

RULE ANALYSIS

Introduction: THE AMENDMENTS ARE SUBMITTED TO THE BOARD FOR CONSIDERATION AS AN ADOPTED RULE

Short Title: Prescription Transfers

Rule Numbers: §291.34

Statutory Authority: Texas Pharmacy Act, Chapter 551-566 and 568-569, Occupations Code:

- (1) Section 551.002 specifies that the purpose of the Act is to protect the public through the effective control and regulation of the practice of pharmacy; and
- (2) Section 554.051 gives the Board the authority to adopt rules for the proper administration and enforcement of the Act.

Purpose: The amendments to §291.34, if adopted, update the requirements for transferring prescriptions to be consistent with the Drug Enforcement Administration (DEA) requirements.

The Board reviewed and voted to propose the amendments during the August 5, 2014, meeting. The proposed amendments were published in the September 26, 2014, issue of the *Texas Register* at 39 TexReg 7702.

1 **PART 15. TEXAS STATE BOARD OF PHARMACY**

2 **CHAPTER 291. PHARMACIES**

3 **SUBCHAPTER B. COMMUNITY PHARMACY (CLASS A)**

4 **22 TAC §§291.31, 291.33, 291.34**

5 The Texas State Board of Pharmacy proposes amendments to §291.31, concerning Definitions;
6 §291.33, concerning Operational Standards; and §291.34, concerning Records. The amendments
7 to §291.31, if adopted, update the definition of a new prescription drug order. The amendments
8 to §291.33, if adopted, update the patient counseling requirements allowing written information
9 about a medication to be provided to patients electronically, eliminate the requirement that the
10 pharmacy have a patient prescription drug information reference text or leaflets available for
11 patients, eliminate the requirement that a patient is offered information about refilled
12 prescriptions, and eliminate the sign regarding the availability of a pharmacist to ask questions.
13 The amendments to §291.34, if adopted, update the requirements for transferring prescriptions to
14 be consistent with the Drug Enforcement Administration (DEA) requirements.

15 Gay Dodson, R.Ph., Executive Director/Secretary, has determined that, for the first five-year
16 period the rule is in effect, there will be no fiscal implications for state or local government as a
17 result of enforcing or administering the rule.

18 Ms. Dodson has determined that, for each year of the first five-year period the rule will be in
19 effect, the public benefit anticipated as a result of enforcing the amendment will be to ensure
20 pharmacists provide adequate patient counseling and transfer prescriptions in accordance with
21 DEA requirements in order to adequately protect the public. There is no fiscal impact for
22 individuals, small or large businesses, or to other entities which are required to comply with this
23 section.

24 Comments on the amendments may be submitted to Allison Benz, R.Ph., M.S., Director of
25 Professional Services, Texas State Board of Pharmacy by mail at 333 Guadalupe Street, Suite 3-
26 600, Austin, Texas 78701 or by fax at (512) 305-8008. Comments must be received by 5:00
27 p.m., October 31, 2014.

28 The amendments are proposed under §551.002 and §554.051 of the Texas Pharmacy Act
29 (Chapters 551 - 566 and 568 - 569, Texas Occupations Code). The Board interprets §551.002 as
30 authorizing the agency to protect the public through the effective control and regulation of the
31 practice of pharmacy. The Board interprets §554.051(a) as authorizing the agency to adopt rules
32 for the proper administration and enforcement of the Act.

33 The statutes affected by these amendments: Texas Pharmacy Act, Chapters 551 - 566 and 568 -
34 569, Texas Occupations Code.

35 *§291.31.Definitions.*

36 The following words and terms, when used in this subchapter, shall have the following
37 meanings, unless the context clearly indicates otherwise.

38 (1) - (27) (No change.)

39 (28) New prescription drug order--A prescription drug order that[=]

40 [~~(A)~~] has not been dispensed to the patient in the same strength and dosage form by this
41 pharmacy within the last year.[=]

42 [~~(B) is transferred from another pharmacy; and/or~~]

43 [~~(C) is a discharge prescription drug order. (Note: furlough prescription drug orders are not~~
44 ~~considered new prescription drug orders.)~~]

45 (29) - (46) (No change.)

46 §291.33.Operational Standards

47 (a) (No change.)

48 (b) Environment.

49 (1) General requirements.

50 (A) - (B) (No change.)

51 (C) A Class A pharmacy which serves the general public shall contain an area which is suitable
52 for confidential patient counseling.

