IMPORTANT

As of Sept. 4, 2018, the following nursing colleges amalgamated to become the British Columbia College of Nursing Professionals (BCCNP):

- College of Licensed Practical Nurses of British Columbia (CLPNBC)
- College of Registered Nurses of British Columbia (CRNBC)
- College of Registered Psychiatric Nurses of British Columbia (CRPNBC)

Although the information in the document you are about to access reflects our most current information about this topic, you’ll notice the content refers to the previous nursing college that published this document prior to Sept. 4, 2018.

We appreciate your patience while we work towards updating all of our documents to reflect our new name and brand.
Pharmacists’ Authority to Adjust, Interchange and Substitute Medication Orders

The College of Registered Nurses of British Columbia and the College of Pharmacists of British Columbia (CPBC) confirm that when a client-specific order has been given by an authorized health professional, registered nurses can implement medication changes initiated by pharmacists that are consistent with standards, limits and conditions specified by CPBC.

BACKGROUND

The Nurses (Registered) and Nurse Practitioner Regulation under the Health Professions Act describes an order as an instruction or authorization for a specific client given by an authorized health professional to carry out a Section 7 restricted activity (e.g., administer a Schedule 1 medication). Health professionals who are authorized to give orders to registered nurses are physicians, midwives, nurse practitioners, dentists, podiatrists and naturopathic physicians.

The Regulation permits pre-printed orders and orders that refer to another document, such as a clinical practice guideline or protocol. As described below, pharmacists have authority to adjust, interchange and substitute medication orders.

PHARMACISTS’ AUTHORITY

In certain circumstances, pharmacists have authority through the Pharmacy Operations and Drug Scheduling Act to interchange or substitute medications that were prescribed by an authorized practitioner. For example, pharmacists are authorized to substitute a generically equivalent drug or interchange medications to the closest manufactured dose (e.g., if the order was for a 300 mg tablet and the standard dose available is 325 mg).

When pharmacists comply with the standards, limits and conditions outlined in CPBC’s Professional Practice Policy 58 - Medication Management, they also have authority under the Pharmacy Operations and Drug Scheduling Act to adapt medication orders. Examples include substituting therapeutically equivalent medications, adjusting doses or regimens and renewing existing medication orders to achieve the desired patient outcomes. View Professional Practice Policy 58 - Medication Management at www.bcpharmacists.org

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