

**Title 20—DEPARTMENT OF
COMMERCE AND INSURANCE
Division 2220—State Board of Pharmacy
Chapter 6—Pharmaceutical Care Standards**

PROPOSED AMENDMENT

20 CSR 2220-6.040 Administration by Medical Prescription Order. The board is amending sections (2), (6), and (7) and adding new section (9).

PURPOSE: This amendment updates the rule's notification requirements and authorizes pharmacists to delegate medication administration to a trained qualified pharmacy technician.

(2) Except as otherwise provided by law, a pharmacist may not delegate medication administration to another person, except to an intern pharmacist **or qualified pharmacy technician** who has met the qualifications under subsections (3)(B)–(E) and is working under the direct supervision of a pharmacist who has met the qualifications to administer drugs pursuant to a medical prescription order.

(A) For purposes of this rule, a “qualified pharmacy technician” is defined as a currently registered Missouri pharmacy technician who:

- 1. Holds an active pharmacy technician certification issued by a certification entity accredited by the National Commission for Certifying Agencies,**
- 2. Has an initial and, if applicable, annual documented assessment of competency in medication administration; and**
- 3. Has assisted in the practice of pharmacy as a registered pharmacy technician in the state of Missouri for a minimum of one (1) year.**

(B) Proof of an intern's or qualified pharmacy technician's compliance with subsections (3)(B)–(E) must be maintained by both the supervising pharmacist and the intern pharmacist/qualified pharmacy technician for a minimum of two (2) years.

(6) Record Keeping.

(A) Pharmacists administering or supervising administration of medication pursuant to this rule shall ensure the following records are manually or electronically maintained separate from the prescription files of a pharmacy for each administration:

- 1. The name, address, and date of birth of the patient;**
- 2. The date, route, and anatomic site of the administration;**
- 3. The medication name and dose. For vaccines and biologics, the manufacturer, expiration date, and lot number must also be documented and recorded;**
- 4. For vaccines, the name and address of the patient's primary health care provider, as identified by the patient or an indication that a primary health care provider was not provided;**
- 5. The identity of the administering pharmacist, or if applicable, the administering intern pharmacist or qualified pharmacy technician and his/her supervising pharmacist; and**
- 6. If applicable, the nature of an adverse reaction and who was notified.**

(7) Notification Requirements. Pharmacists administering or supervising administration of medication under this rule, shall ensure:

[(A) The patient's primary health care provider, if provided by the patient, is notified of the following within fourteen (14) days of administering a vaccine:

- 1. The identity of the patient;*
- 2. The vaccine administered;*
- 3. The route of administration;*
- 4. The anatomic site of the administration;*
- 5. The dose administered; and*
- 6. The date of administration;]*

(A) For vaccines, a pharmacist shall inform the patient that the administration of the vaccine will be entered into the ShowMeVax system, as administered by the Department of Health and Senior Services. The patient shall attest to the inclusion of such information in the system by signing a form provided by the pharmacist. Entry into ShowMeVax must occur within fourteen (14) days. If the patient indicates that he or she does not want such information entered into the ShowMeVax system, the pharmacist must provide a written report within fourteen (14) days of administration of a vaccine to the patient's primary health care provider, if provided by the patient, containing:

- (1) The identity of the patient;**
- (2) The identity of the vaccine or vaccines administered;**
- (3) The route of administration;**
- (4) The anatomic site of the administration;**
- (5) The dose administered; and**
- (6) The date of administration;**

(B) The prescriber is notified within twenty-four (24) hours after learning of an adverse event or reaction experienced by a patient following administration. Notification is mandatory and cannot be waived. Vaccine adverse events or reactions must also be reported to the Vaccine Adverse Event Reporting System (VAERS) or its successor, within thirty (30) days; and

(9) A qualified pharmacy technician administering medication pursuant to this rule must be supervised by a Missouri-licensed pharmacist who is authorized to administer medication pursuant to this rule and who is physically present at the location when the medication is administered.

*AUTHORITY: section[s 338.140 and] 338.280, RSMo 2016, and section 338.010.1 and 338.140, RSMo Supp. [2017] 2020. * Emergency rule filed May 1, 2008, effective May 11, 2008, expired Feb. 18, 2009. Original rule filed May 1, 2008, effective Nov. 30, 2008. Amended: Filed Dec. 15, 2017, effective June 30, 2018. Amended: Filed Nov. 25, 2020.*

PUBLIC COST: This proposed amendment will not cost state agencies more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Board of Pharmacy, PO Box 625, 3605 Missouri Boulevard, Jefferson City, MO 65102, by facsimile at (573) 526-3464, or via email at pharmacy@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this rule in the **Missouri Register**. No public hearing is scheduled.*