

State-Specific Controlled Substance Requirements

Updated 6/25/23

Biennial Inventory (DEA):	 A physical inventory of all controlled substances on hand must be taken at least every two years. The biennial inventory may be taken on any date, which is within two years of the previous biennial or initial inventory. [21 CFR 1304.11] NOTE: Separate biennial inventories must be completed for schedule II and schedule III-V controlled substances. Biennials may be conducted more frequently than every two years. As a recommendation, conduct your DEA biennial inventory at the same time you conduct your annual inventory for the state. Biennial inventories must be conducted by the DEA registrant, or their designee who has been granted Power of Attorney, along with an authorized witness. Biennial inventories must indicate whether they are conducted at the start or close of business. Alaska follows the same biennial inventory guidelines as the DEA. "A person registered under federal
	law to manufacture, distribute, dispense, or conduct research with controlled substances in the state shall keep records and maintain inventories in conformance with the record keeping and inventory requirements of federal law." Alaska Stat. § 17.30.060
CE:	Veterinarian: 30 hours, every 2 years All 30 hours can be obtained online. 20 CE hours must be in scientific topics. No more than 10 CE hours can be in non-scientific topics. Note: A veterinarian who is applying for license renewal for the first time shall certify having completed 15 contact hours of continuing education for each complete calendar year that the applicant was licensed during the concluding licensing period.
	Veterinarian Tech: 10 General Hours Note: A veterinary technician who is applying for license renewal for the first time shall certify having completed five contact hours of continuing education for each complete calendar year that the applicant was licensed during the concluding licensing period.
	See 12 AAC 68.220 to .240 (pages 12-13) for board approved CE parameters. Alaska does not mandate controlled substance CE at this time.
Compounding:	The veterinarian or veterinary technician shall maintain evidence of compliance with continuing competency requirements for three years from the date the continuing competency was received. "8.2.10 Compounding of a controlled substance by a practitioner is permitted as long as the United
	States Pharmacopoeia (USP) 795 and 797 standards and guidelines are followed." 24 Del. Admin. Code § 8.0 Compounding is any manipulation of a drug beyond that stipulated on the drug label. Veterinary drugs should only be compounded based on a licensed veterinarian's prescription, and to meet the medical needs of a specific patient. Manipulation might include mixing, diluting, concentrating, flavoring, or changing a drug's dosage form. Examples of compounding include: • Mixing two injectable drugs in the same syringe • Creating an oral suspension from crushed tablets or an injectable solution
	 Adding flavoring to a commercially available drug Creating a transdermal gel for a drug typically taken through other routes



	Mixing two solutions for instilling into the ear
	AK Compounding:
	 A pharmacist may compound drugs in limited quantities before receiving a valid prescription drug order if the pharmacist has a historical basis of valid prescription drug orders generated solely within an established relationship between the pharmacist, a patient, and a prescribing practitioner for the amount of drugs compounded. Compounding drugs in an amount above that for which there is a historical basis is considered manufacturing. (b) Compounding includes the preparation (1) according to a prescription drug order of drugs or devices that are not commercially available; (2) of commercially available products from bulk when the prescribing practitioner has prescribed the compounded product on a per prescription basis and the patient has
	been made aware that the compounded product will be prepared by the pharmacist.
	A pharmacist may not offer compounded drug products to prescribing practitioners, pharmacists, or pharmacies for resale except in the course of professional practice for a prescribing practitioner to administer to an individual patient. The distribution of inordinate amounts of compounded products without a relationship between the pharmacist and the prescribing practitioner and patient is considered manufacturing. Alaska Veterinary Statutes & Regulations (May 2023)
Dispensing:	Alaska Statute (AS) 11.71.900(8) defines "dispenser" as a practitioner who dispenses prescriptions to an
	ultimate user. State holiday and weekends are exempt from daily reporting. Reports for those days must
	be submitted the following business day.
	12 AAC 52.480. LABELING. One or more labels containing the following information shall be affixed to every container in which a prescription drug order is dispensed: (1) name, address, and phone number of the dispensing pharmacy; (2) unique identification number of the prescription drug order; (3) date the prescription drug order is dispensed;
	(4) initials, which may be handwritten, of the dispensing pharmacist or pharmacist intern;
	(5) name of the prescribing practitioner;(6) name of the patient or, if the drug was prescribed for an animal, the species of animal and the name of the owner;(7) directions for use;(8) quantity dispensed;
	(8) quantity dispensed; (9) appropriate ancillary instructions or cautions;
	(10) if the prescription drug order is for a schedule II-V controlled substance, the statement, "Caution: Federal law prohibits the transfer of this drug to any person other than the patient for whom it was prescribed";
	(11) the name and strength of the actual drug product dispensed, unless otherwise directed by the prescribing practitioner;
	(12) the accepted generic drug name and strength of the drug dispensed; if the drug product dispensed has multiple ingredients, the pharmacist shall provide this information in writing to the patient or the patient's agent. Alaska Veterinary Statutes & Regulations (May 2023)
Diversion Reporting:	If a DEA Form 106 is completed, "Report of Theft or Loss of Controlled Substances," the pharmacist-in-
	charge shall also send a copy of the completed form to the board.
	Alaska Veterinary Statutes & Regulations (May 2023)
Euthanasia:	Euthanasia may be performed by a:
	Licensed veterinarian
	Peace Officer Public or Private Contactions
	Public or Private Custodian
	Certified euthanasia technician



