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HOUSE BILL NO. 733

Offered January 11, 2012

Prefiled January 11, 2012

A BILL to amend and reenact § 54.1-3410.2 of the Code of Virginia, relating to pharmacists' authority to compound.

Patrons—Jones and Brink

Referred to Committee on Health, Welfare and Institutions

Be it enacted by the General Assembly of Virginia:**1. That § 54.1-3410.2 of the Code of Virginia is amended and reenacted as follows:**

§ 54.1-3410.2. Compounding; pharmacists' authority to compound under certain conditions; labeling and record maintenance requirements.

A. A pharmacist may engage in compounding of drug products when the dispensing of such compounded products is (i) pursuant to valid prescriptions for specific patients and (ii) consistent with the provisions of § 54.1-3303 relating to the issuance of prescriptions and the dispensing of drugs.

Pharmacists shall label all compounded drug products that are dispensed pursuant to a prescription in accordance with this chapter and the Board's regulations, and shall include on the labeling an appropriate beyond-use date as determined by the pharmacist in compliance with USP-NF standards for pharmacy compounding.

B. A pharmacist may also engage in compounding of drug products in anticipation of receipt of prescriptions based on a routine, regularly observed prescribing pattern.

Pharmacists shall label all products compounded prior to dispensing with (i) the name and strength of the compounded medication or a list of the active ingredients and strengths; (ii) the pharmacy's assigned control number that corresponds with the compounding record; (iii) an appropriate beyond-use date as determined by the pharmacist in compliance with USP-NF standards for pharmacy compounding; and (iv) the quantity.

C. In accordance with the conditions set forth in subsections A and B, pharmacists shall not distribute compounded drug products for subsequent distribution or sale to other persons or to commercial entities, including distribution to pharmacies or other entities under common ownership or control with the facility in which such compounding takes place.

A pharmacist may, however, deliver compounded products dispensed pursuant to valid prescriptions to alternate delivery locations pursuant to § 54.1-3420.2.

A pharmacist may also provide compounded products to practitioners of medicine, osteopathy, podiatry, dentistry, or veterinary medicine to administer to their patients in the course of their professional practice, either personally or under their direct and immediate supervision.

Pharmacists shall label all compounded products distributed to practitioners for administration to their patients with (i) the statement "For Administering in Prescriber Practice Location Only"; (ii) the name and strength of the compounded medication or list of the active ingredients and strengths; (iii) the facility's control number; (iv) an appropriate beyond-use date as determined by the pharmacist in compliance with USP-NF standards for pharmacy compounding; and (v) quantity.

D. Pharmacists shall personally perform or personally supervise the compounding process, which shall include a final check for accuracy and conformity to the formula of the product being prepared, correct ingredients and calculations, accurate and precise measurements, appropriate conditions and procedures, and appearance of the final product.

E. Pharmacists shall ensure compliance with USP-NF standards for both sterile and non-sterile compounding.

F. Pharmacists may use bulk drug substances in compounding when such bulk drug substances:

1. Comply with the standards of an applicable United States Pharmacopoeia or National Formulary monograph, if such monograph exists, and the United States Pharmacopoeia chapter on pharmacy compounding; or are drug substances that are components of drugs approved by the FDA for use in the United States; or are otherwise approved by the FDA;

2. Are manufactured by an establishment that is registered by the FDA; or

3. Are distributed by a licensed wholesale distributor or registered nonresident wholesale distributor, or are distributed by a supplier otherwise approved by the FDA to distribute bulk drug substances if the pharmacist can establish purity and safety by reasonable means, such as lot analysis, manufacturer reputation, or reliability of the source.

G. Pharmacists may compound using ingredients that are not considered drug products in accordance

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59 with the USP-NF standards and guidance on pharmacy compounding.

60 H. Pharmacists shall not engage in the following:

61 1. The compounding for human use of a drug product that has been withdrawn or removed from the
62 market by the FDA because such drug product or a component of such drug product has been found to
63 be unsafe. However, this prohibition shall be limited to the scope of the FDA withdrawal; or

64 2. The regular compounding or the compounding of inordinate amounts of any drug products that are
65 essentially copies of commercially available drug products. However, this prohibition shall not include
66 (i) the compounding of any commercially available product when there is a change in the product
67 ordered by the prescriber for an individual patient, (ii) the compounding of a commercially
68 manufactured drug only during times when the product is not available from the manufacturer or
69 supplier, ~~or~~ (iii) *the compounding of a commercially manufactured drug whose manufacturer has*
70 *notified the FDA that the drug is unavailable due to a current drug shortage,* (iv) *the compounding of a*
71 *commercially manufactured drug when the prescriber has indicated in the prescription for an individual*
72 *patient that there is an emergent need for a drug that is not readily available,* or (v) the mixing of two
73 or more commercially available products regardless of whether the end product is a commercially
74 available product.

75 I. Pharmacists shall maintain records of all compounded drug products as part of the prescription,
76 formula record, formula book, or other log or record. Records may be maintained electronically,
77 manually, in a combination of both, or by any other readily retrievable method.

78 1. In addition to other requirements for prescription records, records for products compounded
79 pursuant to a prescription order for a single patient where only manufacturers' finished products are used
80 as components shall include the name and quantity of all components, the date of compounding and
81 dispensing, the prescription number or other identifier of the prescription order, the total quantity of
82 finished product, the signature or initials of the pharmacist or pharmacy technician performing the
83 compounding, and the signature or initials of the pharmacist responsible for supervising the pharmacy
84 technician and verifying the accuracy and integrity of compounded products.

85 2. In addition to the requirements of subdivision I 1, records for products compounded in bulk or
86 batch in advance of dispensing or when bulk drug substances are used shall include: the generic name
87 and the name of the manufacturer of each component or the brand name of each component; the
88 manufacturer's lot number and expiration date for each component or when the original manufacturer's
89 lot number and expiration date are unknown, the source of acquisition of the component; the assigned
90 lot number if subdivided, the unit or package size and the number of units or packages prepared; and
91 the beyond-use date. The criteria for establishing the beyond-use date shall be available for inspection
92 by the Board.

93 3. A complete compounding formula listing all procedures, necessary equipment, necessary
94 environmental considerations, and other factors in detail shall be maintained where such instructions are
95 necessary to replicate a compounded product or where the compounding is difficult or complex and
96 must be done by a certain process in order to ensure the integrity of the finished product.

97 4. A formal written quality assurance plan shall be maintained that describes specific monitoring and
98 evaluation of compounding activities in accordance with USP-NF standards. Records shall be maintained
99 showing compliance with monitoring and evaluation requirements of the plan to include training and
100 initial and periodic competence assessment of personnel involved in compounding, monitoring of
101 environmental controls and equipment calibration, and any end-product testing, if applicable.

102 J. Practitioners who may lawfully compound drugs for administering or dispensing to their own
103 patients pursuant to §§ 54.1-3301, 54.1-3304 and 54.1-3304.1 shall comply with all provisions of this
104 section and the relevant Board regulations.