

# Guideline: Recommending, Prescribing, Dispensing and Selling Drugs in Practice

Drugs (prescription and non-prescription) are a consideration in dental hygiene treatment planning and can play an important role in helping clients achieve optimal oral health.

## INTRODUCTION

Drugs (prescription and non-prescription) are a consideration in dental hygiene treatment planning and can play an important role in helping clients achieve optimal oral health. Dental hygienists must be familiar with the pharmacology of drugs they recommend, prescribe and use in practice and must also be familiar with how each drug may interact with the client's current medications or medical condition. Throughout this document the word drug refers to both prescription and non-prescription drugs.

## SCOPE OF PRACTICE

On September 29, 2017, dental hygiene practice expanded to include the prescribing, dispensing and selling of chlorhexidine and fluoride to their clients. This permits dental hygienists and their clients to make full use of the therapeutic benefit of fluorides and chlorhexidine following an in-office intervention.

## USE OF GUIDELINES

This document contains principles and guidelines and is intended as a reference tool to help dental hygienists make informed decisions and follow proper protocols around the practice of recommending, prescribing, dispensing and selling drugs in dental hygiene practice. All dental hygienists, regardless of practice setting or employment arrangement, are expected to use their knowledge, skill and judgment to ensure that their clients receive safe, effective, and individualized treatment recommendations when incorporating drugs as part of a treatment plan.

The guiding principles below were created by an interprofessional working group of regulatory colleges that included the CDHO, and represent a code of professionalism amongst healthcare professionals and their clients.

### GUIDING PRINCIPLES<sup>1</sup>

- Professional relationships, based on trust and respect, exist between clients and health professionals.
- Clients are partners in their care.
- Health professionals are accountable for practising within their scopes of practice and in accordance with their knowledge, skill, and judgment.
- Health professionals obtain consent prior to providing care.

- Health professionals maintain client confidentiality and privacy in the provision of care.
- Health professionals are responsible for their own continuing professional development and for inter-professional development.
- Health professionals understand and respect each other's role and expertise and work together in the best interests of the client.
- Health professionals communicate with other health providers where appropriate, communication being central to good client care.

Dental hygienists play an integral role in a client's circle of care and need to be active in promoting inter-professional practice, aimed towards best treatment outcomes for their clients.

## SCHEDULING OF DRUGS IN ONTARIO

A drug schedule is a method of classification that places drugs in certain categories according to various characteristics. Ontario adopts the National Drug Scheduling System model developed by the National Association of Pharmacy Regulatory Authorities (NAPRA) as the provincial model ("scheduling by reference"). The schedules below describe the three schedules or four categories of drugs that Ontario uses.

**Schedule 1 Drugs:** These drugs require a prescription. In Ontario, chlorhexidine gluconate is the only schedule 1 drug that dental hygienists are able to prescribe, dispense or sell. However, dental hygienists may buy and use other schedule 1 drugs while providing therapeutic services to clients. For example, minocycline hydrochloride (Arestin), and doxycycline hyclate gel (Atridox) are schedule 1 drugs typically used by dental hygienists in conjunction with scaling and root planing to treat chronic periodontitis.

**Schedule 2 Drugs:** These drugs do not require a prescription. However, they do require professional intervention with an appropriately qualified healthcare professional. These items must be sold from an area where the public cannot access them and there is no opportunity for client self-selection. An example of a schedule 2 drug that is purchased in dental hygiene practice is nitroglycerin (typically found in the medical emergency kit).

**Schedule 3 Drugs:** These drugs are suitable for client self-selection, but may pose risks for certain groups of people and should be sold where an appropriately qualified healthcare professional is available to provide advice when required. For example, fluorides used for the prevention of dental caries, contain 1 mg or less of the fluoride ion per dosage unit and therefore do not require a prescription, but clients can only buy them from pharmacies.