53 (i) Such counseling area shall be:

54 (I) easily accessible to both patient and pharmacists and not allow patient access to prescription
55 drugs; and

56 (II) designed to maintain the confidentiality and privacy of the pharmacist/patient
57 communication.

58 (ii) In determining whether the area is suitable for confidential patient counseling and designed
59 to maintain the confidentiality and privacy of the pharmacist/patient communication, the board
60 may consider factors such as the following:

61 (I) the proximity of the counseling area to the check-out or cash register area;

62 (II) the volume of pedestrian traffic in and around the counseling area;

63 (III) the presence of walls or other barriers between the counseling area and other areas of the
64 pharmacy; and

65 (IV) any evidence of confidential information being overheard by persons other than the patient
66 or patient's agent or the pharmacist or agents of the pharmacist.

67 (D) - (G) (No change.)

68 (2) - (3) (No change.)

69 (c) Prescription dispensing and delivery.

70 (1) Patient counseling and provision of drug information.

71 (A) To optimize drug therapy, a pharmacist shall communicate to the patient or the patient's
72 agent, information about the prescription drug or device which in the exercise of the pharmacist's
73 professional judgment the pharmacist deems significant, such as the following:

74 (i) ~~the~~ name and description of the drug or device;

75 (ii) dosage form, dosage, route of administration, and duration of drug therapy;

76 (iii) special directions and precautions for preparation, administration, and use by the patient;

77 (iv) common severe side or adverse effects or interactions and therapeutic contraindications that
78 may be encountered, including their avoidance, and the action required if they occur;

79 (v) techniques for self-monitoring of drug therapy;

80 (vi) proper storage;

81 (vii) refill information; and

82 (viii) action to be taken in the event of a missed dose.

83 (B) Such communication shall be:

84 (i) provided to new and existing patients of a pharmacy with each new prescription drug order. A
85 new prescription drug order is one that has not been dispensed by the pharmacy to the patient in
86 the same dosage and strength within the last year;

87 (ii) provided for any prescription drug order dispensed by the pharmacy on the request of the
88 patient or patient's agent;

89 (iii) communicated orally in person unless the patient or patient's agent is not at the pharmacy or
90 a specific communication barrier prohibits such oral communication;

91 (iv) documented by recording the initials or identification code of the pharmacist providing the
92 counseling in the prescription dispensing record as follows:

93 (I) on the original hard-copy prescription, provided the counseling pharmacist clearly records his
94 or her initials on the prescription for the purpose of identifying who provided the counseling;

95 (II) in the pharmacy's data processing system;

96 (III) in an electronic logbook; or

97 (IV) in a hard-copy log; and

98 (v) reinforced with written information relevant to the prescription and provided to the patient or
99 patient's agent. The following is applicable concerning this written information.

100 (I) Written information must be in plain language designed for the patient and printed in an
101 easily readable font [size] comparable to but no smaller than ten-point Times Roman. This
102 information may be provided to the patient in an electronic format, such as by e-mail, if the
103 patient or patient's agent requests the information in an electronic format and the pharmacy
104 documents the request.

105 (II) When a compounded preparation is dispensed, information shall be provided for the major
106 active ingredient(s), if available.

107 (III) For new drug entities, if no written information is initially available, the pharmacist is not
108 required to provide information until such information is available, provided:

109 (-a-) the pharmacist informs the patient or the patient's agent that the product is a new drug entity
110 and written information is not available;

111 (-b-) the pharmacist documents the fact that no written information was provided; and

112 (-c-) if the prescription is refilled after written information is available, such information is
113 provided to the patient or patient's agent.

114 (IV) The written information accompanying the prescription or the prescription label shall
115 contain the statement "Do not flush unused medications or pour down a sink or drain." A drug
116 product on a list developed by the Federal Food and Drug Administration of medicines
117 recommended for disposal by flushing is not required to bear this statement.

118 (C) Only a pharmacist may verbally provide drug information to a patient or patient's agent and
119 answer questions concerning prescription drugs. Non-pharmacist personnel may not ask
120 questions of a patient or patient's agent which are intended to screen and/or limit interaction with
121 the pharmacist.

122 (D) Nothing in this subparagraph shall be construed as requiring a pharmacist to provide
123 consultation when a patient or patient's agent refuses such consultation. The pharmacist shall
124 document such refusal for consultation.

