

GUIDANCE TO PHARMACIST ADMINISTRATION OF LONG ACTING INJECTABLES

The North Carolina General Assembly has passed, and Governor Cooper has signed into law, legislation that authorizes immunizing pharmacists to administer long-acting injectable medications to patients age 18 and older pursuant to prescription. This new authority becomes effective on October 1, 2021.

This document summarizes the new authority and how pharmacists may exercise it.

Who may administer long-acting injectables?

Q. Must I be an “immunizing pharmacist” to administer long-acting injectable medications?

A. Yes. Recall that an immunizing pharmacist is one who:

(1) Holds a current provider level cardiopulmonary resuscitation certification issued by the American Heart Association or the American Red Cross, or an equivalent certification.

(2) Has successfully completed a certificate program in vaccine administration accredited by the Centers for Disease Control and Prevention, the Accreditation Council for Pharmacy Education, or a similar health authority or professional body approved by the Board.

(3) Maintains documentation of three hours of continuing education every two years, designed to maintain competency in the disease states, drugs, and vaccine administration.

(4) Has successfully completed training approved by the Division of Public Health's Immunization Branch for participation in the North Carolina Immunization Registry.

(5) Has notified the North Carolina Board of Pharmacy and the North Carolina Medical Board of immunizing pharmacist status.

(6) Administers vaccines or immunizations in accordance with G.S. 90-18.15B

Q. Is there additional training an immunizing pharmacist must obtain before administering long-acting injectable medications?

A. Yes. An immunizing pharmacist must also obtain, and document, training on the administration of long-acting injectables subcutaneously and intramuscularly.

Q. What kind of training meets this requirement?

A. The Board rule is flexible. Training may come from an ACPE-accredited course, a North Carolina Association of Pharmacists-accredited course, a curriculum-based program from an ACPE-accredited school of pharmacy, a state or local health department program, or training by an appropriately qualified practitioner.

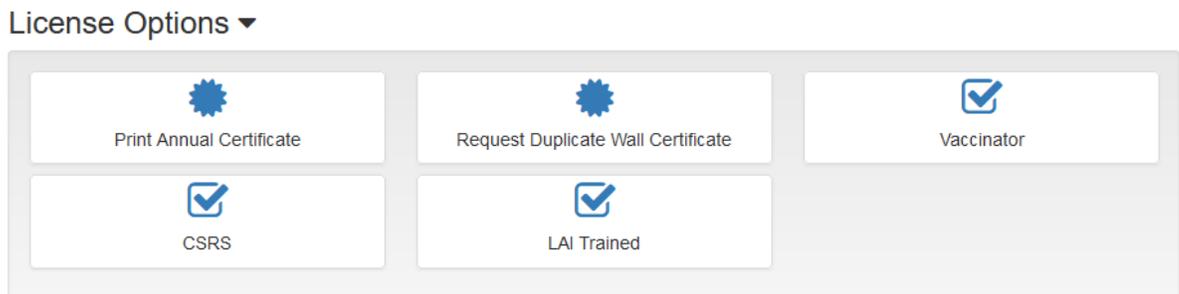
Q. How should I document this training?

A. For ACPE- or NCAP-accredited courses, the usual CE certificate suffices. If the training is from a health department or a qualified practitioner, the pharmacist should maintain documentation of when the training occurred, a description of the training, and the name and credentials of the trainer.

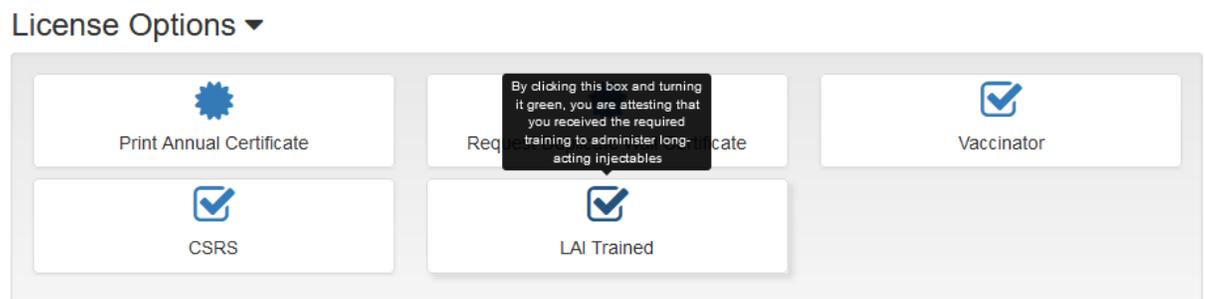
Q. Must I notify the Board of Pharmacy when I have completed this training?