**Unscheduled Drugs:** These drugs can be sold without professional intervention. The labelling of these drugs is considered to be sufficient enough to ensure that the client will make a safe and effective choice and will use the drug according to its directions. These drugs are not included in schedules 1, 2 or 3 and may be sold from any retail outlet. Examples of unscheduled drugs recommended by dental hygienists are acetaminophen, ibuprofen, and aspirin.

## DEFINITIONS

**Adverse drug reaction:** Also known as (ADR), Health Canada defines an adverse drug reaction as a noxious and unintended response to a drug which occurs at doses normally used or tested for the diagnosis, treatment or prevention of a disease or the modification of an organic function. All suspected adverse drug reactions must be reported to Health Canada (e.g., unexpected reactions regardless of their severity and reactions to recently marketed drugs regardless of severity).

**Compounding:** Compounding is defined as the act of combining two or more elements (of which at least one is a drug or pharmacologically active component) to create a distinct pharmaceutical product. The act of compounding is linked to administering the compounded drug or dispensing the compounded drug. If the health professional is dispensing the compounded drug, principles under dispensing also apply. Compounding does not include mixing, reconstituting, or any other manipulation that is performed in accordance with the directions for use on an approved drug's labelling material.

**Critical incident:** An event causing a substantial risk of serious health or safety consequences.

**Drug:** *Canada's Food and Drugs Act* defines drug as any substance or mixture of substances manufactured, sold or represented for use in:

- a) the diagnosis, treatment, mitigation or prevention of a disease, disorder or abnormal physical state, or its symptoms, in human beings or animals;
- b) restoring, correcting or modifying organic functions in human beings or animals; or
- c) disinfection in premises in which food is manufactured, prepared or kept.

Drugs can be prescription or non-prescription.

**Drug allergy:** An allergic reaction induced by hypersensitivity to a drug.

**Drug discrepancy:** An event that does not include actual administration or use of a drug by the client, but rather an error in the process that has been "caught" and "corrected" before the drug has been administered to the client. This is also known as a near miss or close call.

**Drug incident:** An event that involves the ingestion or improper use of a drug or its dosage by the client.

**Drug product monograph:** A document that contains valuable information including the amounts of ingredients in a drug or class of drugs, the directions for the drug's use, the conditions in which it may be used, contraindications for its use, specific safeguards for stability and storage, toxicology, and treatment in case of accidental exposure.

**Drug profile:** A drug profile is client specific and includes a comprehensive list of drugs (prescription and non-prescription) that a client is or was taking since his/her last health history update. Adverse drug reactions, client compliance and the dental hygienist's interpretation of how the drugs are affecting the client's overall health and oral health also form part of the drug profile.

**Informed consent:** The client has been presented with the necessary information about the nature, expected benefits, material risks and effects of a proposed treatment, alternative courses of action and the likely consequences of not having the treatment. In order for consent to be considered informed, the dental hygienist must use his/her professional judgment to determine if the client is capable of appreciating the information presented.

**Inter-professional practice:** Two or more professions working as a team, with a common purpose, commitment and mutual respect in order to improve client outcomes within healthcare.

**Medication error:** Health Canada defines a medication error as a mistake with medication, or a problem that could cause a mistake with medication. Medication errors are generally preventable and include errors like receiving the wrong medication or dose, or using the wrong route of administration. This is also known as a drug incident.

**Non-prescription drugs:** Non-prescription drugs include any drugs listed in Schedules 2 or 3 or drugs that are categorized as unscheduled by the National Association of Pharmacy Regulatory Authorities (NAPRA).

**Off-label:** Prescribing approved drugs for use other than their intended approved indication.

**Prescription drugs:** Drugs listed in schedule 1 of the National Association of Pharmacy Regulatory Authorities (NAPRA).

**Reconstituting:** The process of adding a diluent to a dry ingredient to make it a liquid. Some drugs need to be stored in a powdered form because they may rapidly lose their power once they are mixed into a solution.

**Safety Data Sheet (SDS):** A Safety Data Sheet (SDS) is a document that contains information on the potential hazards (health, fire, reactivity and environmental) and how to work safely with the chemical product. It also contains information on the use, storage, handling and emergency procedures all related to the hazards of the material.

