



Indiana Board of Pharmacy
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-2067
Fax: (317) 233-4236
Website: bop.IN.gov

Governor Mitchell E. Daniels, Jr.

INDIANA BOARD OF PHARMACY'S POLICY ON MAKING CHANGES TO SCHEDULE II PRESCRIPTIONS

On November 14, 2011, the Indiana Board of Pharmacy voted 6-0-0 to approve and adopt the statement below, which was taken from the Drug Enforcement Agency's Frequently Asked Questions website (http://www.deadiversion.usdoj.gov/faq/general.htm#rx_change):

Question: What changes may a pharmacist make to a prescription written for a controlled substance?

Answer: The pharmacist may add the patient's address or change the patient's address upon verification. The pharmacist may change or add the dosage form, drug strength, drug quantity, directions for use, or issue date only after consultation with and agreement of the prescribing practitioner. Such consultations and corresponding changes should be noted on the prescription as well as the patient's medical record. Pharmacists and practitioners must comply with any state/local laws, regulations, or policies prohibiting any of these changes to controlled substance prescriptions.

The majority of changes can be made only after the pharmacist contacts the prescribing practitioner.

After consultation with the prescribing practitioner, the pharmacist is permitted to add or change the dosage form, drug strength, drug quantity, directions for use, and issue date.

The pharmacist is permitted to make information additions that are provided by the patient or bearer, such as the patient's address, and such additions should be verified.

The pharmacist is never permitted to make changes to the patient's name, controlled substance prescribed (except for generic substitution permitted by state law) or the prescriber's signature.

The Indiana Board of Pharmacy expects pharmacists to use their professional judgment and act in the best interests of the patient, in accordance with Indiana Code 25-26-13-16. In most situations, this involves speaking directly with the prescriber (not an agent of the prescriber) to verify the corrections before making the appropriate corrections to the schedule II prescription.