

## EMERGENCY DISASTER GUIDELINE

Clearly, there is no precedent for the emergencies that occurred in New York City on 9/11/2001 or New Orleans in 9/2005. The New York State Education Department and the Board of Pharmacy certainly cannot anticipate every circumstance that may occur in which patients will need to find alternative prescribers and pharmacies. However, we offer the following general suggestions with the understanding that each pharmacist must apply appropriate professional judgment to each unique situation. Records of all emergency transactions **MUST** also be maintained.

- If a patient has had a prescription filled from a pharmacy that shares a common database and another pharmacist can access the database to verify the authenticity of the prescription, a prescription for a **non-controlled** substance with indicated refills can be refilled. Under the same circumstances, prescriptions for **controlled** substances may also be provided.
- If a patient brings a prescription to a pharmacy without a **shared database** and can present reasonable evidence (labeled prescription vial, label, receipt, etc. from a prescriber or a pharmacy in the affected area) that they were receiving a **non-controlled** substance from an inaccessible pharmacy, they may be provided with a quantity not to exceed a three-day supply.
- If a patient presents no evidence of a **non-controlled** substance and states they are in need of maintenance medication(s), using responsible professional judgment, the pharmacist may provide a quantity not to exceed a three-day supply.
- If a patient presents with no evidence of a **controlled** substance prescription and the prescriber is inaccessible, and the patient states they are in need of maintenance medication, the patient should be directed to an emergency medical care facility (hospital, urgent care, etc.).
- Pharmacists may transfer needed stock between and among pharmacies without a wholesale license in this emergency situation.