Non-veterinary ownership of a veterinary facility is inconclusive at this time.
All power of attorney documents in Alaska must be signed in the presence of a notary public or to (2) witnesses.
"prescription drug order" means a lawful order of a practitioner for a drug or device for a specific patient.
Sec. 08.98.245. Maximum dosage for opioid prescriptions. (a) A veterinarian may not issue an initial prescription for an opioid that exceeds a seven-day supply to the owner of an animal patient for outpatient use. (b) Notwithstanding (a) of this section, a veterinarian may issue a prescription for an opioid that exceeds a seven-day supply to the owner of an animal if the veterinarian determines that more than a seven-day supply of an opioid is necessary (1) to treat the animal's medical condition or for chronic pain management; the veterinarian may write a prescription for an opioid for the quantity needed to treat the animal's medical condition or chronic pain; the veterinarian shall document in the animal's medical record the condition triggering the prescription of an opioid in a quantity that exceeds a seven-day supply and indicate that a nonopioid alternative was not appropriate to address the medical condition; or (2) for an owner who is unable to access a veterinarian or pharmacist within the time necessary for a refill of the seven-day supply because of a logistical or travel barrier; the veterinarian may write a prescription for an opioid for the quantity needed to treat the animal for the time that the owner is unable to access a veterinarian or pharmacist; the veterinarian shall document in the animal's medical record the reason for the prescription of an opioid in a quantity that exceeds a seven-day supply and indicate that a nonopioid alternative was not appropriate to address the medical condition.
12 AAC 52.470. REFILLS. Each time a prescription drug order refill is dispensed, the pharmacist or pharmacist intern shall record the quantity and date of the dispensing. (d) A pharmacist or pharmacist intern may dispense any quantity of a prescription drug order so long as the (1) total quantity of dosage units dispensed does not exceed the total quantity of dosage units authorized by the prescriber on the prescription, including refills; and (2) drug is not a federal or state scheduled controlled substance.
(e) To indicate that an increased supply may not be dispensed under this section, a prescriber may indicate "no change to quantity", or words of similar meaning, on the prescription drug order. (f) Nothing in this section requires a health care service plan, health insurer, workers' compensation insurance
plan, pharmacy benefits manager, or any other person or entity, including a state program or state employer, to provide coverage for a drug in a manner inconsistent with a beneficiary's plan benefit. (g) Under (d) of this section, if the total quantity of a drug or device to dispense on an existing, chronic, non-controlled substance prescription drug order has been exhausted and the pharmacist is unable to reach the practitioner, a pharmacist or pharmacist intern may continue to dispense a quantity not to exceed a 120-day supply. In this section, (1) "existing" means the pharmacy has record of a previous prescription drug order or the pharmacist can validate the prescription drug order from another pharmacy or patient labelled product; (2) "chronic" means a drug that the patient takes regularly, for greater than three months. (h) Under (g) of this section, the pharmacist must



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and (2) document "continuation of therapy", "COT", or words of similar meaning on the prescription drug order;

- (3) file and maintain the prescription in accordance with 12 AAC 52.450.
- (i) A pharmacist may not dispense a refill of a prescription drug order for a noncontrolled substance after one year from the date of issue of the original prescription drug order.

E-prescribing: Alaska **does not** have an e-prescribing mandate.

12 AAC 52.490. PRESCRIPTIONS BY ELECTRONIC TRANSMISSION. (a) Legend drug, device, and controlled substance prescriptions may be transmitted electronically under this section, consistent with state and federal laws. A pharmacist or pharmacist intern may dispense a prescription transmitted electronically under this section only if the prescribing practitioner includes the following information on the prescription before it is transmitted:

- (1) name, address, and telephone number of the prescribing practitioner;
- (2) electronic signature or manual signature of the prescribing practitioner;
- (3) the information required in 12 AAC 52.460(a)(1)and
- (4) any other information required by federal law.
- (b) A pharmacist may dispense a prescription that has been received electronically.
- (c) The system for electronic transmission of prescriptions must address the following:
 - (1) patient's choice of pharmacy; the system may not restrict the patient's choice of pharmacy;
 - (2) security of the system; the system must have security and system safeguards designed to prevent and detect unauthorized access, modification, or manipulation of prescription information; the system must include
- (A) documented formal procedures for selecting and executing security safeguards;
- (B) physical safeguards to protect computer systems and other applicable equipment from an unauthorized access, modification, or manipulation of the information;
- (C) processes to protect, control, and audit access to confidential patient information; and
- (D) processes to prevent unauthorized access to the prescription information when transmitted electronically;

Alaska Veterinary Statutes & Regulations (May 2023)

PDMP:

The Alaska Prescription Drug Monitoring Program (PDMP) is Alaska's solution for monitoring Schedule II-IV controlled substances dispensed in Alaska.

