

## **THE MISUSE OF DRUGS REGULATIONS (Northern Ireland) 2002:**

### **Requirements for Doctors**

Under Regulations 8(1)(a) and 9(1)(a) a practitioner, acting in his capacity as such, may manufacture or compound any drug specified in Schedules 2 to 5.

Under Regulations 8(2)(a), 9(2)(a) and 10(1)(a) and (b) a practitioner, acting in his capacity as such, may possess and supply any drug in Schedules 2 to 5 to anyone who may lawfully possess it.

- under Regulation 4(3)(a) and (b) anyone can possess a Schedule 4 Part II CD which is contained in a medicinal product, or a Schedule 5 CD.

- under Regulation 10(2) "a person may have in his possession any drug specified in Schedule 2, 3 or Part I of Schedule 4 for administration for medical, dental or veterinary purposes in accordance with the directions of a practitioner" provided that where the CD's were received on a doctor's prescription the recipient disclosed whether he was receiving CD prescriptions from another doctor and that he did not make a false statement in order to obtain the supply or prescription.

### **Form of Prescriptions : Regulation 15**

A practitioner's prescription for a Schedule 2 or 3 controlled drug must:

- (i) Be written indelibly, be dated and be signed by the issuer;
- (ii) Be written on a prescription form provided by a PCT or equivalent body for the purposes of private prescribing (except in the case of a health or veterinary prescription);
- (iii) Specify the prescriber identification number (except in the case of a health prescription) of the issuer;
- (iv) Specify the address of the issuer;
- (v) If issued by a dentist bear the words "for dental treatment only" and if issued by a veterinary surgeon or practitioner include a written declaration that the prescription is for an animal/herd under his care;
- (vi) Specify the name and address of the recipient and if issued by a veterinary surgeon or practitioner specify the person to whom the drug is to be delivered;
- (vii) Specify the dose to be taken.

And in the case of a preparation:

- (i) Specify the form and strength of the preparation;
- (ii) Specify either the total quantity or the number of dosage units (e.g. tablets) to be dispensed in words and figures.

In any other case it must specify the total quantity to be dispensed, in words and figures

In the case of a prescription to be dispensed in instalments it must contain a direction specifying the amount of the instalments and the intervals between instalments

### **Record Keeping : Regulations 19 & 20**

A practitioner must keep a register for Schedule 2 controlled drugs he uses in his practice in accordance with the above regulations.

These must be in chronological order, using the following headings:

In respect of drugs obtained: (a) Date supply received;  
(b) Name and address from whom received;  
(c) Quantity received.

In respect of drugs supplied: (a) Date supplied;  
(b) Name/Address of person supplied;  
(c) Details of authority to possess;  
(d) Quantity supplied;  
(e) Person collecting drug and if healthcare professional, their name and address;  
(f) Was proof of identity requested?  
(g) Was proof of identity provided?

Entries in respect of drugs obtained and supplied may be made of the same page or on separate pages in the register.

The register must:

- (a) Use a separate register or part of a register in respect of each class of drug and a separate page in respect of each strength and form of that drug. The head of each page shall specify the class, strength and form;
- (b) Have entries made on the day on which the transaction took place (or if not practicable the next day following that day);
- (c) Contain no cancellation or obliteration of an entry. If amended, the correction shall only be made by a marginal or foot note and shall specify the date on which the correction was made;

- (d) Be completed in ink or otherwise be indelible and if computerised be attributable and capable of being audited;
- (e) Not be used for purposes other than those related to the Regulations;
- (f) Unless authorised by the Department, only be kept at one time in respect of each class of drugs;
- (g) Be kept at the premises to which it relates and, if in a computerised form, be accessible from those premises.

Under Regulation 26 he must on demand of a person authorised in writing by the DHSSPS produce his stock of controlled drugs and register.

### **Obtaining Controlled Drugs by Written Requisition : Regulation 14**

A chemist is normally required to obtain a written requisition before supplying Schedule 2 or 3 controlled drugs to a practitioner for use in his practice.

Where, however, the need is so urgent that the practitioner does not have time to send a requisition in advance the chemist may supply the controlled drugs on an undertaking from the recipient that he will send it in the next 24 hours. The practitioner must then fulfil his undertaking.

The requisition in writing must:

- (a) Be signed by the person to whom the drug is supplied (the "recipient");
- (b) State the name, address and profession or occupation on the recipient;
- (c) Specify the purpose for which the drug is supplied and the total quantity to be supplied;

### **Safe Custody of Controlled Drugs: the Misuse of Drugs (Safe Custody) (Northern Ireland) Regulations 1973**

A practitioner is required under Regulation 5 to keep any of the controlled drugs specified below in, so far as circumstances permit, a locked receptacle.

It has been held (RAO v WYLES 1949) that a locked doctor's bag, but not a locked car, constitutes a locked receptacle.

The CD's to which this requirement applies are:

- Schedule 2 CD's - all drugs except certain liquid non-injectable preparations;

- Schedule 3 CD's - Diethylpropion (Apsiate and Tenuate Dospan), Temazepam, Flunitrazepam and Buprenorphine (Temgesic).

### **Destruction of Controlled Drugs**

Practitioners are obliged to have the destruction of any of the controlled drugs in Schedule 3 (and Schedule 3 if they are the producer of them) witnessed by a person authorised by the Department.

The authorised person may, for the purposes of analysis, take a sample of a drug which is to be destroyed.

The witnessing requirement does not apply to patient's own controlled drugs returned the practitioner for the purposes of destruction.

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