KASPER Tips: Controlled Substance Prescribing Tips Part I

Amanda J. Ward, PharmD, CGP
Drug Enforcement and Professional Practices Branch
Kentucky Cabinet for Health and Family Services

The Drug Enforcement and Professional Practices Branch (DEPPB) is responsible for enforcing the Kentucky Controlled Substances Act (Kentucky Revised Statute 218A) and operation of the KASPER program. The DEPPB would like to provide the following guidance to all prescribers of controlled substances to assist you in your everyday practice:

1. **Clearly identify yourself**. If you practice in a setting with multiple practitioners, and the prescription pad is pre-printed with the names and DEA Numbers of all prescribers, be sure to clearly identify yourself as the prescriber. This can be accomplished by circling only your name and DEA Number on the prescription. Additional ways to clearly identify yourself include printing your name, DEA Number, and/or state license number under your signature. All of these can assist pharmacy staff in identifying the correct practitioner, which leads to accurate KASPER data.
2. **Clearly identify the patient**. Be sure to write the patient's full name on the prescription, including any suffixes (Sr., Jr., III, etc.). Also, it will greatly reduce the incidence of any fraudulent activity if you include the patient's address, date of birth and Social Security Number. Many electronic medical records (EMR) systems already populate this information on prescriptions that are printed from the EMR. Clear identification of the patient also improves the accuracy of KASPER data.
3. **Know the limits**. Take a few minutes to review the state and federal statutes and regulations regarding controlled substances. For example, in Kentucky, a prescription for a Schedule II medication is only valid for 60 days from the date of issuance; an Advanced Practice Registered Nurse (APRN) who practices in Kentucky is not permitted to write refills for schedule III medications. Familiarizing yourself with these laws and regulations can lead to fewer phone calls for clarification and delays in patient treatment. Call your licensing board, the DEPPB, or the DEA if you have any questions.
4. **Be specific with your combination medications**. As you may know, the Food and Drug Administration (FDA) has given manufacturers until January 14, 2014, to remove prescription medications containing more than 325mg of acetaminophen per tablet/capsule from the market. New combination products are coming to market including various strengths of acetaminophen under the 325mg limit. Be as specific as you can when prescribing combination products that include acetaminophen. For example, do not write only hydrocodone 10mg; this will lead to a phone call for clarification on the acetaminophen strength. Including the strength of both ingredients will reduce confusion for all parties involved.
5. **Pre-signed or post-dated prescriptions**. A prescription may **NOT** be pre-signed or post-dated and left for an office staff member to complete at a later time. Title 21 in the Code of Federal Regulations (CFR) §1306.05 states that "*all prescriptions for controlled substances shall be dated as of, and signed on the day when issued…*"

Also, please keep in mind the controlled substance prescribing regulations of your licensure board in regards to requirements that stemmed from HB1 and HB217.

Remember DEPPB staff is available to help with any questions or problems you may encounter with controlled substances. For support please contact DEPPB staff at (502) 564-7985.

Next time: Controlled Substance Prescribing Tips Part II

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