Requirements for the prescribing of Schedule 4 and Schedule 8 Medicines in Western Australia

Pharmaceutical Services Branch

June 2008
Key Points

Prescribing Schedule 4 medicines (S4s)

- S4 prescriptions are valid for 12 months.
- An S4 prescription is valid if the following information is provided:
  - name and address of the prescriber
  - name and address of the patient
  - name, form, strength and quantity of the medicine
  - directions for use, if necessary
  - date on which it is written
  - maximum number of times it may be repeated, if any, and the intervals at which it may be repeated (where applicable)
  - signature of the prescriber.

- Computer and handwritten prescriptions must be signed by the practitioners in their own handwriting.

- Prescribers requesting emergency S4 supplies by verbal order must within 24 hours send a valid written prescription to the healthcare professional whom instructions were given.

Prescribing Schedule 8 medicines (S8s)

- S8 prescriptions are valid for 6 months.
- A S8 prescription is valid if the following information is provided:
  - full name and address of the prescriber
  - date it was written
  - full name, full address and date of birth of the patient
  - description and quantity of the medicine of addiction to be dispensed
  - precise directions for use
  - number of repeats (if any) and intervals at which they may be dispensed
  - signature of the prescriber.

- For computer generated S8 prescriptions, the information highlighted in bold italics (above) must be written in the doctors own handwriting.

- Only one S8 opiate medicine can be written on the one prescription page.

- No other medicine (including S4s) can be written on a S8 prescription page.

- Authorisation from the Chief Executive Officer of Health (CEO) is required for the prescribing of S8s:
  - to a patient notified as a addict
  - for a period longer than 60 days (in any 12 months).

- Prescribers requesting emergency S8 supplies by verbal order must within 24 hours send a valid written prescription to the healthcare professional to whom instructions were given.

- S8 prescriptions must be written by prescribers registered in WA.

- S8 prescriptions can not be written for the self use of the prescriber.

- S8 prescriptions should not be written for the prescribers immediate family.
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Schedule 4 (prescription only) medicines and Schedule 8 (drugs of addiction) are regulated by the Poisons Act 1964 and the Poisons Regulations 1965 (State legislation).

The information in this document relates to the Western Australian legislation. Requirements for Pharmaceutical Benefits Scheme (PBS) subsidy of medicines can be found in the Schedule of Pharmaceutical Benefit.

In this document “practitioner” refers to: medical practitioners, dentists, veterinary surgeons and nurse practitioners.

Schedule 4 Medicines

Schedule 4 medicines are defined by the Poisons Act as:

“Poisons that should, in the public interest, be restricted to prescription or supply by a medical practitioner, dentist, veterinary surgeon, or nurse practitioner authorised under section 23(2)(e), together with substances or preparations intended for therapeutic use, the safety or efficacy of which requires further evaluation.”

In this section, information is provided on:

- writing a valid prescription for a Schedule 4 (S4) medicine;
- writing a prescription in an emergency;
- prescribing restrictions for S4 medicines;
- purchase, supply, storage and recording and disposal of S4s including Doctors Bags; and
- patients travelling overseas.

1. Schedule 4 Prescriptions

1.1. Writing a valid prescription for a S4 medicine

A prescription written for a S4 medicine must be written in a clearly legible and indelible manner (in ink) and contain the following information:

- name and address of the prescriber;
- name and address of the patient;
- name, form, strength and quantity of the medicine;
- directions for use, if necessary;
- date on which it is written;
- maximum number of times it may be repeated, if any, and the intervals at which it may be repeated (where applicable); and
- signature of the prescriber.

If a prescription contains an unusual dose the prescriber shall indicate that such a dose is intended by underlining that part of the prescription and initialling the same in the margin.

Where a prescription is generated by a computer, the prescription should contain the information above, and must be signed by the practitioner in their own handwriting. Only the prescriber can generate a prescription on a computer.

Schedule 4 prescriptions are valid for 12 months.

A prescription written by a dentist shall be for dental purposes only and shall be marked as such. A prescription written by a veterinary surgeon shall be for veterinary use only and shall be marked “For veterinary use only” or “For animal treatment only”.

In this section, information is provided on:

- writing a valid prescription for a Schedule 4 (S4) medicine;
- writing a prescription in an emergency;
- prescribing restrictions for S4 medicines;
- purchase, supply, storage and recording and disposal of S4s including Doctors Bags; and
- patients travelling overseas.
1.2. Writing prescriptions in an emergency

A practitioner can, in an emergency, direct the dispensing of a S4 medicine verbally or by telephone.

