

**LCB File No. T014-01**

**ADOPTED TEMPORARY REGULATION OF THE  
STATE BOARD OF PHARMACY**

(Effective February 8, 2001)

**NAC 453.460 Partial filling of prescription for controlled substance. (NRS 453.221, 453.256)**

1. A pharmacist may partially fill a prescription for a controlled substance listed in schedule II:

(a) If the pharmacist is unable to supply the full quantity called for in a written or emergency oral prescription and he makes a notation of the quantity supplied on the face of the written prescription or written record of the emergency oral prescription. The remaining portion of the prescription may be filled within ~~[7 days]~~ 72 hours after the first partial filling. If the remaining portion is not or cannot be filled within the ~~[7-day]~~ 72 hour period, the pharmacist shall notify the prescribing practitioner. No further quantity may be supplied beyond the ~~[7-day]~~ 72 hour period without a new prescription.

(b) For a patient in a facility for long-term care or for a patient who has been diagnosed as having a terminal illness. The pharmacist shall record on the prescription that the patient is a "LTC patient" or "terminally ill." The date of the partial filling, the quantity of the medication that is dispensed, the remaining quantity which is authorized to be dispensed and the signature or initials of the pharmacist must be recorded on the back of the prescription. The total quantity of the controlled substance that is dispensed in all partial fillings must not exceed the total quantity of the controlled substance that is prescribed. A prescription is valid for 60 days after the date of the prescription unless the prescription is terminated earlier by the discontinuance of medication.

2. A pharmacist may partially fill a prescription for a controlled substance listed in schedule III, IV or V if:

(a) Each partial filling is recorded in the same manner as a refilling;

(b) The total quantity dispensed in all partial fillings does not exceed the total quantity prescribed; and

(c) No such filling occurs more than 6 months after the date on which the prescription was issued.

3. As used in this section, "facility for long-term care" means a medical facility that provides 24-hour nursing services.

[Bd. of Pharmacy, § 453.280, eff. 6-26-80]—(NAC A 3-17-92; R021-98, 4-17-98)

*Workshop 10/26/00*

*Public Hearing 1/25/01*

**LCB File No. T014-01**

**INFORMATIONAL STATEMENT**

NAC453.460

February 7, 2001

INFORMATIONAL STATEMENT

The informational statement required by NRS 233B.066 numerically conforms to the subsections of the statute as follows:

1. A DESCRIPTION OF HOW PUBLIC COMMENT WAS SOLICITED, A SUMMARY OF PUBLIC RESPONSE, AND AN EXPLANATION HOW OTHER INTERESTED PERSONS MAY OBTAIN A COPY OF THE SUMMARY.

Public comment was solicited through public notices posted in county courthouses and through mailings to interested parties.

There was no public response expressed relative to this proposed regulation.

2. THE NUMBER OF PERSONS WHO: (A) ATTENDED EACH HEARING; (B) TESTIFIED AT EACH HEARING; AND (C) SUBMITTED TO THE AGENCY WRITTEN STATEMENTS.

There was no public response expressed relative to this proposed regulation.

3. A DESCRIPTION OF HOW COMMENT WAS SOLICITED FROM AFFECTED BUSINESSES, A SUMMARY OF THEIR RESPONSE, AND AN EXPLANATION HOW OTHER INTERESTED PERSONS MAY OBTAIN A COPY OF THE SUMMARY.

Comments were solicited from affected businesses through posting of public notices in the county courthouses, by direct mailings to all interested persons who have requested notices of board of pharmacy meeting agendas and by direct mailings to professional and trade associations.

There was no response from affected businesses relative to this proposed regulation.

4. IF THE REGULATION WAS ADOPTED WITHOUT CHANGING ANY PART OF THE PROPOSED REGULATION, A SUMMARY OF THE REASONS FOR ADOPTING THE REGULATION WITHOUT CHANGE.

The proposed regulation was adopted without change as no testimony was offered.

5. THE ESTIMATED ECONOMIC EFFECT OF THE REGULATION ON THE BUSINESS WHICH IT IS TO REGULATE AND ON THE PUBLIC. THESE MUST BE STATED SEPARATELY, AND IN EACH CASE MUST INCLUDE:

A) BOTH ADVERSE AND BENEFICIAL EFFECTS.

This regulation should have no economic impact on affected businesses or on the public.

B) BOTH IMMEDIATE AND LONG-TERM EFFECTS.

This regulation will have no immediate or long-term economic effects on business or the public.

6. THE ESTIMATED COST TO THE AGENCY FOR ENFORCEMENT OF THE PROPOSED REGULATION.

There will be no cost incurred by the board for enforcement of this regulation.

7. A DESCRIPTION OF ANY REGULATIONS OF OTHER STATE OR GOVERNMENT AGENCIES WHICH THE PROPOSED REGULATION OVERLAPS OR DUPLICATES AND A STATEMENT EXPLAINING WHY THE DUPLICATION OR OVERLAPPING IS NECESSARY. IF THE REGULATION OVERLAPS OR DUPLICATES A FEDERAL REGULATION, THE NAME OF THE REGULATING FEDERAL AGENCY.

The Board of Pharmacy is not aware of any similar regulations of other state or government agencies that the proposed regulation overlaps or duplicates.

8. IF THE REGULATION INCLUDES PROVISIONS WHICH ARE MORE STRINGENT THAN A FEDERAL REGULATION WHICH REGULATES THE SAME ACTIVITY, A SUMMARY OF SUCH PROVISIONS.

The Board of Pharmacy is not aware of any similar regulations of the same activity in which the federal regulation is more stringent.

9. IF THE REGULATION PROVIDES A NEW FEE OR INCREASES AN EXISTING FEE, THE TOTAL ANNUAL AMOUNT THE AGENCY EXPECTS TO COLLECT AND THE MANNER IN WHICH THE MONEY WILL BE USED.

This regulation does not provide a new or increase of fees.