling as required by NDCC 43-15-31.2, patient profile system as required by NDCC 43-15-31.1, and all other requirements of the practice of pharmacy as set forth in this chapter or by federal and state laws as they pertain to the regulation of practice of pharmacy. Documented charts shall meet the requirements of the patient profile system.”

For the purposes of these guidelines, we will also assume, though not specifically mentioned or addressed, the exemption will include physician assistants and nurse practitioners subject to any guidelines which might be imposed by their respective licensing Boards, the Board of Medical Examiners or the Board of Nursing, and of course always limited by appropriate scope of practice considerations, as with all other healthcare practice activities.

When the practitioner is doing the dispensing, he or she is responsible for the proper labeling of the medication and the patient information which is necessary for the patient’s safe use of the medication, and for the proper recordkeeping. Record keeping is usually accomplished by adequate entries in the patient’s chart.

It is the opinion of the Board of Pharmacy, the Board of Medical Examiners and the Board of Nursing that the actual dispensing cannot be delegated to others. Although, others may certainly help with activities such as filling out paperwork, obtaining the medication, preparing and affixing the proper label, etc. The practitioner must be the one responsible for actual checking of the medication and providing information to the patient, which in their professional opinion, is necessary for the proper utilization of the medication. Interactions with other medications the patient may be using is part of this patient information, as well as the proper dosage, duration of therapy, side effects to be expected, what to do if doses are missed and what to expect from the use of the medication. A licensed practical nurse or registered nurse may deliver the medication to the patient after approval by the prescriber.

If individual practitioners feel that there is a necessity to vary this policy, they should contact their respective Board and ask for a review of these guidelines.

Additional questions may be directed to the Board of Pharmacy, the Board of Medical Examiners or Board of Nursing.

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