If this is done, the prescriber must within the following 24 hours:

- write a valid prescription for the verbal order;
- mark the prescription to show that it has been given as a confirmation of verbal instructions; and
- send the prescription to the person to whom the instructions were given.

These requirements apply equally to community pharmacies and in-patient medication charts. Hospitals may have additional requirements set by hospital policy.

2. Prescribing Restrictions for S4 Medicines

The prescribing of certain S4 medicines is restricted to medical specialists and in some instances, medical practitioners authorised in writing by the Chief Executive Officer of Health (Regulations 38C to 38P).

Current restrictions are:

- Gynaecologists and obstetricians only can prescribe Clomiphene, Prostaglandins, Follicle Stimulating Hormone, Luteinising Hormone;
- Dermatologists and physicians only can prescribe: Etretinate, Acitretin, Isotretinoin, Thalidomide;
- Physicians only can prescribe: Prostaglandins, Bosentan;
- Psychiatrists only can prescribe: Clozapine; and
- Physicians, rheumatologists, immunologists, endocrinologists and geriatricians only can prescribe: Teriparatide.

Appendix 1 details the restrictions on the prescribing of these S4 medicines.

3. Purchase, Supply, Storage, Recording and Disposal of S4 medicines

Practitioners can purchase Schedule 4 medicines in their own name for use as part of their professional practice, eg. for their Doctor’s Bag supplies. If a practitioner wishes to use a corporate structure to purchase medicines or is part of a multi-practitioner practice that uses combined supplies, a Poisons Permit issued under the Poisons Act 1964 is required.

3.1. Purchase of S4 medicines by individual practitioners

Practitioners who purchase S4 medicines for use at their practice are responsible for the storage and record keeping associated with the use of these medicines. To purchase S4 medicines, the practitioner must provide the pharmacy with a written and signed request on letterhead.

Records of the use of S4 medicines are required to be kept for two years. These records may be patients’ medical notes.

3.1.1. Doctors Bag Supplies

If a medical practitioner obtains S4 medicines, as part of the Pharmaceutical Benefits ‘Doctors Bag’ supply, these cannot be amalgamated with supplies from other practitioners in the practice, or with supplies of S4 medicines obtained through a Poisons Permit.

3.2. Purchase of S4 medicines using a Poison Permit

The holder of a Poisons Permit may be authorised by the Chief Executive Officer of Health to purchase Schedule 4 medicines on behalf of a clinic or medical centre.
The permit holder is responsible for:

- ensuring compliance with poisons regulations;
- purchase, storage, security; and
- ensuring records are maintained: either in patients’ notes or in a book dedicated to recording the supply of Schedule 4 medicines.

If requesting S4 or S8 medicines for ‘practice use’ (i.e., the practice holds a Poisons Permit) a written order on a letterhead from the practice stating exactly what is required should be sufficient for a pharmacist or wholesaler to supply. The wholesaler and pharmacist may request a copy of the Poisons Permit.

### 3.3. Storage

Medicines (including samples from pharmaceutical companies) must be stored in a way that prevents unauthorised access. The Regulations specify storage must:

- be at the practitioners practice;
- be in a locked area (locked cupboard in general area or unlocked cupboard in locked room where access is restricted); and
- ensure access is available only to the practitioners and persons under their personal supervision.

The only exception to the above storage conditions is if the S4 medicines are in the actual possession of the practitioner for the purpose of attending patients at places other than at his or her usual place of practice e.g., Doctors’ bags for emergency supplies.

### 3.4. Disposal of S4 medicines

S4 medicines can be disposed of through either:

- a community pharmacy; or
- a company authorised for the collection and destruction of S4 medicines by incineration.

### 3.5. Recording of S4 medicines administered and supplied

Records of all S4 medicines administered and supplied to all patients/animals must be kept for a period of two years. The records must include the:

- name of medication, strength, quantity;
- date supplied or administered; and
- name of person supplied or administered the medication.

This also applies to the supply or administration of sample packs of medicines. The purpose of this recording requirement is to ensure accountability in the distribution of S4 medicines.

### 3.6. Labelling

Medicines supplied to patients to take away from the surgery, e.g., sample packs, must be labelled in accordance with the Poisons Regulations (e.g., patient’s name, directions for use and date supplied).