Veterinarians are not exempt. Mandatory Registration with the Alaska Prescription Drug Monitoring Program (PDMP) applies to actively licensed practitioners who hold a federal Drug Enforcement Administration registration number. (AS 08.98.050(a)(10)).

Registration instructions & forms

<u>Use</u>: Providers must review a patient's prescription history prior to prescribing a federally scheduled II – III controlled substance.

Prescriptions for federally scheduled II, III, and IV controlled substances must be **reported daily**. This applies to pharmacists and **providers who directly dispense**. State holiday and weekends are exempt from daily reporting. Reports for those days must be submitted the following business day.

<u>Exemptions</u>: Exemptions for conducting a review of patient prescription history and/or reporting prescription data apply if:

Dispensing to a patient for an outpatient supply of 24-hours or less at a hospital with an inpatient pharmacy for use after discharge (exempt by AS 17.30.200(t)(2)(A)).





	practicing or offering to practice as a veterinary technician without being employed and supervised by a licensed veterinarian is prohibited. Alaska Veterinary Statutes & Regulations (May 2023)
Telemedicine:	No existing laws. Where telemedicine occurs is not defined.
Veterinary Professional	The renewal period is every two years on December 31 st.
License:	December 31, 2024 is the next license renewal deadline in Alaska.
VCPR:	Alaska does not define VCPR in its Practice Act. However, to be conservative, utilize the general guideline of establishing VCPR with in-person visits at least annually.
	12 AAC 68.215. VETERINARIAN-CLIENT-PATIENT RELATIONSHIP. (a) A veterinarian-client-patient relationship exists, and a licensed veterinarian may engage in the practice of veterinary medicine for the patient, if the veterinarian (1) conducts an initial physical meeting with the client and patient, at which the veterinarian
	(A) performs a physical examination on the patient; or(B) is personally acquainted with the keeping and care of the patient through medically appropriate
	visits to the premises where the patient is maintained; (2) has sufficient knowledge of the patient to initiate at least a general or preliminary diagnosis of the patient's medical conditions;
	(3) has assumed responsibility for making clinical judgments for the health of the patient and the need for medical therapy, and has instructed the client on a course of therapy appropriate to the circumstance;
	 (4) maintains records for the patient; and (5) provides oversight of treatment and is readily available to provide, or has provided for, follow-up medical care in the event of adverse reactions or failure of the treatment regimen. (b) Once a veterinarian-client-patient relationship is established under (a) of this section, it may be maintained by electronic or telephonic means during the 12 months that follow the initial examination or premises visit. Not later than 12 months after the initial physical examination or medically appropriate visit of the premises, the licensed veterinarian, client, and patient must meet for another physical examination or premises visit. Each additional physical examination or premises visit must occur not later than 12 months after the prior physical exam or premises visit for the veterinarian-client-patient relationship to continue.
	 (c) The licensed veterinarian or the client may decline or discontinue a veterinarian-client-patient relationship. (d) A licensed veterinarian who in good faith engages in the practice of veterinary medicine by rendering or attempting to render emergency care to a patient when a client cannot be identified, or
	where a veterinarian-client- patient relationship is not established, is not subject to discipline based solely on the veterinarian's inability to establish a veterinarian-client-patient relationship. (e) Notwithstanding the requirements in (a)(1) of this section for an initial physical meeting, a veterinarian licensed in this state may conduct an initial evaluation of a patient through electronic or telephonic means only in remote regions of this state where there is no locally available veterinarian if (1) travel for a physical examination or premises visit with the client is impossible; (2) the veterinarian requests that, when reasonably achievable, the patient be presented for an inperson examination or that the veterinarian conduct a medically appropriate visit to the premises where the patient is kept; and (3) the veterinarian provides the client with the veterinarian's identity and clinic address.
	(f) A veterinarian providing care for patients under (e) of this section does not establish a veterinarian- client-patient relationship without having met the requirements of (a)(2) - (5) and (b) of this section. Alaska Veterinary Statutes & Regulations (May 2023)



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Information and Resources

FEDERAL:

Drug Enforcement Administration, Seattle Division 300 5th Avenue Seattle, WA 98104

Phone: (206) 553-5443

Anchorage Office

1630 E Tudor Road Anchorage, AK 99507 Phone: (907) 271-5033

Federal Law: <u>www.deadiversion.usdoj.gov</u> Controlled Substances Act: <u>21 USC 801 – 904</u>

Code of Federal Regulations: 21 CFR Part 1300 – 1399

NDC drug: www.fda.gov/Drugs/DevelopmentApprovalProcess/UCM070829 Diversion Control Division: https://www.deadiversion.usdoj.gov/schedules/

STATE:

Board of Veterinary Examiners: <u>website</u>
Alaska Board of Pharmacy: <u>website</u>