**Side effect:** A predictable, dose-related response or consequence that occurs within therapeutic dose range and is undesirable.

**Stability:** The ability of a pharmaceutical dosage form to maintain the physical, chemical, therapeutic and microbial properties during the time of storage and usage by a client.

## PROFESSIONAL RESPONSIBILITIES

### PROFESSIONAL ACCOUNTABILITY

Regardless of practice setting or employment arrangement, dental hygienists are expected to use their knowledge, skill and judgment to determine which treatment, product, drug, referral or combination of, is in the client's best interest.

- Only recommend, prescribe, dispense and sell drugs appropriate for dental hygiene purposes.
- Recognize signs of substance abuse in clients and precautions needed to ensure that any treatment is appropriate to the client's oral condition and specific situation.

- Maintain clear, legible and transparent records in all aspects of the process of care including details about recommending, prescribing, dispensing and selling drugs.
- Ensure client privacy and confidentiality is maintained at all times.

### **COLLABORATION AND COMMUNICATION**

It is a standard of practice that dental hygienists develop and maintain professional relationships with colleagues, other health professionals, employers, and the CDHO to ensure optimal client care, safety, mutual respect and trust. Dental hygienists are expected to ensure client-centered care by establishing and maintaining positive, professional relationships with clients, families and significant others that are focused on client needs and based on respect, empathy and trust.

- Be active partners in a client's circle of care along with other healthcare professionals when determining the best course of treatment.
- Collaborate and consult with appropriate healthcare professionals to ensure that any drugs recommended are suitable and safe to use.
- Ensure that effective communication techniques are used and clients are able to fully understand and appreciate the how, why, when and potential risks of drugs recommended, prescribed, dispensed and sold.
- Obtain and document informed consent.

### **JURISPRUDENCE**

The authority to prescribe, dispense and/or sell anticariogenics and antimicrobials is found in the CDHO Designated Drugs Regulation of the *Dental Hygiene Act, 1991*. The regulation describes the conditions that must be met in conjunction with prescribing, dispensing and/or selling drugs.

- Successfully complete the CDHO *Drugs in Dental Hygiene Practice* Examination (DDHPE).
- Do not delegate prescribing to another person.
- Do not recommend, prescribe, dispense and sell a drug that results, directly or indirectly, in a personal or financial benefit.
- Only recommend, prescribe, dispense and sell a drug that is in compliance with all applicable federal and provincial laws and is approved for use in Canada.
- Do not recommend, prescribe, dispense and sell drugs for off-label use.
- Do not prescribe drugs for personal use.
- Only prescribe, dispense and/or sell drugs to family members if they are clients of record and they are required to help treat an oral condition.

## **CONTINUING COMPETENCY**

As a standard of practice, dental hygienists acknowledge that continual inquiry and learning is paramount to professional practice and client-centered care. During their professional career, dental hygienists maintain continuous competency by participating in the Quality Assurance Program that continually verifies the individual dental hygienist's ability to perform and apply knowledge, skills, judgments and attitudes that contribute to the safety and quality of client outcomes and the evidence base for dental hygiene practice.

- Ensure and enhance competency by researching current knowledge related to drugs and drug therapies used in dental hygiene practice.
- Ensure that any drug therapy recommended is based on evidence-informed research.
- Ensure that all drug reference materials are current and up-to-date.

## **RECOMMENDING AND PRESCRIBING**

Prescribing is a privilege available to dental hygienists who have demonstrated the appropriate skill, knowledge and judgment by successfully passing the Drugs in Dental Hygiene Practice Examination (DDHPE). This section describes the principles that dental hygienists must use when issuing a prescription to ensure that a client is given a safe and effective drug regimen. The following are expectations before prescribing, when prescribing and after prescribing.

Recommending drugs must follow the same principles as prescribing even though issuing a prescription is not a requirement for a schedule 2, 3 and unscheduled drug.