### 4. Patients Travelling Overseas

Patients taking medicines overseas may be required to take a copy of the prescription or a letter signed by the prescriber with them. Further information can be obtained from Therapeutic Goods Administration (http://www.tga.gov.au/docs/html/bringmed/outaust.htm) or by contacting the embassy of the country they are visiting.

Some countries do not permit certain medicines to be imported regardless of the documentation held (e.g., the importation of methadone or methylphenidate into Japan).
Schedule 8 medicines

Schedule 8 medicines are defined by the Poison Act 1964 as:

“Substances which may be available for use but require restriction of manufacture, supply, distribution, possession and use to reduce abuse, misuse and physical and psychological dependence”.

In WA, Schedule 8 medicines include:

- Opiates;
- Stimulants (methylphenidate and dexamphetamine); and
- Flunitrazepam.

[NOTE: An authorisation to prescribe a Schedule 8 medicine is a separate requirement to a PBS “authority prescription” Medicare Australia should be contacted regarding authority prescriptions on 1800 552 580.]

The prescribing, storage and dispensing of S8 medicines is subject to a greater level of control than that of S4 medicines.

In this section, information is provided on:

- prescribing opiates;
- requirements for an authorisation to prescribe opiates and how to apply;
- writing a valid prescription for an S8 medicine;
- monitoring of S8 medicines;
- opioid contracts;
- withdrawing prescribing rights to S8 medicines;
- notification of addiction to medicines; and
- prescribing Flunitrazepam, Methadone, Buprenorphine and stimulant medications.

5. Opiates
(excluding methadone and buprenorphine for the treatment of addiction)

5.1. Prescribing of opiate medicines

Prescriptions for Schedule 8 medicines:

- are valid for 6 months;
- must be written by a medical practitioner, dentist or veterinary surgeon registered in WA. Prescriptions for S8 medicines written by prescribers registered interstate or overseas cannot be dispensed;
- must not be written for the self use of the prescriber;
- should not be prescribed for members of the prescriber’s immediate family;
- if written by a dentist endorsed ‘for dental treatment only’; and
- if written by a veterinary surgeon endorsed ‘for animal treatment only’.

5.2. Writing a valid prescription for an opiate medicine

Prescriptions for S8 opiates (and all S8 medicines) have more stringent requirements than do prescriptions for S4 medicines, to reduce the risk of fraud.

These requirements are:

- only one S8 opiate can be written on the prescription page (although more than one medicine strength or form can be on the same page) eg. a prescription for Oxycontin® 80mg & Endone® 5mg is valid because each contains the generic S8 medicine oxycodone;
- no other medicine (including S4s) can be written on the same prescription as the S8 (eg. morphine SR 30mg prescribed with tramadol cannot be written on the one prescription page);
the following must be present on any prescription for an S8 medicine written 
by a medical practitioner or dentist for the prescription to be valid:
- the full name and address of the prescriber;
- the date it was written;
- the full name, full address and date of birth of the patient;
- the description and quantity of the medicine of addiction to be 
dispensed;
- precise directions for use;
- the number of repeats (if any) and intervals at which they may be 
dispensed; and
- signature of the prescriber.

when a prescription is generated by a computer the details (in bold and 
italics) MUST be written in the prescribers own handwriting;
repeat prescriptions must be filled by the same pharmacy as that which 
dispensed the original prescription and the prescription must remain at that 
pharmacy;
pharmacists must verify the authenticity of the prescription before 
dispensing the prescription, this may require personal contact with the 
prescribing doctor if the pharmacist does not recognise the prescriber’s 
handwriting; and
if a prescription contains an unusual dose the prescriber shall indicate that 
such a dose is intended by underlining that part of the prescription and 
initially the same in the margin.

Medical practitioners are encouraged to check the prescription history of 
new patients, or existing patients whose behaviour causes concern, prior to 
prescribing S8 Opiates, by calling the Pharmaceutical Services Branch on 
9388 4985, during business hours.

Medicare Australia has a Medicine Information line (1800 631 181) for enquiries 
relating to Doctor Shopping. This data is available for PBS claimable items 
dispensed throughout Australia.

5.3. Requirement for authorisation

Prior written authorisation from the Chief Executive Officer of Health is 
required by medical practitioners wishing to prescribe a S8 medicine for:
- a patient whose details correspond with a notified addict; or
- a period longer than 60 days (or for more than 60 days in any 12-month 
period) if the person is not an addict.