125 (E) In addition to the requirements of subparagraphs (A) - (D) of this paragraph, if a prescription
126 drug order is delivered to the patient at the pharmacy, the following is applicable.

127 (i) So that a patient will have access to information concerning his or her prescription, a
128 prescription may not be delivered to a patient unless a pharmacist is in the pharmacy, except as
129 provided in subsection (b)(3) of this section.

130 (ii) Any prescription delivered to a patient when a pharmacist is not in the pharmacy must meet
131 the requirements described in subparagraph (F) of this paragraph.

132 ~~[(iii) A Class A pharmacy shall make available for use by the public a current or updated patient
133 prescription drug information reference text or leaflets designed for the patient.]~~

134 (F) In addition to the requirements of subparagraphs (A) - (D) of this paragraph, if a prescription
135 drug order is delivered to the patient or his or her agent at the patient's residence or other
136 designated location, the following is applicable.

137 (i) The information as specified in subparagraph (A) of this paragraph shall be delivered with the
138 dispensed prescription in writing.

139 (ii) If prescriptions are routinely delivered outside the area covered by the pharmacy's local
140 telephone service, the pharmacy shall provide a toll-free telephone line which is answered during
141 normal business hours to enable communication between the patient and a pharmacist.

142 (iii) The pharmacist shall place on the prescription container or on a separate sheet delivered
143 with the prescription container in both English and Spanish the local and if applicable, toll-free
144 telephone number of the pharmacy and the statement: "Written information about this
145 prescription has been provided for you. Please read this information before you take the
146 medication. If you have questions concerning this prescription, a pharmacist is available during
147 normal business hours to answer these questions at (insert the pharmacy's local and toll-free
148 telephone numbers)."

149 (iv) The pharmacy shall maintain and use adequate storage or shipment containers and use
150 shipping processes to ensure drug stability and potency. Such shipping processes shall include
151 the use of appropriate packaging material and/or devices to ensure that the drug is maintained at
152 an appropriate temperature range to maintain the integrity of the medication throughout the
153 delivery process.

154 (v) The pharmacy shall use a delivery system, which is designed to assure that the drugs are
155 delivered to the appropriate patient.

156 ~~[(G) Except as specified in subparagraph (B) of this paragraph, in the best interest of the public~~
157 ~~health and to optimize drug therapy, upon delivery of a refill prescription, a pharmacist shall~~
158 ~~ensure that the patient or patient's agent is offered information about the refilled prescription.~~
159 ~~Either a pharmacist or other pharmacy personnel shall inform the patient or patient's agent that a~~
160 ~~pharmacist is available to discuss the patient's prescription and provide information.]~~

161 ~~[(H) A pharmacy shall post a sign no smaller than 8.5 inches by 11 inches in clear public view at~~
162 ~~all locations in the pharmacy where a patient may pick up prescriptions. The sign shall contain~~
163 ~~the following statement in a font that is easily readable: "Do you have questions about your~~
164 ~~prescription? Ask the pharmacist." Such notification shall be in both English and Spanish.]~~

165 (G) ~~[(H)]~~ The provisions of this paragraph do not apply to patients in facilities where drugs are
166 administered to patients by a person required to do so by the laws of the state (i.e., nursing
167 homes).

168 (2) Pharmaceutical care services.

169 (A) Drug regimen review.

170 (i) For the purpose of promoting therapeutic appropriateness, a pharmacist shall, prior to or at the
171 time of dispensing a prescription drug order, review the patient's medication record. Such review
172 shall at a minimum identify clinically significant:

173 (I) known allergies;

174 (II) rational therapy-contraindications;

175 (III) reasonable dose and route of administration;

176 (IV) reasonable directions for use;

177 (V) duplication of therapy;

178 (VI) drug-drug interactions;

179 (VII) drug-food interactions;

180 (VIII) drug-disease interactions;

181 (IX) adverse drug reactions; and

182 (X) proper utilization, including overutilization or underutilization.

183 (ii) Upon identifying any clinically significant conditions, situations, or items listed in clause (i)
184 of this subparagraph, the pharmacist shall take appropriate steps to avoid or resolve the problem

185 including consultation with the prescribing practitioner. The pharmacist shall document such
186 occurrences as specified in subparagraph (C) of this paragraph.

