



National Residential Medication Chart (NRMC3)

Appendix 2

User guide for pharmacists

National Residential Medication Chart v.3

CONSIDERATIONS

Swallowing difficulties	Y/N
Cognitive impairment	Y/N
Dexterity difficulties	Y/N
Resistive to medicine	Y/N
Nil by mouth	Y/N
Self administers	Y/N
Other	Y/N

Details if Y to above: _____

ALERT
Resident with similar name?
Y/N

PRIMARY GENERAL PRACTITIONER

Name	_____
Address	_____
Phone	_____
Out of hours	_____
Prescriber	_____

Resident name _____
Preferred name _____
Date of Birth / / _____
URN/MRN _____
RAC ID _____
RACF name _____
IHI _____
Gen _____

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Specific Legal Requirements in NSW

1. The following medications must in all cases be prescribed on a traditional prescription (that is either hand written or computer generated as approved by the NSW Director-General of Health). An order for these medications on the National Residential Medication Chart does NOT constitute a legal prescription for pharmacist dispensing in NSW. The dispensing pharmacist must dispense, record and retain the traditional (hand written or computer generated) prescription in accordance with the requirements under the Poisons and Therapeutic Goods Regulation 2008:
 - a) Schedule 8 medications (drugs of addiction).
 - b) Medications containing Schedule 4 Appendix B substances (also known as 'special restricted substances' under the Poisons and Therapeutic Goods Regulation 2008); amylobarbitone for injection, any anabolic and androgenic steroidal agent, drostanolone, ethyloestrenol, fluoxymesterone, mesterolone, methandienone, methandriol, methenolone, methylandrostanolone, methyltestosterone, mibolerone, nandrolone, norethandrolone, oxandrolone, oxymesterone, oxymetholone, pentobarbitone for injection, stanolone, stanozolol, testosterone.
 - c) Medications containing those restricted substances which can be prescribed only by a medical practitioner who holds the relevant authority under the Poisons and Therapeutic Goods Regulation 2008 to prescribe the substance; acitretin, clomiphene, cyclofenil, dinoprost, dinoprostone, etretinate, follitropin beta, isotretinoin for oral use, luteinising hormone, tretinoin for oral use, urofollitrophin (human follicle stimulating hormone). (*Refer clause 37 and Part 8 of the Poisons and Therapeutic Goods Regulation 2008*).
2. Only community pharmacies authorised by the NSW Ministry of Health to dispense medications during the phased implementation of the National Residential Medication Chart are legally able to dispense medications from a duplicate copy of the Chart.
3. A duplicate copy of National Residential Medication Chart is valid as a prescription for dispensing only when:
 - a) The duplicate copy is clear and legible, and
 - b) The order is for a medication other than that listed at 1. above (that is, **not** for a Schedule 8 medication, Schedule 4 Appendix B medication nor a Schedule 4 substance requiring the relevant authority under the Poisons and Therapeutic Goods Regulation 2008), and
 - c) The medications are ordered by a medical practitioner, and
 - d) The medical practitioner's signature appears with his/her name, address and contact telephone number on page 1 of the Chart, and
 - e) The resident's full name and unique residential aged care identifying number appear on the Chart, and
 - f) The medical practitioner's handwritten order appears in each particular 'Medicine' section of the Chart with;
 - (i) The name and strength of the medication, and
 - (ii) Adequate directions for use with regard to dose, route and frequency for administration, and
 - (iii) The date the medication is ordered, and
 - (iv) The medical practitioner's signature, and
 - (v) The medical practitioner's name printed alongside his/her signature, and
 - (vi) **Either;**
 - a tick in the 'valid for duration of chart' field, **OR**
 - completion of the 'Stop date' field, (Note: the completion of the 'Start Date' field is optional)



4. In the event the duplicate copy of National Residential Medication Chart does not comply with the requirements at 3.f)(vi) above and is subsequently invalid as a prescription for dispensing, the pharmacist may either:
 - a) Telephone or email the medical practitioner who issued the prescription to confirm the quantity to be dispensed, which is suggested to be:
 - i) In the case of a Pharmaceutical Benefits Scheme medication, the pack size representing the maximum quantity of the particular medication on the Pharmaceutical Benefits Scheme, or
 - ii) In the case of a non Pharmaceutical Benefits Scheme medication, the smallest currently marketed pack size of the medication.
 - b) Where the pharmacist cannot contact the medical practitioner who issued the prescription, the pharmacist may dispense a quantity of the medication (other than a medication included in Appendix D to the Poisons and Therapeutic Goods Regulation 2008) to equate with that required for three day's treatment.
5. All orders on a National Residential Medication Chart are only valid for dispensing by a pharmacist for a maximum of four months from the first date a medication is ordered on the Chart **or** up to the expiry date that appears on page 1 of the Chart, whichever date occurs first.
6. The dispensing pharmacist must endorse each particular medication order on the duplicate copy of the National Residential Medication Chart with:
 - a) The date on which the particular medication is dispensed, and
 - b) The pharmacy's unique prescription reference number pertaining to the dispensing of the particular medication on that date, and
 - c) The name and address of the pharmacy.
7. The dispensing pharmacist must endorse each particular medication order on the duplicate copy of the National Residential Medication Chart with the word 'CANCELLED' on the last occasion the particular medication is dispensed.
8. The duplicate copy of each National Residential Medication Chart must be retained at the dispensing pharmacy for a period of two years from the date the most recent medication was dispensed.

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