

Biennial Inventory (CT):	A biennial physical inventory of all controlled substances must be completed and documented biennially within four days of the first day of May of the calendar yea r, except that a registrant may change this date provided the general physical inventory date of such registrant is not more than six months from the biennial inventory date, and shall be made available to the commissioner or authorized agents. <u>CT Gen Stat § 21a-254 (2018)(h)</u>
	Records of controlled substance inventories must be kept on file for <u>three years</u> . <u>Conn. Gen. Stat § 21a-</u> <u>254(f)</u> The biennial must be documented separately from inventory counts of other items held in the facility
	(i.e. rubber gloves, etc.). <u>CT Gen Stat § 21a-254(h)</u>
Biennial Inventory (DEA):	A physical inventory of all controlled substances on hand must be taken at least every <u>two years</u> . The biennial inventory may be taken on any date, which is within two years of the previous biennial or initial inventory. [<u>21 CFR 1304.11</u>] 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 state biennial inventory. 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.
CE:	Veterinarians: A licensed veterinarian shall earn a minimum of 24 contact hours of qualifying continuing education during the 2 year period prior to the first date of license renewal after July 1, 2011. Thereafter, each licensed veterinarian shall complete 24 contact hours every 2 years. One contact hour means a minimum of fifty minutes of continuing education activity.
	<u>Veterinary Technicians</u> : required to complete a total of twelve (12) continuing education units (CEU) per calendar year in order to maintain Certified Veterinary Technician (CVT) status through the Connecticut Veterinary Technician Association (CTVTA). Up to one-quarter of the annual CEU requirement (3.0 CEUs) may be earned as an instructor. Continuing Education is defined as education provided for adults outside of the formal education system, consisting of seminars, courses, lectures, or labs that bring participants up to date in a particular area of knowledge or set of skills.
	Each licensee shall retain records of attendance that demonstrate compliance with the continuing education requirements, and shall retain such documentation for a minimum of three years following the year in which the continuing education activities were completed.
	Upon the request of the Department, a licensee shall submit records or certificates of completion of continuing medical education within forty-five days of such request. A licensee, who fails to comply with the continuing education requirements, including failure to maintain proof of course completion, is subject to disciplinary action. https://www.ctvta.org/ce-guidelines
	CT does not currently require controlled substance CE
	https://portal.ct.gov/DPH/Practitioner-LicensingInvestigations/Vet/Continuing-Education



Compounding:	"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." <u>24 Del. Admin. Code</u> <u>§ 8.0</u>
	<u>Compounding</u> is <u>any manipulation</u> 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
	https://www.avma.org/resources-tools/animal-health-and-welfare/animal- health/compounding/compounding-faq-veterinarians
	CT Compounding Laws: in June 2018 Connecticut mandated compounded medications for veterinary in office use to be obtained from a properly licensed outsourced facility.
	Compounded pharmaceuticals intended for in office use, whether for one or several animal patients, must be received from a properly licensed wholesaler / manufacturer or a pharmacy that is licensed as
	a manufacturer (also known as a 503B compounding pharmacy). It is important to ensure that you are ordering from the correct compounding pharmacy: one that is allowed to dispense non-patient-specific compounded pharmaceuticals rather than a licensed pharmacy that may only dispense patient-specific compounded pharmaceuticals. <u>https://portal.ct.gov/-//media/DCP/drug_control/pdf/Veterinary-Medicine-6-2018.pdf</u>
	State regulations allow for non-sterile, non-patient specific compounded medications to be provided to veterinarians by both 503A (non-sterile) Pharmacies (thirty day supply only) and 503B (sterile) Outsourcing Facilities.
	503B Outsourcing Facilities may provide sterile (as in injectables), non-patient specific, compounded medication to veterinarians as well as quantities greater than 30 days worth of non-patient specific non-sterile medications.
	The CT Department of Consumer Protection has provided the following link for a list of 503b facilities <u>https://portal.ct.gov/DCP/Drug-Control-Division/Drug-Control/Sterile-Products</u>
	<u>Compounding Disposal</u> : If you have patient-specific compounds that need to be disposed, you may dispose of these drugs by contacting a reverse distributor or send an email to dcp.drugdestruction@ct.gov requesting an agent to dispose of the drugs on your behalf.
	How do I report a compound drug? If using the universal claim form, click the Compound checkbox in the Drug Information section of the page, complete the required fields for the first drug ingredient, then click Add New to add additional drug ingredients.
	 DSP07 (Product ID Qualifier) - Enter '06' to indicate Compound DSP08 (Product ID) - Enter the NDC number as eleven "9"s (99999999999) > CDI fields will be required



