

18. In an emergency, a pharmacist may administer an over-the-counter medication or salbutamol.

DIVISION VII PRESCRIPTION OF TESTS

19. Before prescribing a test, a pharmacist must ensure that no result for an equivalent test is available.

20. Where circumstances warrant it, the pharmacist communicates the results of a test to the professional in charge of the patient's clinical follow-up.

DIVISION VIII FINAL

21. This Regulation replaces the Regulation respecting the administration of medication by pharmacists (chapter P-10, r. 3.1), the Regulation respecting the prescription of a medication by a pharmacist (chapter P-10, r. 18.2), the Regulation respecting the prescription and interpretation of laboratory analyses by a pharmacist (chapter P-10, r. 18.3) and the Regulation respecting the extension or adjustment of a physician's prescription by a pharmacist and the substitution of a medication prescribed (chapter P-10, r. 19.1).

22. This Regulation comes into force on the fifteenth day following the date of its publication in the *Gazette officielle du Québec*.

104461

Draft Regulation

Professional Code
(chapter C-26)

Physicians — Certain professional activities that may be engaged in by a pharmacist

Notice is hereby given, in accordance with sections 10 and 11 of the Regulations Act (chapter R-18.1), that the Regulation respecting certain professional activities that may be engaged in by a pharmacist, made by the board of directors of the Collège des médecins du Québec, may be examined by the Office des professions du Québec and submitted to the Government for approval, with or without amendments, on the expiry of 45 days following this publication.

The draft Regulation allows pharmacists to prescribe a medication for one of the conditions it sets out to a patient who has already been treated for that condition by another

professional authorized to prescribe medications. The Act to amend mainly the Pharmacy Act to facilitate access to certain services (S.Q. 2020, c. 4) specifies, in particular, that all pharmacists may prescribe and interpret laboratory analyses and other tests. The draft Regulation also provides consequential amendments that revoke the authorization for pharmacists who practise in community pharmacies to prescribe laboratory analyses.

The draft Regulation has no impact on the public or on enterprises, including small and medium-sized businesses.

Further information on the draft Regulation may be obtained by contacting M^e Linda Bélanger, director of legal services, Collège des médecins du Québec; 1250, boulevard René-Lévesque Ouest, bureau 3500, Montréal (Québec) H3B 0G2; telephone: 514 933-4441 or 1 888 633-3246; email: lbelanger@cmq.org.

Any person wishing to comment on the draft Regulation may submit written comments within the 45-day period to Roxanne Guévin, Acting Secretary of the Office des professions du Québec, 800, place D'Youville, 10^e étage, Québec (Québec) G1R 5Z3; email: secretariat@opq.gouv.qc.ca. The comments will be forwarded to the Minister of Justice; they may also be sent to the professional order that made the Regulation as well as to interested persons, departments and bodies.

ROXANNE GUÉVIN,
*Acting Secretary of the Office
des professions du Québec*

Regulation respecting certain professional activities that may be engaged in by a pharmacist

Medical Act
(chapter M-9, s. 19, 1st par., subpar. b)

DIVISION I GENERAL

1. The purpose of this Regulation is to determine, among the professional activities that may be engaged in by physicians, those that may be engaged in by a pharmacist pursuant to the terms and conditions set out in the Regulation.

DIVISION II PRESCRIPTION OF MEDICATION

2. In the practice of his or her profession, a pharmacist may prescribe medication referred to in Schedule I to the Regulation respecting the terms and conditions for the

sale of medications (chapter P-10, r. 12) to a patient who has received treatment for one of the following conditions in the past:

- (1) minor acne (without nodules or pustules);
- (2) mouth ulcers;
- (3) dermal candidiasis;
- (4) oral candidiasis;
- (5) oral candidiasis resulting from the use of a corticosteroid inhaler;
- (6) allergic conjunctivitis;
- (7) atopic dermatitis requiring the use of a weak or moderate strength of corticosteroids;
- (8) primary dysmenorrhea;
- (9) diaper rash;
- (10) hemorrhoids;
- (11) herpes labialis;
- (12) urinary infections in women, where the patient has received not more than one treatment for the condition in the last 6 months or not more than two treatments in the last 12 months;
- (13) allergic rhinitis;
- (14) yeast vaginitis.

However, a pharmacist may not prescribe medication where more than 5 years have elapsed since the last treatment prescribed for that same condition by another professional empowered to prescribe medication. For the conditions referred to in subparagraphs 4, 8 and 10 of the first paragraph, that time period is reduced to 2 years.

In addition, medication prescribed under this section must belong to a class of medications of equal or lesser strength than the medication prescribed in the past.

3. A pharmacist may also prescribe

- (1) antiviral treatment to a patient showing signs and symptoms similar to herpes zoster, except where the signs and symptoms are present in the head region;
- (2) antiviral treatment against influenza to a symptomatic patient who is at risk of developing complications.

The pharmacist must then enter the reasons for initiating medication therapy on a form to be given to the patient, and refer the patient to a physician or specialized nurse practitioner:

- (1) within 72 hours after the initiation of the antiviral treatment referred to in subparagraph 1 of the first paragraph;
- (2) within 48 hours after the initiation of the antiviral treatment referred to in subparagraph 2 of the first paragraph if the condition of the patient deteriorates.

4. Despite sections 2 and 3, a pharmacist may not prescribe medication where the condition is accompanied by one of the following elements:

- (1) a recurrent or persistent sign or symptom after the first medication prescribed by the pharmacist;
- (2) a sign or a symptom suggesting the presence of an undiagnosed chronic or systemic disease;
- (3) a sign or symptom suggesting a decline or alteration in the functioning of an organ or a system;
- (4) an unusual reaction to the medication.

The pharmacist must then refer the patient to a professional empowered to assess his or her condition and enter the reasons justifying the decision on a form to be given to the patient.

5. A pharmacist who prescribes medication under this Regulation must send the following information to the initial prescriber or to the physician or specialized nurse practitioner to whom the patient was referred:

- (1) the condition treated;
- (2) the full name of the medication;
- (3) the dose, including the pharmaceutical form, the concentration, where applicable, and the dosage;
- (4) the duration of the treatment and the quantity prescribed.

DIVISION III
AUTHORIZATION OF OTHER PERSONS

6. A person referred to in section 1 of the Regulation respecting the professional activities that may be engaged in by persons other than pharmacists (chapter P-10, r. 3) may engage in the professional activity provided for in Division II if the person engages in the activity under the

supervision of a pharmacist and engaging in the activity is required for the purpose of completing a program of studies, a training period or training.

DIVISION IV
FINAL

7. This Regulation replaces the Regulation respecting certain professional activities that may be engaged in by a pharmacist (chapter M-9, r. 12.2).

8. This Regulation comes into force on the date of coming into force of subparagraph *b* of paragraph 1 of section 2 of the Act to amend mainly the Pharmacy Act to facilitate access to certain services, insofar as it replaces subparagraph 10 of the second paragraph of section 17 of the Pharmacy Act (chapter P-10).

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