



Policy for Repeat Prescribing and Prescribing in the Absence of Consultation

1 SUMMARY

There are many instances in which repeat prescribing is required in General Practice but only a limited number of categories for prescribing in the absence of a consultation. Doctors reserve the right to vary these guidelines at their discretion but should record any variance in the medical records. The legal responsibility for prescribing lies with the doctor who signs the prescription. This responsibility is the same whether it is a first or repeat prescription.

2 POLICY STATEMENT

2.1 Purpose

This policy outlines by authorised prescriber the prescribing practices in relation to the repeat prescribing and prescribing of medicines in the absence of a consultation. The policy contains clear guidelines to protect both the patient and the prescriber.

2.2 Background

Repeat prescribing is accepted practice in New Zealand¹. There are many benefits to repeat prescribing for both the patient and the authorised prescriber but there are also risks. There are also instances in which it may be appropriate to provide a prescription to a patient without a consultation. It is essential to have policies in place that provide a safe and effective service outlining the systems that have been put in place to review patients and their medications.

2.3 Scope

This policy applies to Medical and Nursing staff working at this practice. Administration and reception staff should also be aware of this policy in order to respond to patient’s requests for prescriptions in the appropriate manner.

2.4 Responsibilities

The legal responsibility for prescribing lies with the authorised prescriber. Therefore each authorised prescriber is responsible for ensuring that this policy is followed for their patients. All staff have a responsibility to ensure that this policy is followed at all times.

2.5 Definitions & Abbreviations

In this section define terms that are critical to the interpretation and implementation of the policy.

Authorised Prescriber Initials	Authorised Prescriber Name
AC	Dr Adrienne Chin
CC	Dr Colin Chin
KJ	Dr Kent Johnston
NY	Dr Nigel Yeoh
SY	Dr Su Yee
VH	Vivian Huang (Nurse Prescriber)

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3 POLICY DETAIL AND PROCEDURES

Consultations are **always** required when:

- A medication is prescribed for the first time
- A medication is being restarted
- A patient is requesting their first repeat for a medication
- The prescription is for controlled drugs, antibiotics or Roaccutane
Unless otherwise stated in a patient alert in the PMS

The patient can be seen every 6-12 months, provided that their overall and specific condition is stable, for the following medications:

- Antihypertensives
- Anti-epileptics
- Asthmatic medications
- NSAIDs
- Antidepressants
- Antibiotics for treatment of acne
- Antipsychotics
- Lipid lowering medications
- HRT
- Gastro-intestinal drugs
- Diabetes medication

The patient can be seen every 12 months, provided that their overall and specific condition is stable, for the following medications:

- Oral contraceptives
- Depo Provera
- Laxatives
- Topical acne medication

The following may be prescribed at the authorised prescriber's discretion without consultation:

- Simple analgesics
- Vitamins
- Antibiotics for documented recurring conditions (e.g. recurrent UTIs)

Each medication re-prescribed is reviewed by prescribing practitioner and includes the following

- 1) Specific medicines reviewed
- 2) Date of last medication review
- 3) Is there an indication for each medicine?
- 4) Are the directions and dose for each medicine appropriate?
- 5) Is the medicine still effective?
- 6) Is each medicine well tolerated?
- 7) Are there any potential drug interactions to the specific medicines?
- 8) Is each medicine still appropriate and cost effective?
- 9) Is the medicine still funded by Pharmac?
- 10) Is the medicine still needed for the patient?
- 11) Is the patient being monitored for potential adverse effects and/or organ function? eg renal, hepatic, lipids?
- 12) Does the patient need any other medicine at this time?
- 13) Are all sensitivities/ allergies recorded in the notes?
- 14) Have the computer notes been clearly marked with a date for this review?
- 15) Has the patient received education/counselling regarding each medicine?
- 16) Does the patient take any complementary otc /herbal therapies? What are they?
- 17) The correct dose is prescribed for medicines where the dose varies throughout the duration of the treatment

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- 18) All relevant information has been reviewed before completing the prescription
- 19) All prescriptions must be documented in the Indici PMS

Each authorised prescriber reserves the right to vary these guidelines at their discretion but should record it in the medical records of the individual patient and enter a Prescription Alert and brought to staff attention by being marked in Red (High). Any permanent change to regular arrangements should also be notified to all practice clinical staff.

4 STANDARD PROCEDURE MATRIX FOR DOCTORS ON RICCARTON

Authorised Prescriber	Consultations are required when:	Consultation every 6-12 months so long as condition is stable	Consultation every 12 months so long as condition is stable	Medicines that may be prescribed without consultation at doctor's discretion	Medications where review of medical record will indicate policy
AC, CC, KJ, NY, SY	<ul style="list-style-type: none"> • Medication being prescribed for first time • Medication is restarted • First repeat script for medication • Roaccutane • Antibiotics for new condition 	<ul style="list-style-type: none"> • Antihypertensives • Anti-epileptics • Asthma meds • NSAIDs • Antibiotics for treating acne • Antipsychotics • Lipid-lowering meds • HRT • GI medications • Antidepressants 	<ul style="list-style-type: none"> • Oral contraceptives • Depo Provera • Laxatives • Topical acne treatment 	<ul style="list-style-type: none"> • Simple analgesics • Vitamins • Antibiotics for documented recurrent conditions (e.g. recurrent UTIs) 	<ul style="list-style-type: none"> • Opiates • Methylphenidate • Benzodiazepines
VH	<ul style="list-style-type: none"> • Medication being prescribed for first time • Medication is restarted • First repeat script for medication • Antibiotics for new condition 	<ul style="list-style-type: none"> • Antihypertensives • Asthma meds • NSAIDs • Antibiotics for treating acne • Antipsychotics • Lipid-lowering meds • HRT • GI medications • Antidepressants 	<ul style="list-style-type: none"> • Oral contraceptives • Depo Provera • Laxatives • Topical acne treatment 		

5 REFERENCES

1. Pullon, S. R. (2002). Repeat Prescribing Practice in New Zealand. *NZFP*, 19-23.
2. Medicines Regulations 1984.
3. Medicines Act 1981
4. Standard Procedure matrix for Doctors on Riccarton

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