	 4. CDI (Compound Drug Ingredient) Fields- If more than one ingredient is for a prescription monitoring program reporting drug, then this would be incremented by one for each compound ingredient being reported. CDI01 (Compound Drug Ingredient Sequence Number) - First reportable ingredient is 1; each 				
	additional reportable ingredient is incremented by 1.				
	 CDI02 (Product ID Qualifier) - Enter '01' to indicate NDC 				
	 CDI03 (Product ID) - Enter NDC for ingredient being reported including leading zeros without 				
	punctuation				
	 CDI04 (Compound Ingredient Quantity) - Metric decimal quantity of the ingredient identified in CDI03. 				
	 CDI05 (Compound Drug Dosage Units Code) - Identifies the unit of measure for the quantity dispensed in CDI04. ('01' Each (used to report as package); '02' Milliliters (ml) (for liters, adjust to the decimal milliliter equivalent); '03' Grams (gm) (for milligrams, adjust to the decimal gram equivalent) 				
CT Prescription	In CT all prescribers in possession of a Controlled Substance Practitioner (CSP) registration, are <u>required</u>				
Monitoring and	to register as a user with the Connecticut Prescription Monitoring and Reporting System (CPMRS):				
Reporting System (CPMRS):	to register as a user with the Connecticut Prescription Monitoring and Reporting System (CPMRS): https://connecticut.pmpaware.net/login				
. ,	CPMRS Usage Requirements:				
	The prescribing practitioner or the prescribing practitioner's authorized agent must:				
	 Review a patient's records in the CPMRS when prescribing greater than a 72 hour supply of any 				
	schedule II-V controlled substance to any patient; https://connecticut.pmpaware.net				
	 Review a patient's records in the CPMRS at least once every 90 days when prescribing 				
	controlled substances other than schedule V non-narcotic controlled substances for prolonged				
	treatment; and,				
	 Review a patient's records in the CPMRS at least once per year when prescribing a schedule V non-narcotic controlled substance for continuous or prolonged treatment of any patient. 				
	A prescribing practitioner may prescribe greater than a 72 hour supply of a controlled substance to a patient during the time that the CPMRS is down, as long as a review of the patient's records in the CPMRS occurs not more than 24 hours after regaining access to the CPMRS.				
	Dispensing data: Any prescribers who dispense controlled substances from their practice, or facility, etc., will be required to upload dispensing information into the CPMRS Data website https://pmpclearinghouse.net				
	<u>CPMRS Registration:</u> Prescriber-authorized veterinary technicians and office personnel may register for a CPMRS account under the role of 'Prescriber Delegate - Licensed' or 'Prescriber's Delegate Unlicensed.' Visit the <u>How to Register</u> webpage for more information.				
	If you do not dispense any prescriptions you do not need to report to the PMP Clearinghouse.				
	<u>Report submission:</u> Veterinary facilities are not subjected to daily reporting and will continue to submit dispensation reports, at a minimum, weekly.				
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	Non-controlled substances mandated to be reported to the CPMRS: Gabapentin				



	Public Act 21-182. Effective June 28, 2021, any veterinarian, licensed under chapter 384, are <u>exempt</u> from the reporting requirement for the dispensation of insulin drugs, glucagon drugs, diabetes devices, and diabetic ketoacidosis devices for animal patients.			
CT CSP Registration:	CT requires any prescribing practitioner authorized in their professional practice act to prescribe, administer and dispense controlled drugs must obtain a Controlled Substance Practitioner (CSP) registration. This registration is a <u>prerequisite</u> for DEA registration and may be obtained from the Connecticut Department of Consumer Protection. <u>https://portal.ct.gov/DPH/Practitioner-Licensing-Investigations/PLIS/Controlled-Substance-Registration</u>			
	All CSP registrations <u>expire biennially on February 28th of every odd-numbered year</u> . Renewal fee: \$40			
	https://portal.ct.gov/DCP/License-Services-Division/All-License-Applications/Controlled-Substance- Practitioner-Registration			
	Address Change for a Department of Consumer Protection (DCP) License, Permit or Registration: Go to https://elicense.ct.gov			
CT State Veterinary Professional License:	Renew every <u>two years</u> Fee: \$570			
	" <u>Registration period</u> " means the one-year period for which a license renewed in accordance with section 19a-88 is current and valid.			
Dispensing:	Dispense means to process a drug or device for delivery or for administration to a patient pursuant to a prescription.			
	Dispense does not include delivering a drug or device to a patient or administering the drug or device to a patient.			
	Prescribing practitioners may dispense drugs but shall do so personally and <u>cannot delegate</u> any part of the dispensing process.			
	Any controlled substance dispensed by a practitioner must be uploaded to the CT Prescription Monitoring and Reporting System (CPMRS) within one business day of dispensing.*			
	 <u>Schedule II</u> controlled substance prescriptions cannot be refilled. <u>Schedule III and IV</u> controlled substance prescriptions may be refilled up to five times in six months as authorized by the prescribing practitioner. <u>Schedule V</u> controlled substance prescriptions may be refilled as authorized by the prescribing practitioner. 			
	CT dispensing and prescribing regulations			
Diversion Reporting	DEA: Any theft or significant loss of a controlled substance must be reported in writing to the field division office of the DEA within one business day of the discovery of such loss or theft. Completion of a DEA 106 form regarding the loss or theft is also required.			
	CT : b) Reporting of loss, theft, or unauthorized destruction of controlled substances. Any loss, theft, or unauthorized destruction of any controlled substance(s) must be reported by a registrant within 72 hours of discovery of any such occurrence to the Commissioner of Consumer Protection as follows :			