187 (iii) The drug regimen review may be conducted by remotely accessing the pharmacy's electronic
188 data base from outside the pharmacy by:

189 (I) an individual Texas licensed pharmacist employee of the pharmacy provided the pharmacy
190 establishes controls to protect the privacy of the patient and the security of confidential records;
191 or

192 (II) a pharmacist employed by a Class E pharmacy provided the pharmacies have entered into a
193 written contract or agreement which outlines the services to be provided and the responsibilities
194 and accountabilities of each pharmacy in compliance with federal and state laws and regulations.

195 (iv) Prior to dispensing, any questions regarding a prescription drug order must be resolved with
196 the prescriber and written documentation of these discussions made and maintained as specified
197 in subparagraph (C) of this paragraph.

198 (B) Other pharmaceutical care services which may be provided by pharmacists include, but are
199 not limited to, the following:

200 (i) managing drug therapy as delegated by a practitioner as allowed under the provisions of the
201 Medical Practices Act;

202 (ii) administering immunizations and vaccinations under written protocol of a physician;

203 (iii) managing patient compliance programs;

204 (iv) providing preventative health care services; and

205 (v) providing case management of patients who are being treated with high-risk or high-cost
206 drugs, or who are considered "high risk" due to their age, medical condition, family history, or
207 related concern.

208 (C) Documentation of consultation. When a pharmacist consults a prescriber as described in
209 subparagraph (A) of this paragraph the pharmacist shall document on the hard-copy or in the
210 pharmacy's data processing system associated with the prescription such occurrences and shall
211 include the following information:

212 (i) date the prescriber was consulted;

213 (ii) name of the person communicating the prescriber's instructions;

214 (iii) any applicable information pertaining to the consultation; and

215 (iv) initials or identification code of the pharmacist performing the consultation clearly recorded
216 for the purpose of identifying the pharmacist who performed the consultation if on the
217 information is recorded on the hard-copy prescription.

218 (3) - (8) (No change.)

219 (d) - (i) (No change.)

220 **§291.34.Records.**

221 (a) (No change.)

222 (b) Prescriptions.

223 (1) - (6) (No change.)

224 (7) Prescription drug order information.

225 (A) All original prescriptions shall bear:

226 (i) name of the patient, or if such drug is for an animal, the species of such animal and the name
227 of the owner;

228 (ii) address of the patient, provided, however, a prescription for a dangerous drug is not required
229 to bear the address of the patient if such address is readily retrievable on another appropriate,
230 uniformly maintained pharmacy record, such as medication records;

231 (iii) name, address and telephone number of the practitioner at the practitioner's usual place of
232 business, legibly printed or stamped and if for a controlled substance, the DEA registration
233 number of the practitioner;

234 (iv) name and strength of the drug prescribed;

235 (v) quantity prescribed numerically and if for a controlled substance:

236 (I) numerically, followed by the number written as a word, if the prescription is written;

237 (II) numerically, if the prescription is electronic; or

238 (III) if the prescription is communicated orally or telephonically, as transcribed by the receiving
239 pharmacist;

240 (vi) directions for use;

241 (vii) intended use for the drug unless the practitioner determines the furnishing of this
242 information is not in the best interest of the patient;

- 243 (viii) date of issuance;
- 244 (ix) if a faxed prescription:
- 245 (I) a statement that indicates that the prescription has been faxed (e.g., Faxed to); and
- 246 (II) if transmitted by a designated agent, the name of the designated agent;
- 247 (x) if electronically transmitted:
- 248 (I) the date the prescription drug order was electronically transmitted to the pharmacy, if
- 249 different from the date of issuance of the prescription; and
- 250 (II) if transmitted by a designated agent, the name of the designated agent; and
- 251 (xi) if issued by an advanced practice nurse or physician assistant in accordance with Subtitle B,
- 252 Chapter 157, Occupations Code the:
- 253 (I) name, address, telephone number, and if the prescription is for a controlled substance, the
- 254 DEA number of the supervising practitioner; and
- 255 (II) address and telephone number of the clinic where the prescription drug order was carried out
- 256 or signed.
- 257 (B) At the time of dispensing, a pharmacist is responsible for documenting the following
- 258 information on either the original hard copy prescription or in the pharmacy's data processing
- 259 system:
- 260 (i) unique identification number of the prescription drug order;
- 261 (ii) initials or identification code of the dispensing pharmacist;
- 262 (iii) initials or identification code of the pharmacy technician or pharmacy technician trainee
- 263 performing data entry of the prescription, if applicable;
- 264 (iv) quantity dispensed, if different from the quantity prescribed;
- 265 (v) date of dispensing, if different from the date of issuance; and
- 266 (vi) brand name or manufacturer of the drug product actually dispensed, if the drug was
- 267 prescribed by generic name or if a drug product other than the one prescribed was dispensed
- 268 pursuant to the provisions of the Act, Chapters 562 and 563.
- 269 (8) - (10) (No change.)
- 270 (c) - (f) (No change.)