### **BEFORE PRESCRIBING:**

- Ensure that prescriptions are only issued for individuals with whom you have a dental hygienist-client relationship.
- Only prescribe drugs for the purposes of treating a client's oral condition.
- Review the health history including the drugs the client is currently taking.
- Consideration must be given to the most appropriate drug in treating the current condition to achieve optimum oral health.
- Consideration must be given to potential interactions between current medications and the drug that is being prescribed.

### **WHEN PRESCRIBING:**

#### *Written, verbal and faxed.*

- Use a handwritten or typed prescription on a formal prescription template to reduce the chance of misinterpretation associated with verbal or faxed transmissions.
- Verbal prescriptions should be used in urgent situations only.

## RECOMMENDING, PRESCRIBING, DISPENSING AND SELLING DRUGS IN PRACTICE

- Faxing should be used with caution:
  - some pharmacies may not accept;
  - transmissions may be subject to random marks (fax noise) leading to misinterpretations;
  - a follow-up may be needed for clarification or verification purposes;
  - a prescription must only be faxed to a single pharmacy.
- Prescriptions must be understandable, legible, and contain the following information:
  - the name and address of the person for whom the drug is prescribed;
  - the name, strength (where applicable) and quantity of the drug that is prescribed;
  - the directions for use;
  - the member's name, address, telephone number, title and registration number issued by the College;
  - the member's signature;
  - the date on which the drug is prescribed; and
  - the number of refills, if applicable.

The sample prescription below is intended as a guide only. Prescription templates and methods of writing appropriate prescriptions may vary and the principles contained in the guidelines above will ensure that the appropriate information to have the prescription processed efficiently is present.

<p><b>Required:</b> The member's name, address, telephone number, title and registration number issued by the College.</p>	<p><b>Helpful hint:</b> Thinking of faxing a prescription? Contact the pharmacy to ask about any additional information they require to verify the validity of the prescription.</p>	
<p><b>Required:</b> The name and address of the person for whom the drug is prescribed.</p>	<p style="text-align: center;">Mary Jones R.D.H. CDHO Reg. #999999 ABC Dental Hygiene Clinic 23 Sickle Street Toronto, ON A1A 1A1 416-123-4567</p> <hr/> <p style="text-align: right;"><b>Date:</b> January 1, 2015</p> <p><b>Name:</b> Ms. Paula Sommers <span style="float: right;"><b>Gender:</b> Female</span>  <b>Address:</b> 5 Main Street, Toronto, Ontario M3L 3G5  <b>Date of Birth:</b> March 23, 1962  <b>Telephone:</b> 647-963-3920</p> <p style="text-align: center;"><b>Rx</b></p> <p style="text-align: center;"><b>CHLORHEXIDINE GLUCONATE 0.12 % Oral Rinse</b></p> <p><b>Disp:</b> 475 mL (1 bottle)</p> <p><b>Sig:</b> Rinse with 20 mL twice daily for 30 seconds for gingivitis. Do not swallow. Do not eat or drink for 2 to 3 hours after use. Use until all medication is gone.</p> <p style="text-align: right;"><b>Refills:</b> 0</p> <p><b>Prescriber's Signature:</b> <i>Mary Jones R.D.H.</i></p>	<p><b>Required:</b> The date on which the drug is prescribed. Full date is expected.</p>
<p>Symbol Rx indicates take thou.</p>		<p><b>Suggested:</b> Date of birth and gender as this will aid a pharmacist in confirming a client's identity.</p>
<p>Name of the prescribed drug (always use the proper name), followed by strength (e.g. mg) and dosage form (e.g. liquid) if appropriate. If the dental hygienist wants the client to have a specific brand, it should be included as well.</p>		<p><b>Required:</b> The name, strength (where applicable) and quantity of the drug that is prescribed.</p>
<p><b>Disp:</b> (Dispense). Quantity of drug to be dispensed.</p>		<p><b>Required:</b> The directions for use.</p>
<p><b>Sig.:</b> (Signatura). Complete directions for use including route of administration and frequency if applicable. It is also advisable to include the indication for use. "As directed" is not considered an acceptable direction for use.</p>		<p><b>Required:</b> The number of refills (if applicable).</p>
<p><b>Required:</b> The member's signature.</p>		

