

**PROPOSED REGULATION OF THE
STATE BOARD OF PHARMACY**

LCB FILE NO. R039-21I

**The following document is the initial draft regulation proposed
by the agency submitted on 09/08/2021**

Proposed Regulation of the Nevada State Board of Pharmacy

Workshop – September 2nd, 2021

Explanation – Language in *blue italics* is new; language in *red text* [~~omitted material~~] is language to be omitted, and language in *green text* indicates prior Board-approved amendments that are in the process of being codified.

AUTHORITY: NRS 639.070; NRS 639.XXX

A REGULATION relating to human immunodeficiency virus; establishing a protocol authorizing a pharmacist to prescribe, dispense and administer drugs to prevent the acquisition of human immunodeficiency virus and perform certain laboratory tests; and providing other matters properly relating thereto.

Amendment of Nevada Administrative Code (NAC 639.) The proposed amendments will create a new section to implement the provisions of Senate Bill 325 requiring the Board to adopt regulations that establish requirements to allow a pharmacist to dispense drugs and latex or polyurethane prophylactic device approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus.

NAC 639.5XX is hereby added to read as follows:

Prevention of the Acquisition of Human Immunodeficiency Virus

1. *A pharmacist may prescribe and dispense drugs and latex or polyurethane prophylactic devices approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus.*
2. *A pharmacist prescribing and dispensing medications for treatment for pre-exposure prophylaxis (PrEP) and postexposure prophylaxis (PEP) for HIV-negative persons must:*
 - a) *Complete a two (2) hour education course approved by ACPE or a course offered by an ACPE-accredited pharmacy school regarding the treatment with PrEP and PEP medications to prevent the acquisition of Human Immunodeficiency Virus. A record of the certification must be maintained and readily retrievable during the time of dispensing, and for two (2) years after dispensing treatment has terminated.*
3. *A pharmacist treating with PrEP or PEP must follow current Centers for Disease Control (CDC) guidelines:*
 - a) *For prescribing PrEP, A Clinical Practice Guideline- Preexposure Prophylaxis for the Prevention of HIV Infection in the United States;*
 - b) *For prescribing PEP, Guidelines for Antiretroviral Postexposure After Sexual, Injection Drug Use, or Other Nonoccupational Exposure to HIV.*

4. *Prior to prescribing and dispensing PrEP the pharmacist must complete the following assessment on the patient;*
 - a) *The patient must complete a HIV test;*
 - b) *The patient must complete a renal function test;*
 - c) *The patient must complete a hepatitis B test; and*
 - d) *An assessment of signs and symptoms of acute HIV infection.*

5. *Treatment for PEP should be expedited. Treatment may be initiated prior to a baseline assessment. Prior to continuation of treatment the pharmacist must complete the following assessment on the patient;*
 - a) *The patient must complete a HIV test;*
 - b) *The patient must complete a pregnancy test if the patient is of child bearing age;*
 - c) *The patient must complete a liver function test;*
 - d) *The patient must complete a renal function test;*
 - e) *The patient must complete sexually transmitted infection screening and test;*
 - f) *The patient must complete a hepatitis B test; and*
 - g) *The patient must complete a hepatitis C test.*

6. *A pharmacist prescribing and dispensing PrEP or PEP medications must counsel the patient and provide information on the product dispensed, including, but not limited to:*
 - 1) *Proper administration and storage of the medication;*
 - 2) *Dosage;*
 - 3) *Effectiveness;*
 - 4) *Potential side effects;*
 - 5) *The need to be tested for HIV;*
 - 6) *The need to adhere to the treatment; and*
 - 7) *Information regarding the medications only help prevent and they do not prevent other sexual transmitted diseases.*

7. *A pharmacist dispensing PrEP or PEP must comply with all labeling and record keeping requirements in conformance with all applicable federal and state laws.*

8. *A pharmacist may prescribe and dispense up to a 30 days supply of medication to a patient to continue the treatment in the absence of CDC required laboratory testing if;*
 - 1) *He or she makes a good faith effort to obtain and review the patient's laboratory history;*
 - 2) *Completes an assessment of the patient;*
 - 3) *Reviews potential adverse side effects with the patient; and*
 - 4) *Determines that the benefit of continuing the treatment outweighs the risk of not continuing the treatment.*

9. *Once the pharmacist dispenses the PrEP or PEP treatment, they must have a plan of*

care which includes support and ongoing assessment as required by the CDC.

10. Pharmacists must report communicable diseases as required by NAC 441A.225-441A.255

11. In order to prescribe, a pharmacist prescribing and dispensing PrEP or PEP medications must maintain liability insurance coverage of one million dollar.

Supporting information

NRS 639.007 “Drug” and “medicine” defined. “Drug” and “medicine” mean:

1. Articles recognized in the official United States Pharmacopoeia, the official Homeopathic Pharmacopoeia of the United States, or official National Formulary, or any supplement to any of them;
2. Articles and devices intended for use in the diagnosis, cure, mitigation, treatment or prevention of disease in humans or other animals;
3. Articles, other than food, aspirin and effervescent saline analgesics, intended to affect the structure or any function of the body of humans or other animals;
4. Articles intended for use as a component of any article specified in subsection 1, 2 or 3; and
5. Any controlled substance.

NAC 441A.255 Duty of person to report certain other persons he or she knows or suspects of having communicable disease; content of report. ([NRS 441A.120](#))

1. Any person who reasonably suspects or knows that another person has a communicable disease and knows that the other person is not receiving health care services from a health care provider shall report that person to the health authority having jurisdiction where the person making the report resides. The report must be made in the manner provided in [NAC 441A.225](#).
2. The report must include:
 - (a) The communicable disease or suspected communicable disease.
 - (b) The name, address and, if available, telephone number of the person known or suspected to have a communicable disease.
 - (c) The name, address and telephone number of the person making the report.
 - (d) Any other information requested by the health authority, if available. (Added to NAC by Bd. of Health, eff. 1-24-92; A by R087-08, 1-13-2011)