271 (g) Transfer of prescription drug order information. For the purpose of initial or refill dispensing,
272 the transfer of original prescription drug order information is permissible between pharmacies,
273 subject to the following requirements.

274 (1) The transfer of original prescription drug order information for controlled substances listed in
275 Schedule III, IV, or V is permissible between pharmacies on a one-time basis only. However,
276 pharmacies electronically sharing a real-time, on-line database may transfer up to the maximum
277 refills permitted by law and the prescriber's authorization.

278 (2) The transfer of original prescription drug order information for dangerous drugs is
279 permissible between pharmacies without limitation up to the number of originally authorized
280 refills.

281 (3) The transfer is communicated orally by telephone or via facsimile directly by a pharmacist to
282 another pharmacist; by a pharmacist to a student-intern, extended-intern, or resident-intern; or by
283 a student-intern, extended-intern, or resident-intern to another pharmacist.

284 (4) Both the original and the transferred prescription drug orders are maintained for a period of
285 two years from the date of last refill.

286 (5) The individual transferring the prescription drug order information shall ensure the following
287 occurs:

288 (A) write the word "void" on the face of the invalidated prescription or the prescription is voided
289 in the data processing system; ~~and~~

290 (B) record the name, address, if for a controlled substance, the DEA registration number of the
291 pharmacy to which it was transferred, and the name of the receiving individual on the reverse of
292 the invalidated prescription or stored with the invalidated prescription drug order in the data
293 processing system;

294 (C) record the date of the transfer and the name of the individual transferring the information;
295 and

296 (D) if the prescription is transferred electronically, provide the following information:

297 (i) date of original dispensing and prescription number;

298 (ii) number of refills remaining and the date(s) and location(s) of previous refills;

299 (iii) name, address, and if a controlled substance, the DEA registration number of the transferring
300 pharmacy;

301 (iv) name of the individual transferring the prescription; and

302 (v) if a controlled substance, name, address and DEA registration number, and prescription
303 number from the pharmacy that originally dispensed the prescription, if different.

304 ~~[(B) the following information is recorded on the reverse of the invalidated prescription drug~~
305 ~~order or stored with the invalidated prescription drug order in the data processing system;]~~

306 ~~[(i) the name, address, and if a controlled substance, the DEA registration number of the~~
307 ~~pharmacy to which such prescription is transferred;]~~

308 ~~[(ii) the name of the individual receiving the prescription drug order information;]~~

309 ~~[(iii) the name of the individual transferring the prescription drug order information; and]~~

310 ~~[(iv) the date of the transfer.]~~

311 (6) The individual receiving the transferred prescription drug order information shall ~~[ensure the~~
312 ~~following occurs]:~~

313 (A) write the word "transfer" on the face of the prescription or the prescription record indicates
314 the prescription was a transfer; and

315 (B) reduce to writing all of the information required to be on a prescription as specified in
316 subsection (b)(7) of this section (relating to Prescriptions) and including the following
317 information;

318 (i) date of issuance and prescription number;

319 (ii) original number of refills authorized on the original prescription drug order;

320 (iii) date of original dispensing;

321 (iv) number of valid refills remaining and date(s) and location(s) of previous refills;

322 (v) name, address, and if for a controlled substance, the DEA registration number of the
323 transferring pharmacy;

324 (vi) name of the individual transferring the prescription; and

325 (vii) name, address, and if for a controlled substance, the DEA registration number, of the
326 pharmacy that originally dispensed the prescription, if different; or

327 (C) if the prescription is transferred electronically, create an electronic record for the prescription
328 that includes the receiving pharmacist's name and all of the information transferred with the
329 prescription including all of the information required to be on a prescription as specified in
330 subsection (b)(7) of this section (relating to Prescriptions) and the following:

- 331 (i) date of original dispensing;
- 332 (ii) number of refills remaining and the prescription number(s), date(s) and location(s) of
333 previous refills;
- 334 (iii) name, address, and if for a controlled substance, the DEA registration number;
- 335 (iv) name of the individual transferring the prescription; and
- 336 (v) name, address, and if for a controlled substance, the DEA registration number, of the
337 pharmacy that originally filled the prescription.
- 338 ~~[(B) the following information if recorded on the prescription drug order or is stored with the~~
339 ~~prescription drug order in the data processing system:]~~
- 340 ~~[(i) original date of issuance and date of dispensing or receipt, if different from date of issuance;]~~
- 341 ~~[(ii) original prescription number and the number of refills authorized on the original prescription~~
342 ~~drug order;]~~
- 343 ~~[(iii) number of valid refills remaining and the date of last refill, if applicable;]~~
- 344 ~~[(iv) name, address, and if a controlled substance, the DEA registration number of the pharmacy~~
345 ~~from which such prescription drug order information is transferred; and]~~
- 346 ~~[(v) name of the individual transferring the prescription drug order information.]~~
- 347 (7) Both the individual transferring the prescription and the individual receiving the prescription
348 must engage in confirmation of the prescription information by such means as:
- 349 (A) the transferring individual faxes the hard copy prescription to the receiving individual; or
- 350 (B) the receiving individual repeats the verbal information from the transferring individual and
351 the transferring individual verbally confirms that the repeated information is correct.
- 352 (8) Pharmacies transferring prescriptions electronically [using a data processing system] shall
353 comply with the following:
- 354 (A) Prescription drug orders may not be transferred by non-electronic means during periods of
355 downtime except on consultation with and authorization by a prescribing practitioner; provided
356 however, during downtime, a hard copy of a prescription drug order may be made available for
357 informational purposes only, to the patient or a pharmacist, and the prescription may be read to a
358 pharmacist by telephone.

359 (B) The original prescription drug order shall be invalidated in the data processing system for
360 purposes of filling or refilling, but shall be maintained in the data processing system for refill
361 history purposes.

362 (C) If the data processing system does not have the capacity to store all the information as
363 specified [~~required~~] in paragraphs (5) and (6) of this subsection, the pharmacist is required to
364 record this information on the original or transferred prescription drug order.

365 (D) The data processing system shall have a mechanism to prohibit the transfer or refilling of
366 controlled substance prescription drug orders that have been previously transferred.

367 (E) Pharmacies electronically accessing the same prescription drug order records may
368 electronically transfer prescription information if the following requirements are met.

369 (i) The original prescription is voided and the pharmacies' data processing systems shall store all
370 the information as specified [~~required~~] in paragraphs (5) and (6) of this subsection.

371 (ii) Pharmacies not owned by the same person may electronically access the same prescription
372 drug order records, provided the owner, chief executive officer, or designee of each pharmacy
373 signs an agreement allowing access to such prescription drug order records.

374 (iii) An electronic transfer between pharmacies may be initiated by a pharmacist intern,
375 pharmacy technician, or pharmacy technician trainee acting under the direct supervision of a
376 pharmacist.

377 (9) An individual may not refuse to transfer original prescription information to another
378 individual who is acting on behalf of a patient and who is making a request for this information
379 as specified in this subsection. The transfer of original prescription information must be done in a
380 timely manner. When transferring a compounded prescription, a pharmacy is required to provide
381 all of the information regarding the compounded preparation including the formula unless the
382 formula is patented or otherwise protected, in which case, the transferring pharmacy shall, at a
383 minimum, provide the quantity or strength of all of the active ingredients of the compounded
384 preparation.

385 (10) The electronic transfer of multiple or bulk prescription records between two pharmacies is
386 permitted provided:

387 (A) a record of the transfer as specified in paragraph (5) of this section is maintained by the
388 transferring pharmacy;

389 (B) the information specified in paragraph (6) of this subsection is maintained by the receiving
390 pharmacy; and

391 (C) in the event that the patient or patient's agent is unaware of the transfer of the prescription
392 drug order record, the transferring pharmacy must notify the patient or patient's agent of the

393 transfer and must provide the patient or patient's agent with the telephone number of the
394 pharmacy receiving the multiple or bulk prescription drug order records.

395 (h) - (l) (No change.)

396 The agency certifies that legal counsel has reviewed the proposal and found it to be within the
397 state agency's legal authority to adopt.

398 Filed with the Office of the Secretary of State on September 15, 2014.

399 TRD-201404385

400 Gay Dodson, R.Ph.

401 Executive Director

402 Texas State Board of Pharmacy

403 Earliest possible date of adoption: October 26, 2014

404 For further information, please call: (512) 305-8028

405