**WHEN PRESCRIBING (CONT'D):**

- Prescribing is limited to chlorhexidine and its salts.
- Fluoride (topical and systemic delivery) used for caries prevention does not require a prescription because it contains less than 1 mg of fluoride ion per dosage unit and falls under schedule 3 of the National Drug Scheduling System.
- Drugs purchased from a pharmacy for use in a dental hygiene practice should have a clear notation on a prescription that it is “FOR IN OFFICE USE”.
- An accurate copy of the information recorded on the client’s prescription must be recorded in the client’s health record. Photocopies and carbon copies are acceptable and convenient.

**AFTER PRESCRIBING:**

- Educate clients about why the drug was prescribed, how the drug works, how and when to take it including missed doses, and any possible side effects.
- Ensure that client’s right to choose a pharmacy is respected and take any steps necessary to help accommodate this.
- Respond in a timely matter when contacted by a healthcare provider for purposes of verifying a prescription or questions about the drug prescribed.
- Ensure that an on-going evaluation of the client’s response to the prescribed drug(s) allows for a timely refill, modification or discontinuation of the prescription as required.
- Report any adverse reactions regardless of severity to Health Canada – MedEffect Canada (This information can be found on the Relevant Links and Telephone Numbers section of this document.)

## DISPENSING

The process of dispensing involves both technical and cognitive components. It involves interpretation, evaluation, and implementation of a prescription or non-prescription drug order including the preparation and delivery of a drug to a client, or a client’s agent, in an appropriately labelled container for administration to, or use by, a client.<sup>ii</sup>

The technical component of dispensing includes tasks such as receiving and reading the prescription, checking the expiry date, appropriately labelling the product, physically inspecting the product and appropriate record keeping.

The cognitive component of dispensing includes assessing the therapeutic appropriateness of the prescription, counselling the client on the drug and its use as it relates to their condition, and providing follow-up when required.<sup>iii</sup>

Dental hygienists who are going to dispense drugs to their clients must ensure that they are doing so in accordance with the following principles. Similar to prescribing, only dental hygienists who have demonstrated they have the appropriate skill, knowledge and judgment by successfully passing the CDHO Drugs in Dental Hygiene Practice Examination are authorized to dispense drugs.

Expectations for dispensing:

- Drugs can only be dispensed for individuals with whom the dental hygienist has a dental hygienist-client relationship.
- Drugs can only be dispensed for the purposes of treating a client's oral condition.
- Drugs can only be dispensed with a valid prescription from:
  - the dental hygienist dispensing; or
  - another regulated health professional who the dental hygienist works with in a collaborative relationship (e.g. dentist).
- Consideration must be given to potential interactions between current medications and the drug that is being dispensed.
- Drugs being dispensed are not expired and will not expire before the date on which the client is expected to take the last of the drug.
- A reasonable quantity of the drug is dispensed keeping with the therapeutic intent of the drug.
- The container in which the drug will be dispensed must be marked with:
  - a DIN (drug identification number) where applicable;
  - the dental hygienist's name and designation (e.g. RDH);
  - the name, address and telephone number of the place from which the drug is dispensed (e.g. clinic address and telephone number);
  - the name, strength, where applicable, and, if available, its manufacturer;
  - the quantity of the drug dispensed;
  - the date the drug is dispensed.
  - the expiry date of the drug, if applicable;
  - the name of the client for whom the drug is dispensed;
  - the directions for use.

The sample label below is intended as a guide only. Label templates and methods of printing appropriate labels may vary, and the principles listed above will ensure that dental hygienists provide the appropriate information required on the label.

**Required:** The dental hygienist's name and designation. The name, address and telephone number of the place from which the drug is dispensed.

