

PRESCRIPTION FORMAT FOR A HOSPICE OUTPATIENT

Rule 4729-5-14 [Effective 07/01/2001]

For purposes of preprinted prescription forms for hospice outpatients, the following conditions apply:

- (A) Preprinted prescription forms may contain multiple orders on one form and the prescriber may select as many drug orders as necessary. Additional prescriptions may be manually added to this sheet.
- (B) Preprinted forms may not contain prescription orders for schedule II drugs. Schedule II drugs may be manually added to the preprinted forms and signed by the prescriber.
- (C) The prescriber shall indicate on each preprinted form the drug orders authorized on the form by either:
 - (1) Manually indicating the total drug orders authorized on the form; or
 - (2) Manually initialing each drug order.
- (D) All written drug orders must be signed by the prescriber.
- (E) All signed prescriptions may be faxed from the prescriber or the hospice location to the pharmacy.
- (F) At the direction of the prescriber, verbal drug orders may be transmitted to the pharmacy by the hospice nurse, except for schedule II drug orders.

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