	 (1) Where through breakage of the container or other accident, otherwise than in transit, controlled substance(s) are lost or destroyed, the registrant shall make a signed statement as to the kinds and quantities of controlled substance(s) lost or destroyed and the circumstances involved. The statement shall be forwarded to the Commissioner of Consumer Protection and <u>a</u> <u>copy retained by the registrant.</u> (2) Where controlled substance(s) are lost by theft or otherwise lost or destroyed in transit, the consignee, and the consignor if within this state, shall forward to the Commissioner of Consumer Protection a signed statement which details the facts, includes an accurate listing of the controlled substance(s) stolen, lost, or destroyed and specifies that the local authorities were notified. A copy of the statement shall be retained by the registrant. Conn. Agencies Regs. § 21a-262-3 			
Euthanasia:	Euthanasia is considered the practice of veterinary medicine and no person may practice veterinary medicine without a license in CT. A representative at the CTVMA advised that the <u>Connecticut</u> <u>Veterinary Practice Act</u> prohibits any practice of medicine by non-DVMs, even under supervision.			
Ownership:	https://ctvet.org/vets/faqs Non-veterinary ownership of a veterinary facility is inconclusive at this time. <u>The Connecticut Act does not</u> explicitly prohibit the ownership of a veterinary practice by a non-veterinarian.			
Prescriptions:	 Prescribing: Prescribe means to order or designate a remedy or any preparation for a patient under the care of a practitioner. Practitioners who prescribe controlled substances in the State of Connecticut must hold an active DEA registration. Controlled Substance Prescribing for Self and Family: A prescribing practitioner shall not prescribe, dispense, or administer schedule II - IV controlled substances to a member of their immediate family or to themselves except in an emergency pursuant to CGS Section 21a-252. In the case of an emergency, a practitioner may not prescribe more than a 72 hour supply of medication, and may only prescribe if there is no other qualified practitioner available. Any emergency prescribing, dispensing, or administering must be documented, along with information about the emergency itself. Connecticut law requires that all prescriptions for animals shall include the name and address of the owner and the species of the animal. Veterinarians may not prescribe drugs for an animal in the name of the Veterinary Practice Act or Rules. However, when veterinary prescription drugs are dispensed to companion animal owners, the AVMA Guidelines for Veterinary Prescription Drugs recommend that such drugs be placed in child-resistant containers. Medication provided under a patient-specific prescription belongs to the patient that is identified on the prescription only. Any unused medication shall not be used for other patients. Prescription Label Requirements: All prescriptions for controlled drugs shall include: the name and address of the patient, or the name and address of the owner of an animal and the species of the animal the name and address of the patient, or the name and address of the owner of an animal and the species of the animal 			