Mary Jones R.D.H.  
CDHO Reg. #999999  
ABC Dental Hygiene Clinic  
23 Sickle Street  
Toronto, ON A1A 1A1  
416-123-4567

**Required:** The name of the client for whom the drug is dispensed.

**Required:** The date the drug is dispensed.

**For:** Ms. Paula Sommers

**Date:** November 15, 2014

**PERIDEX**  
**CHLORHEXIDINE GLUCONATE 0.12 % Oral Rinse 475 mL**

**Required:** The directions for use.

**Directions:** Rinse with 20 mL twice daily for 30 seconds.  
Do not swallow. Do not eat or drink for 2 to 3 hours after use.  
Use until all medication is gone.

**If applicable:** Expiry date of the drug.

**Expiry Date:** December 2016

**DIN:** 02237452

**If applicable:** DIN (drug identification number).

- A copy of the information above must be recorded in the client's health record.
- Some drugs that are dispensed already come prepackaged and contain some of the information required on the list above. In cases like this, it is not necessary to duplicate the information (e.g., expiry date or DIN) on the label.

When dispensing any drug, a second competent person should review the label to ensure that all information is accurate to help reduce potential drug errors or incidents.

**SELLING**

The Canada *Food and Drugs Act* defines sell as “offer for sale, expose for sale, have in possession for sale and distribute, whether or not the distribution is made for consideration”. The act of selling can be linked to dispensing a drug. If the health professional dispenses a drug in conjunction with selling, principles of dispensing also apply.

Selling a drug should be reserved for special circumstances. For example, instances when a pharmacy cannot be accessed by the client or the pharmacy has run out of the specific drug.

When selling a drug:

- Only the actual cost of the drug can be charged. Selling drugs for profit (direct or indirect) is not permitted.
- Include in the client's health record:
  - Name of drug sold to client.
  - The price charged.
  - Confirmation of the dental hygienist-client relationship.
  - Notation that drug was sold for therapeutic purposes only.

Dental hygienists should not advertise themselves as someone who is authorized to sell drugs unless it is clearly stated that drugs can only be sold to a person with whom the dental hygienist has a dental hygienist-client relationship.

## **STORAGE AND DISPOSAL**

When deciding whether to offer the service of dispensing and selling drugs to your client, it is important to remember that appropriate storage and disposal principles need to be followed. The dangers of storing and disposing drugs improperly can vary from drug instability, abuse or overdose (depending on the drug) to having a negative environmental impact.

### **STORAGE**

When storing drugs, consider stability, security, and safety.

- Always reference drug product monographs and MSD sheets.

### **STABILITY**

- Store medications in their original container.
- Avoid leaving medications in heat and sunlight for a prolonged period of time.
- Avoid bathrooms, sterilization areas and compressor rooms because heat and humidity can damage medications.
- Know which medications need to be refrigerated or kept at room temperature.
- Make sure medications kept in the refrigerator do not freeze.
- Discard outdated or expired medications.

## **SECURITY**

- Store all medications in the same secured location, preferably out of sight.
- Ensure that drugs labelled with client personal information are stored in a private area where the public does not have access.

## **SAFETY**

- Ensure that all expired or unusable medications are marked “For Disposal” and stored in a separate area until they can be properly disposed.
- Ensure the Ontario Poison Control contact number is in an easily accessible location (e.g. posted by all phones in the office). This information can be found on the Relevant Links and Telephone Numbers section of this document.
- Retain toxicology information for stored drugs including protocols for overdose, accidental exposure and adverse effects.
- Ensure all office staff is aware of location of stored drugs and protocols for overdose, accidental exposure and adverse effects.
- Ensure medical emergency kit and oxygen supply is easily accessible and location is known to all office workers.

A drug product monograph contains valuable information including specific safeguards for stability and storage, toxicology, and treatment in case of accidental exposure.

## **DISPOSAL**

Most drugs have an expiry date that usually indicates the timeframe that the drug will be fully effective/active and safe to use. Any drug that has expired and/or is no longer needed should be disposed of appropriately in accordance with local, provincial, and federal legislation.

