Dispensing prescriptions for Controlled Drugs

This factsheet prepared by PSNC’s Dispensing and Supply team outlines prescription requirements for Controlled Drugs (CDs) including prescription validity, length of treatment, owings, repeat dispensing, instalment dispensing and checks to confirm the identity of CD collectors.

**CD prescription writing requirements:**
To be valid, in addition to the normal prescription requirements for Prescription Only Medicines (as required by the Human Medicines Regulations 2012), prescriptions for Schedule 2 and 3 CDs must also contain the following (as outlined in The Misuse of Drugs Regulations 2001):

- Patient name and address
- Drug name
- Dose (‘as directed’ on its own is not permitted)
- Formulation
- Strength (where appropriate)
- Total quantity/dosage units of the preparation in both words and figures (for liquids, total volume in ml)
- Prescriber signature and address
- Date of issue
- For instalment prescriptions, specify the instalment amount AND instalment interval
- The words “for dental treatment only” written on it if issued by a dentist

**Length of treatment:**
The Department of Health and Social Care (DHSC) has issued strong recommendations that prescriptions for Schedule 2, 3 and 4 CDs are limited to the quantity necessary for up to 30 days’ treatment. Exceptionally, where a prescriber believes that a prescription for a CD should be issued for a longer period he/she may do so where there is a genuine clinical need and it does not pose an unacceptable risk to patient safety. Pharmacists can dispense prescriptions ordering more than 30 days’ supply of any Schedule 2, 3 and 4 CDs.

**Prescription validity:**
Prescriptions for Schedule 2, 3 and 4 CDs are only valid for 28 days from the appropriate date (i.e. date of signing unless the prescriber indicates a date before which the CD should not be dispensed). Note: a prescriber may forward-date a CD prescription in which case the date of validity is 28 days from the forward-date, or the start date, where specified.

Prescriptions for Schedule 5 CDs are valid for dispensing for 6 months from the appropriate date. For further information on prescription validity, click here.

**Owings:**
In the case of owings, any remaining balance of Schedule 2, 3 or 4 CDs must be dispensed within 28 days of the appropriate date on the prescription. It is good practice for the pharmacist to make patients or their representatives aware from the outset that they will not be able to receive a supply of any prescribed Schedule 2, 3 or 4 CDs beyond the 28-day period of prescription validity.

For prescriptions for Schedule 5 CDs, the balance of an owing cannot be collected more than 6 months after the appropriate date.

**Repeat dispensing:**
Schedule 2 and 3 CDs cannot be prescribed on repeat dispensing prescriptions. Only Schedule 4 and 5 CDs are permitted on repeatable prescriptions.

Repeat dispensing prescriptions for Schedule 4 CDs must be dispensed for the first time within 28 days of the appropriate date. After the first dispensing episode is complete, any repeats are legally valid to dispense up to 12 months from the appropriate date.
Repeat prescriptions for Schedule 5 CDs must be dispensed for the first time within six months of the appropriate date. After the first dispensing episode is complete, any repeats are legally valid to dispense up to 12 months from the appropriate date.

**Instalment dispensing:**
For ‘blue’ FP10MDA prescriptions, the first instalment must be dispensed within 28 days of the appropriate date and the remainder should be dispensed in accordance with the directions on the prescription. The prescription must be marked with the date of each supply. The instalment direction is a legal requirement and needs to be complied with, however, for certain situations (e.g. if a pharmacy is closed on the day an instalment is due) the **Home Office** has approved specific wording which provides pharmacists some flexibility for supply.

**Note:** there remains no provision to dispense CDs in instalments on a standard paper FP10 prescription form or via EPS. For further information on endorsing instalment prescription forms correctly, [click here](#).

For more information on dispensing methadone oral liquid on FP10 and FP10MDA forms see PSNC’s page on **Methadone dispensing**.

**EPS prescriptions:**
Prescribers can issue EPS prescriptions for all CDs including Schedule 2 and 3 CDs but are currently unable to issue instalment ‘blue’ FP10MDA prescriptions electronically.

A method of “marking” the prescription “at the time of supply” should be decided to ensure compliance with the Misuse of Drugs Regulations 2001. The dispense notification message may be suitable for this but depending on local system configuration, another patient medication record (PMR) process that records a date and leaves an electronic audit trail may be suitable.

**Read more at EPS CDs webpages, EPS CDs one-page factsheet and CD resources and FAQs.**

**Amending typographical errors on paper prescriptions**
Pharmacists are able to amend prescriptions for Schedule 2 and 3 CDs where the prescription does not comply with the CD prescription requirements. The only changes that pharmacists can make are **correcting:**
- minor spelling mistakes; or
- minor typographical mistakes (this may include, for example, a number being substituted for a letter or two letters being inverted but where the prescriber’s intention is still clear); or
- where the total quantity of the CD/number of dosage units is specified in either words or figures but not both, a pharmacist can add either the missing words or figures as required (but not both).

In doing this, pharmacist must exercise due diligence and be satisfied that the prescription is genuine and the CD is being supplied in accordance with the prescribers’ intentions. The prescription must be amended in ink or otherwise indelibly and the pharmacist must mark the prescription so that the amendment is attributable to him or her (e.g. name, date, signature and GPhC registration number). If there is more than one amendment on the same prescription, each amendment must be countersigned.

Where an amendment is made by one pharmacist and another pharmacist makes the supply, the Home Office has advised that the second pharmacist should also mark the amendment to indicate that he/she is also satisfied with the change so that it is attributable to both.

**Identity checks and record keeping requirements:**
There is a legal requirement for pharmacists to establish whether a person collecting a Schedule 2 CD is the patient, the patient’s representative or a health care professional acting within their professional capacity. This only applies to Schedule 2 CDs and details must be recorded in the CD register.

For information on record keeping requirements [click here](#)

**Collectors of CDs signing the back of prescription forms or tokens**
Best practice guidance to record the details of the person collecting a Schedule 2 or 3 CDs remains in place; the reverse of NHS prescription forms and EPS dispensing tokens (FP10DT) have a box for the ‘Signature of collector of Schedule 2 & 3 CDs’ which can be used to obtain a signature. Any tokens used to collect a signature can be sent to the NHS Business Services Authority (NHSBSA), as appropriate. Alternatively, some contractors may wish to record details of the CD collector electronically (e.g. within the patient’s record). Retaining electronic records within the pharmacy and reducing use of paper tokens helps to align with the long-term NHS paperless objectives.

Where the person collecting the CDs refuses to provide their details (e.g. the name to record in the PMR or not signing the reverse of the form/token), pharmacists may apply their discretion on whether or not to supply the CDs.

When the CD is supplied, it is a requirement to mark the prescription with the date of supply at the time the supply is made. With EPS, that marking may be done automatically.

For more information on private CD prescriptions and CD requisitions visit our **Controlled Drug prescription forms and validity** page.

**Correct as of February 2021**