Prior written authorisation from the Chief Executive Officer of Health is 
required by dentists wishing to prescribe a S8 medicine for:
- a patient whose details correspond with a notified addict; or
- a period of excess of 7 days; or for more than 60 days in any 12-month period 
if the person is not an addict.

When doctors or dentists intend to prescribe a S8 medicine in these 
circumstances, an application to the Chief Executive Officer of Health must be 
made for authorisation.

The purpose of the authorisation is to:
- support doctors in the appropriate use of S8 medicines;
- minimise drug dependence; and
- reduce abuse and diversion of S8 medicines.

5.3.1. How to apply for authorisation

An authorisation to allow prescribing will be issued if the Department is satisfied 
that the medicine chosen and the dose are appropriate for the patient’s medical 
condition. Consultant support for the use of S8 medicines will generally be 
requested for the prescription of S8 medicines to younger patients (<60 years of 
age), to patients on large doses (equivalent to 200mg morphine or more) and to 
patients whose dose has escalated significantly over time.

A completed Application to Prescribe a Drug of Addiction form must be sent to 
Pharmaceutical Services Branch. See Appendix 2 for a sample application form.
Forms are available from:

or by calling: Pharmaceutical Services Branch on (08) 9388 4980.

Completed forms are to be posted or faxed to:

Pharmaceutical Services Branch
Department of Health
PO Box 8172
Perth Business Centre WA 6849
Fax (08) 9388 4988

5.3.2. The Authorisation

The authorisation will in general restrict the prescribing of S8 opiates to a named practitioner. See Appendix 3 for a sample authorisation.

An authorisation issued to a practitioner (as the authorised prescriber), will also apply to other doctors at that practice. There is an obligation on the prescribing doctor to have read the patient notes and prescribe in accordance with the authorisation (drug and dose) and any conditions specified.

Consultants who initiate or continue to co-manage patients prescribed opiates may nominate a co-prescriber (generally a GP) to also prescribe the S8 opiates. It is the responsibility of the medical practitioners to co-ordinate their prescribing to ensure that patients do not receive S8 opiates from both prescribers.

The maximum duration of an authority is 12 months; a reminder to re-apply will be sent out one month before the authorisation expires.

In general, authorisation will not be given for parenteral opiates (unless consultant support is provided) or for short-acting formulations unless used as part of a regimen based around long-acting formulations.

5.4. Transfer of repeat prescriptions

Repeat prescriptions for S8 medications MUST be retained by the pharmacy where the original prescription was dispensed. Transfer of prescriptions between pharmacies can be requested from the Department of Health.

Prescription transfers are normally only granted if there is a significant barrier to the patient accessing their prescription (rather than inconvenience) that was unforeseeable at the time the first prescription was dispensed. These are not routinely authorised within the metropolitan area and generally are only authorised when a patient is moving to a rural or regional area on a permanent or long term basis.

The Pharmaceutical Services Branch can be contacted for further information on 9388 4980.

5.5 Purchase, supply, storage, recording & disposal of S8 medicines

Practitioners may possess medicines including S8 opiates for the emergency treatment of their patients. These medicines can be supplied by a pharmacy using either the PBS Doctor’s Bag forms or a practitioner’s written order.

The requirements for the purchase, supply and storage of S8s are the same as for S4s with the addition of:

- transactions involving S8 medicines must be recorded in a register held by the practitioner. The RACGP publishes and supplies a ‘Schedule 8 Drugs - Record Book of Administration’ suitable for use by individual practitioners;
- records must be kept for seven years;
- drugs of addiction supplied to the practitioner can only be used for the treatment of his/her patients and should not be supplied to other practitioners or “pooled” for common use at the medical practice;
- a separate record of administration should also be made in the patient’s medical notes;
- when not in possession of the medicines they must be stored in a safe which complies to Appendix M of the Poison Regulations;
Schedule 8 medications MUST be destroyed by a combination of a medical practitioner and pharmacist (together) with one as witness, both should sign the entry in register of Drugs of Addiction book.

5.6 Monitoring of S8 medicines

WA has a state-wide monitoring scheme which tracks the prescription and dispensing of all S8 medicines, both PBS and non PBS (private) prescriptions.

All pharmacists return data on dispensed S8 medications to the Pharmaceutical Services Branch. These data are matched to the authorisations issued for the prescription of S8 opiates for greater than 60 days and for the prescription of medicines to a registered addict.