- Check all drug labels to see if there are specific disposal instructions.
- Drugs should never be flushed down the toilet or poured down the sink unless specifically stated on the drug’s label.
- Ensure that all expired or unusable drugs are marked and stored in a separate area until they can be safely disposed.
- Before disposing of a drug’s container, ensure that all client information (if applicable) on the label has been removed or scratched off and is no longer visible.

There are programs for safe disposal of drugs in Ontario. Private companies or even certain pharmacies may take back old, expired and unused drugs and dispose of them in an environmentally safe manner. Contact your local pharmacy to determine if this is a service they offer.

## RELEVANT LINKS AND IMPORTANT TELEPHONE NUMBERS

- **Health Canada's Drugs and Health Products**

<https://www.canada.ca/en/health-canada/services/drugs-health-products.html>

This site provides up-to-date information on current developments and issues pertaining to prescription and non-prescription drugs as well as natural health products in Canada.

- **Health Canada's Drug Product Database (DPD)**

<https://www.canada.ca/en/health-canada/services/drugs-health-products/drug-products/drug-product-database.html>

The DPD contains product specific information on drugs approved for use in Canada. The database is managed by Health Canada and includes human pharmaceutical and biological drugs, veterinary drugs and disinfectant products. It contains approximately 15,000 products which companies have notified Health Canada as being marketed. Information regarding if a drug has been discontinued can be found here. A product's Drug Identification Number (DIN) can also be found here.

- **Health Canada's Licensed Natural Health Products Database (LNHPD)**

<https://www.canada.ca/en/health-canada/services/drugs-health-products/natural-non-prescription/applications-submissions/product-licensing/licensed-natural-health-products-database.html>

The LNHPD contains information about natural health products that have been issued a product license by Health Canada. Products with a license have been assessed by Health Canada and found to be safe, effective and of high quality under their recommended conditions of use. Licensed natural health products can be recognized by looking for the eight-digit Natural Product Number (NPN) or Homeopathic Medicine Number (DIN-HM) on the label.

- **Health Canada's Notice of Compliance Database (NOC)**

<https://www.canada.ca/en/health-canada/services/drugs-health-products/drug-products/notice-compliance/database.html>

A Notice of Compliance (NOC) is issued to a manufacturer following the satisfactory review of a submission for a new drug, and signifies compliance with the Food and Drug Regulations. This database provides information about when a company was granted approval to market a drug in Canada. The database contains NOC information on human drugs from January 1, 1994 to date.

- **MedEffect Canada**

<https://www.canada.ca/en/health-canada/services/drugs-health-products/medeffect-canada.html>

This Health Canada database provides complete listings of advisories, warnings and recalls about drugs and health products. This website also provides access to the Canada Vigilance Adverse Reaction Online Database which is Health Canada's post-market surveillance program that collects and assesses reports of suspected adverse reactions to health products marketed in Canada. Information for reporting an adverse reaction is located on the Canada Vigilance Adverse Reaction Online Database.

- **Ontario Poison Centre**

<https://www.ontariopoisoncentre.ca/>

1-800-268-9017

416-813-5900

The primary role of the Poison Centre is to provide telephone information and advice about potential or real exposures to poisonous substances. Call if you suspect a poisoning and the person is breathing and conscious, otherwise call 911.

- **National Association of Pharmacy Regulatory Authorities (NAPRA)**

<https://napra.ca/>

NAPRA national leadership in pharmacy regulatory practices that enhance client care and public protection. NAPRA is responsible for the scheduling of drugs in Canada.

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<sup>i</sup> *The Common Principles of Shared Controlled Acts in Ontario* Ad Hoc Inter-professional Working Group, October 2010

<sup>ii</sup> Ontario College of Pharmacists (OCP) <https://www.ocpinfo.com/regulations-standards/practice-policies-guidelines/usual-customary/>

<sup>iii</sup> Ontario College of Pharmacists (OCP) <https://www.ocpinfo.com/regulations-standards/practice-policies-guidelines/usual-customary/>