



WHEN TO CHECK OARRS – PHARMACISTS

Per OAC 4729:5-5-08, prior to dispensing an outpatient prescription for a controlled substance or a drug containing gabapentin, at a minimum, a pharmacist shall request and review an OARRS report covering at least a one year time period in any of the following circumstances:



RULE 1: A patient adds a new or different controlled substance or a drug containing gabapentin to the patient's therapy that was not previously included.



RULE 2: An OARRS report has not been reviewed for that patient during the preceding 12 months, as indicated in the patient profile.



RULE 3: A prescriber is located outside the usual pharmacy geographic area.



RULE 4: A patient is from outside the usual pharmacy geographic area.



RULE 5: A pharmacist has reason to believe the patient has received prescriptions for controlled substances or a drug containing gabapentin from more than one prescriber in the preceding three months, unless the prescriptions are from prescribers who practice at the same physical location (i.e. same group practice).



RULE 6: Patient is exhibiting signs of potential abuse or diversion. This includes, but is not limited to, over-utilization, early refills, appears overly sedated or intoxicated upon presenting a prescription for a reported drug, or an unfamiliar patient requesting a reported drug by specific name, street name, color, or identifying marks.

Remember: *To be valid, a prescription must be issued for a legitimate medical purpose by a prescriber acting in the usual course of their practice. The responsibility for the proper prescribing is upon the prescriber; however, a corresponding responsibility also rests with the pharmacist who dispenses the prescription. Pharmacists shall use professional judgment when making a determination about the legitimacy of a prescription.*

A pharmacist shall not dispense a prescription of doubtful, questionable, or suspicious origin [OAC 4729:5-5-08 (G), 4729:5-5-10 (A), & 4729:5-5-15 (A)].

It's OK to say no. You might just save a life.



WHEN TO CHECK OARRS – PRESCRIBERS

Ohio law and rules require a prescriber to check OARRS in the following circumstances:

1. Before prescribing or personally furnishing an opioid analgesic or benzodiazepine to a patient.¹
2. When the course of treatment with a reported drug *other than* an opioid analgesic or benzodiazepine has lasted more than ninety (90) days.¹
3. When red flags are present.²

WHEN TO FOLLOW-UP IN OARRS

Ohio law and rules require a prescriber to conduct a follow-up check in OARRS in the following circumstances:

- When treatment with an opioid analgesic or benzodiazepine lasts more than ninety (90) days, OARRS should be reviewed at least every ninety (90) days during course of treatment.
- At least annually following the initial OARRS report when treatment with a reported drug *other than* an opioid analgesic or benzodiazepine lasts more than ninety (90) days.

OHIO REGULATIONS

The full rules adopted by Ohio's health care regulatory boards can be found:

Medical Board Rules: 4731-11-11^{1,2}, 4731-33-02, 4731-33-03, 4730-2-10^{1,2}, 4730-4-02

Nursing Board Rules: 4723-9-12^{1,2}, 4723-9-13, 4723-9-14

Dental Board Rule: 4715-6-01^{1,2}

Ohio Vision Professionals Board Rule: 4725-16-04²

