



## 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.<sup>1</sup>
2. When the course of treatment with a reported drug *other than* an opioid analgesic or benzodiazepine has lasted more than ninety (90) days.<sup>1</sup>
3. When red flags are present.<sup>2</sup>

## 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<sup>1,2</sup>, 4731-33-02, 4731-33-03, 4730-2-10<sup>1,2</sup>, 4730-4-02

**Nursing Board Rules:** 4723-9-12<sup>1,2</sup>, 4723-9-13, 4723-9-14

**Dental Board Rule:** 4715-6-01<sup>1,2</sup>

**Ohio Vision Professionals Board Rule:** 4725-16-04<sup>2</sup>