Discrepancies between the amount authorised and prescribed, the amount authorised and dispensed and failure to apply for authorisation are identified and investigated.

5.7 Opioid contracts and limited dispensing requirements

In cases where the use of opiates is consistently or repeatedly at doses above those authorised, or where additional unauthorised opiates are prescribed, the Department may condition the authorisation with the requirement that a written contract is established between the prescriber and the patient which sets out the rules of prescribing and the absolute necessity to adhere to the authorised dose.

Written opiate contracts between patient and prescriber are used routinely by specialist pain clinics and represent best practice, as the contract clearly sets out the patient’s and prescriber’s responsibilities.

A copy of the opioid contract used at SCGH is attached in Appendix 4.

For high risk patients, such as those who have a history of drug abuse, or who consistently exceed the authorised dose, misplace scripts or report stolen S8 opiates, the authorisation may be conditioned with the need for limited dispensing. This may range from daily pick-ups of medication to weekly. Carrying small amounts of S8 medicines limits the risk of theft or loss.

5.8 Conditioning and withdrawal of rights to prescribe S8 medicines

The Poisons Regulations allow the withdrawal of a practitioner’s rights to prescribe S8 medicines or the imposition of conditions on prescribing.

Doctors who repeatedly fail to adhere to the requirements for authorisation, who disregard the requirement to prescribe within the authorised dose, or in any other way violate the Poisons Act and Regulations can have their prescribing rights withdrawn. When the Chief Executive Officer of Health does this, the matter is also reported to the Medical Board for their consideration.

6. Drugs of Addiction Notification Regulations

Medical practitioners have a statutory obligation to notify suspected drug addicts to the Department of Health. Yellow notification forms (see Appendix 5) are available by phoning 9388 4980; notification can also be by letter.

To remove a patient’s name from the register, one of the following criteria must apply:

- the person referred to in the register has died;
- after 2 years, the Director, Alcohol and Drug Authority has advised that the person referred to in the Register has ceased to use drugs;
- the entry was, for any reason, false or incorrect; or
- for a period of at least 5 years, the person referred to in the register has no contact with the Department, either directly or indirectly in relation to their use of drugs of addiction.
7. Prescribing Flunitrazepam

Practitioners who wish to supply or prescribe Flunitrazepam must first obtain an authorisation from the Chief Executive Officer of Health for each individual patient. This unique authorisation number must be written by the prescriber on the prescription prior to presentation at a pharmacy. If there is no authorisation number the pharmacist must refuse to dispense and will contact the prescriber.

An authorisation will only be issued if the application is accompanied by written support from an appropriate consultant ie. psychiatrist, sleep medicine physician or neurologist.

8. Prescribing Methadone or Buprenorphine

Medical practitioners who wish to supply or prescribe Methadone syrup/solution or Buprenorphine sublingual tablets (0.4mg, 2.0mg and 8.0mg) for the treatment of addiction in patients with opioid dependency as part of the Community Program for Opioid Pharmacotherapy (C-POP) must be authorised by the Chief Executive Officer of Health.

An authorised medical practitioner must obtain prior written authorisation from the Chief Executive Officer of Health for each patient before prescribing Methadone or Buprenorphine as part of the C-POP.

For further information on the C-POP program the Pharmaceutical Services Branch can be contacted (08 9388 4980).

9. Prescribing Stimulant Medicines

There are restrictions on the prescribing and supply of stimulant medicines.

Medical practitioners who wish to prescribe methylphenidate or dexamphetamine must first apply to the Department of Health for authorisation. A unique Stimulant Prescriber Number (SPN) may be issued. A SPN is restricted to consultants, who, as part of their speciality, diagnose and treat depression, attention deficit hyperactivity disorder (ADHD), brain damage or narcolepsy.

Authorised medical practitioners (with SPN) must notify the Chief Executive Officer of Health when commencing a patient on methylphenidate or dexamphetamine, for the treatment of ADHD, depression, brain damage or narcolepsy. If the clinical condition of the patient or their requirements for stimulants falls outside the Stimulant Regulatory Guidelines, then that patient is subject to an authorisation process.

Only authorised medical practitioners (with SPN) are permitted to initiate stimulant medication or change the existing medication. Other medical practitioners (such as General Practitioners) may be nominated as co-prescribers at the discretion of the authorised medical practitioner.
Useful Contacts

For more information regarding authorisation to prescribe opiates contact

Pharmaceutical services branch
Tel: (08) 9388 4985
Fax: (08) 9388 4988.