	5. the name and address of the prescribing practitioner					
	 the name and address of the prescribing practitioner the date of issuance 					
	 The date of issource the Federal Registration number of the practitioner. 					
	No prescription blank containing a prescription for a schedule II substance shall contain more than one					
	prescription.					
	No prescription or order for a controlled substance issued by a practitioner to an inanimate object or thing shall be considered a valid prescription within the meaning of this chapter. <u>Connecticut General Statutes 21a-249(a)</u>					
Power of Attorney Notary:	Under Connecticut law, while <u>a power of attorney is not required to be notarized in order to be</u> <u>considered enforceable it is strongly recommended</u> . Under Connecticut law, when you sign your PC in the presence of a notary public, you signature is presumed to be genuine—meaning your POA is more ironclad.					
Recordkeeping:	<u>Controlled Substances</u> : Connecticut law governing record-keeping requirements is more restrictive than federal law. While the DEA requires two years of controlled substance records, CT state regulations require records for controlled substances to be kept for a period of <u>three years</u> from the date of the transaction recorded. <u>Conn. Gen. Stat § 21a-254(h</u>).					
	Under Connecticut law, as a condition to controlled substance licensure, a practitioner must keep records of medical evaluations of patients and all controlled substances that the practitioner dispensed, administered or prescribed.					
	Living Patients: CT requires that veterinarians keep living patient records for <u>seven years</u> from the date of the last treatment. <u>Conn. Regs. § 19a-14-42</u>					
	<u>Deceased Patients</u> : CT requires that veterinarians keep deceased patient records for <u>three years</u> following the death of a patient. <u>Conn. Regs. § 19a-14-42</u>					
	<u>Records Removed From Facility</u> : Whenever any record is removed by a person authorized to enforce the provisions of this chapter or the provisions of the state food, drug and cosmetic laws for the purpose of investigation or as evidence, such person shall <u>tender a receipt in lieu thereof and the receipt shall</u> <u>be kept for a period of three years</u> .					
State Scheduled	N/A					
Controlled Substances:						
Supervision:	The CT VMA advised that the Connecticut Veterinary Practice Act <u>prohibits</u> any practice of medicine by non-DVMs, even under supervision.					
	All programs of disease control and prevention, euthanasia and veterinary care shall be established and maintained under the supervision and assistance of a Doctor of Veterinary Medicine who shall assume direct responsibility for meeting the requirements of these regulations by the Connecticut State Board of Veterinary Registration and Examination. Each animal shall be observed daily by the veterinarian in charge or by a qualified person under his direct supervision (<u>Sec. 20-196-13(a)</u>).					
Telemedicine:	No current laws. Where telemedicine occurs is not defined.					
Veterinary Client Patient Relationship (VCPR):	Connecticut 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.					
	 The <u>veterinarian-client-patient relationship</u> (VCPR) is the basis for interaction among veterinarians, their clients, and their patients. A VCPR means that all of the following are required: 1. The veterinarian has assumed the responsibility for making clinical judgments regarding the health of the patient and the client has agreed to follow the veterinarians' instructions. 					



State-Specific Controlled Substance Requirements

2.	The veterinarian has sufficient knowledge of the patient to initiate at least a general or
	preliminary diagnosis of the medical condition of the patient. This means that the veterinarian is
	personally acquainted with the keeping and care of the patient by virtue of a timely
	examination of the patient by the veterinarian or medically appropriate and timely visits by the
	veterinarian to the operation where the patient is managed.
3.	The veterinarian is readily available for follow-up evaluation or has arranged for the following:
	veterinary emergency coverage, and continuing care and treatment.
4.	The veterinarian provides oversight of treatment, compliance, and outcome.
5.	Patient records are maintained (C.G.S.A. §20-202).

Information and Resources

FEDERAL:

Drug Enforcement Administration, New England Division 15 New Sudbury Street, Room E-400 Boston, MA 02203 Phone: (617) 557-2100

Bridgeport Office: (203) 579-5591 Hartford Office: (860) 257-2600 New Haven Office: (203) 497-5200

Federal Law: <u>www.deadiversion.usdoj.gov</u> Controlled Substances Act: <u>21 USC 801 – 904</u> Code of Federal Regulations: <u>21 CFR Part 1300 – 1399</u> NDC drug: <u>www.fda.gov/Drugs/DevelopmentApprovalProcess/UCM070829</u> Diversion Control Division: <u>https://www.deadiversion.usdoj.gov/schedules/</u>

STATE:

Connecticut State Board of Veterinary Medicine 410 Capitol Avenue, MS #13 PHO P.O. Box 340308 Hartford, CT 06134-0308 Phone: (860) 509-7648 Website: <u>https://portal.ct.gov/DPH/Public-Health-Hearing-Office/Board-of-Veterinary-Medicine</u>

Connecticut State Board of Pharmacy 450 Columbus Blvd Hartford, CT 06103 Phone: (860) 713-6070 Website: <u>https://portal.ct.gov/DCP/Drug-Control-Division/Commission-of-Pharmacy</u>



State-Specific Controlled Substance Requirements

Department of Consumer Protection Drug Control Division Email: dcp.drugcontrol@ct.gov Phone: (860) 713-6065 Website: <u>ct.gov/dcp/drugcontrol</u>