A. Yes. Pharmacists should log on to their profile – <https://portal.ncbop.org/ProfileHome.aspx> – click their pharmacist license tile, and click the “LAI Trained” tile.

Location of the LAI Trained tile:

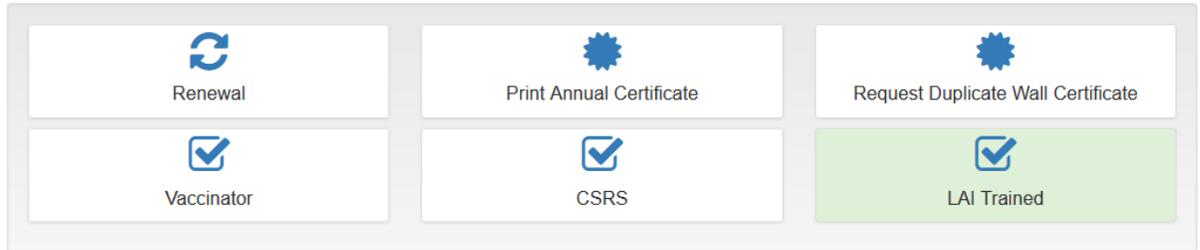


Hovering over the LAI Trained tile activates an explanatory text bubble:



Clicking on the LAI Trained tile turns it green to report trained status:

License Options ▾



Q. May a pharmacy intern administer a long-acting injectable?

A. A pharmacy intern – a student who is currently enrolled in a school of pharmacy and properly trained (see above) – may administer a long-acting injectable under the direct, in-person supervision of the immunizing pharmacist.

Q. May a pharmacy technician administer a long-acting injectable?

A. No.

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What qualifies as a long-acting injectable?

Q. What is a “long-acting injectable”?

A. Board rule defines a long-acting injectable as a “drug product formulated to produce sustained release and gradual absorption of the active pharmaceutical ingredient over an extended period of time after administration by subcutaneous or intramuscular injection.” The statute specifically includes testosterone and vitamin B12 injections. Other examples (this is not an exclusive list): haloperidol decanoate (Haldol), fluphenazine decanoate (Prolixin), paliperidone palmitate (Invega Sustenna), aripiprazole lauroxil (Aristada), aripiprazole (Abilify Maintena), risperidone (Risperdal Constan, Perseris), naltrexone (Vivitrol).

Q. Is Botox™ a “long-acting injectable” that pharmacists may administer?

A. No. As noted above, Board rule defines a long-acting injectable as “a drug product formulated to produce sustained release and gradual absorption of the active pharmaceutical ingredient over an extended period of time after administration by subcutaneous or intramuscular injection.” Botox is not a sustained release product. It is an immediate release product. It’s effects are long-lasting, but it is not a long-acting injectable.

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Eligible Patients

Q. What patients may receive a long-acting injectable from a qualified immunizing pharmacist?

A. The patient must be at least 18 years of age and must present a valid prescription order authorizing the administration.

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Pre-Administration Counseling

Q. What are my counseling obligations?

A. Before administering any long-acting injectable, the immunizing pharmacist must personally and affirmatively counsel the patient on the drug being administered.

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Post-Administration Records and Notifications

Q. What records must I maintain after administering a long-acting injectable?

A. You must record and maintain in readily retrievable form the following:

- (1) the name, address, and date of birth of the patient;
- (2) the date of the administration;
- (3) the administration site of injection (e.g., right arm, left leg, right upper arm);
- (4) route of administration of the drug;
- (5) the name, manufacturer, lot number, and expiration date of the drug;
- (6) dose administered;
- (7) the name and address of the prescriber; and
- (8) the name or identifiable initials of the Immunizing Pharmacist.

Q. What follow-up communication must I have with the prescriber concerning the LAI administration?

A. If the long-acting injectable is in the class of psychotropic medications, the immunizing pharmacist must notify the prescriber within 48 hours of administering the medication. If the patient declines to receive the injection, the immunizing pharmacist must notify the prescriber of that fact within 48 hours.

If the long-acting injectable is not a psychotropic medication, the immunizing pharmacist must notify the prescriber within 72 hours of administering the medication. If the patient declines to receive the injection, the immunizing pharmacist must notify the prescriber of that fact within 72 hours.