Pharmaceutical Services web address www.health.wa.gov.au/pharmacy

C-POP Program (08) 9388 4980
Stimulant Program (08) 9388 4980
Next Step (08) 9219 1919
Clinical Advisory Service (08) 9442 5042

Therapeutic Goods Act www.tga.gov.au

Royal College of General Practice (for Schedule 8 Drugs - Record Book of Administration) Tel: (08) 9489 9555 www.racgp.org.au/healthrecords

Appendix 1:

Specific Medicines With Prescribing Restrictions

CLOMIPHENE AND CYCLOFENIL (REGULATION 38C)

Clomiphene or cyclofenil or a substance containing clomiphene or cyclofenil and other substances specifically prepared to stimulate ovulation shall not be prescribed except —

- by a gynaecologist or obstetrician;
- by any other medical practitioner, if authorised in writing by the CEO; or
- by a veterinary surgeon for the purpose of veterinary trials under the direction of a veterinary surgeon.

ETRETINATE OR ACITRETIN (REGULATION 38D)

Etretinate or acitretin or a substance containing etretinate or acitretin shall not be prescribed except by a physician or dermatologist.

A physician or dermatologist who prescribes etretinate or acitretin or a substance containing etretinate or acitretin shall ensure that the possibility of pregnancy has been excluded prior to the commencement of the treatment and that female patients are informed that they must not become pregnant for a period of 24 months after completion of the treatment.

PROSTAGLANDINS (REGULATION 38E)

Cloprostenol, dinoprost, dinoprostone, fenprostalene, fluprostenol, prostianol or a substance containing any of those prostaglandins shall not be prescribed except —

- by a veterinary surgeon or in the case of dinoprost or dinoprostone or a substance containing dinoprost or dinoprostone
- by a physician, gynaecologist or obstetrician; or
- by any other medical practitioner, if authorised in writing by the CEO.
ISOTRETINOIN (REGULATION 38F)

Isotretinoin or a substance containing isotretinoin shall not be prescribed except by a physician or dermatologist.

A physician or dermatologist who prescribes isotretinoin or a substance containing isotretinoin shall ensure that the possibility of pregnancy has been excluded prior to the commencement of the treatment and that the patient is informed that she must not become pregnant for a period of one month after completion of the treatment.

THALIDOMIDE (REGULATION 38G)

Thalidomide or a substance containing thalidomide shall not be prescribed except by a physician or dermatologist.

A physician or dermatologist who prescribes thalidomide or a substance containing thalidomide shall ensure that the possibility of pregnancy has been excluded prior to the commencement of treatment and that the patient is informed that she must not become pregnant for a period of one month after completion of treatment.

CHLORAMPHENICOL (REGULATION 38H)

Chloramphenicol or substances containing chloramphenicol shall not be prescribed except by a medical practitioner for human use; or

- by a veterinary surgeon for use in or on an animal not used for meat, edible offal, egg or milk production.

FOLLICULAR STIMULATING HORMONE AND LUTEINISING HORMONE (REGULATION 38I)

Follicular stimulating hormone, luteinising hormone or a substance containing follicular stimulating hormone or luteinising hormone shall not be prescribed except

- by a physician, gynaecologist or obstetrician;
- by any other medical practitioner, if authorised in writing by the CEO; or
- by a veterinary surgeon for the purpose of veterinary trials under the direction of a veterinary surgeon.

CARNIDAZOLE REGULATION 38K

Carnidazole or a substance containing carnidazole shall not be prescribed except by a veterinary surgeon for use in the treatment of pigeons.

OXOLINIC ACID (REGULATION 38L)

Oxolinic acid or any substance containing oxolinic acid shall not be prescribed except by a veterinary surgeon for use in the treatment of fish.

CLOZAPINE (REGULATION 38M)

Clozapine or a substance containing clozapine shall not be prescribed except —

- by a psychiatrist; or
- by any other medical practitioner authorised in writing by the CEO.
NITROFURAN DERIVATIVES (REGULATION 38N)

The nitrofuran derivatives included in S4 and listed in the Table below, or a substance containing any of those poisons, shall not be prescribed except:

- by a medical practitioner for human use; or
- by a veterinary surgeon for use in the feeding or treatment of an animal not used for meat, edible offal, egg or milk production.

Table - Nitrofuran derivatives

<table>
<thead>
<tr>
<th>Furazolidone</th>
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<tbody>
<tr>
<td>Nifursol</td>
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<tr>
<td>Nitrofuran</td>
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<tr>
<td>Nitrofurantoin</td>
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<tr>
<td>Nitrofurazone</td>
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BOSENTAN FOR HUMAN USE (REGULATION 38O)

Bosentan or a substance containing bosentan shall not be prescribed except

- by a physician; or
- by any other medical practitioner authorised in writing by the CEO.

A physician, or other medical practitioner, who prescribes bosentan or a substance containing bosentan shall ensure that the possibility of pregnancy has been excluded prior to the commencement of treatment and that the patient is informed that she must not become pregnant during or for a period of 3 months after completion of treatment.

TERIPARATIDE FOR HUMAN USE (REGULATION 38P)

Teriparatide or a substance containing teriparatide shall not be prescribed except—

- by a physician, a rheumatologist, an immunologist, an endocrinologist or a geriatrician; or
- by any other medical practitioner authorised in writing by the CEO.
Appendix 2:
Schedule 8 Application Form

Appendix 3:
Schedule 8 Authorisation
Appendix 4:

Opioid Contract Sample

TREATMENT AGREEMENT FOR THE USE OF MORPHINE-
LIKE PAIN KILLERS FOR CHRONIC PAIN

THIS IS AN AGREEMENT BETWEEN MYSELF AND MY DOCTOR
IN THE WESTERN AUSTRALIAN PAIN MANAGEMENT
CENTRE CONCERNING THE PRESCRIBING OF MORPHINE-
LIKE PAIN KILLERS FOR MY CHRONIC PAIN CONDITION.

The continued use of strong morphine-like pain doses have some serious side effects. It is
therefore important that we can demonstrate they do not give me some unexpected benefit.

I understand that the SIDE EFFECTS which these drugs cause include, but are not limited to:

- pruritus
- increased appetite in some people and weight gain in others
- a decrease in ability to think clearly or a loss of co-ordination and balance (either of these may make driving impossible)
- drowsiness
- slowed breathing
- physical dependence (this may result in withdrawal symptoms if the drug is stopped suddenly. This may be very unpleasant and include severe diarrhoea and stomach cramps, severe anxiety, goose pimples and nausea which may continue for several days)
- attention to sexual function due to the drug – this may include impotence, loss of
- motivation (or change in menstrual periods)
- nausea and vomiting
- addition to the drug
- tolerance to the drug (this means the same dose has less or no effect and increasing amounts of the drug have to be taken to get the same effect)
- withdrawal symptoms in the baby if a baby is born to a mother who is taking these drugs

In order for my doctor to prescribe these drugs for me safely, I agree with the following conditions:

- for continued prescribing of these medications, I agree to tell my Pain Specialist if I have ever had problems with or treatment for drug dependence or abuse (including alcohol problems) or if I have ever been involved in the illegal possession, sale or trafficking of drugs such as opiates, sleeping pills or other drugs
- one doctor only will provide my prescriptions of these medications. This is either my general practitioner or my Pain Specialist. Where possible, all my prescriptions will be filled at one chemist.

C:\My Documents\Health\Internal Medicine\Pain Management.doc

Printed on: 6/8/04 18:33
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Fax: = 6/8/04 18:33

Appendix 5:
Addiction to Drugs Notification Form

NOTIFICATION OF ADDICTION TO DRUGS

EXECUTIVE DIRECTOR, PUBLIC HEALTH

This is to notify you pursuant to the Drugs of Addiction Notification Regulations, 1980 that I, within forty-eight hours of the date of this notice, have become aware or suspect that the person whose name and other particulars are set out below is addicted to drugs and is under a condition of health that is a prescribed condition of health for the purposes of the interpretation "prescribed condition of health" in section 290 of the Health Act 1911 (as amended), and that the drug of addiction specified below is the drug of addiction to which this person is addicted.

Full name

Full address

Postcode

Occupation

Date of Birth

State/Country of Birth

Drug (or drugs) of addiction

How taken

(specify whether by smoking, oral, injection etc.)

Estimated period for which any drug of addiction has been taken

Is addiction due to medical treatment?

Name of medical practitioner giving this notice:

Address

Telephone No

Date

Signature

Tick this box if you require more forms

Pharmaceutical Services Section
Environmental Health Branch
Health Department of W.A.
PO Box 8172, Stirling Street
PERTH WA 6849