Question.

We have received a question regarding proposed changes to the Pharmacy Practice Act rule on approved drugs for Dispensing Medical Practitioners (R156-17b-623) from March 18th.

As we read it, the rule previously allowed DMPs to dispense non-controlled drugs approved for online prescribers under the Online Prescribing Act (which no longer exists); this reference has been removed and replaced with a static list of drugs, but there is a discrepancy between the two.

Previously permitted under R156-83-306	Permitted under the revised R156-17b-623
Finasteride	**Not permitted**
Sildenafil citrate	**Not permitted**
Tadalafil	**Not permitted**
Vardenafil hydrochloride	**Not permitted**
Hormonal based contraception	Hormonal based contraception
Varenicline	**Not permitted**
Hydroquinone up to 4%	Hydroquinone up to 4%
Tretinoin up to 0.1%	Tretinoin up to 0.1%
Avanafil	**Not permitted**

Can you help us understand why some of these drugs were removed from the approved list?

Response:

The online prescriber statute was repealed by HB 152 in 2023, which negated the rule. The pharmacy rule referenced the specific section from the online prescriber rule so we needed to amend the pharmacy rule.

The Pharmacy Board discussed this for a few board meetings and made the decision to remove some of the drugs, below is the minutes from the April 2023, May 2023 and June 2023 Pharmacy Board Meeting:

R156-17b-623 RULE REVIEW – HB 152 (Audio 01:14:12)
Ms. Martin discussed with the Board the drafted rule language of R156-17b-623 - Standards -Approved Cosmetic Drugs and Injectable Weight Loss Drugs for Dispensing Medical Practitioners, - drugs that may be dispensed by a DMP in accordance with subsection 58-17b-802(1) and section 58-17b-803, in relation to HB 152; Utah Code 58-83 - Online Prescribing, Dispensing, & Facilitation Licensing Act Rule was repealed in the recent 2023 legislative session.
Dr. Gunning stated the title is not appropriate for the list of drugs cited in R156-83-306.

Mr. Davis recommended researching R156–17b-623 rule deeper with Ms. Blackburn, to make sure the scope does not go beyond the statute. Mr. Davis stated the drafted rule language R156-17b-623 contains the list of legend, non-controlled drugs from R156-83-306 - Drugs Approved for Online Prescribing, Dispensing, and Facilitation. Mr. Davis recommended not removing any of the included medications from the list for the time being.
Dr. Dunford recommended Ms. Martin and Ms. Blackburn to research the drafted rule language more in depth in relation to all other rule references for discussion at the next Board meeting.

R156-17B-623 APPROVED DRUGS FOR DISPENSING MEDICAL PRACTITIONERS (Audio 01:16:37)
Ms. Blackburn discussed rule changes to R156-17b-623, in accordance with Subsection 58-17b-802(1) and section 58-17b-803, due to Utah Code 58-83 repealed through HB 152 in the 2023 legislative session. Ms. Blackburn stated the weight loss and cosmetic language needed to be addressed while at the same time not to be confused with Utah Code 58-88.
Dr. Gunning agreed with Ms. Blackburn, the list of medications does not really pertain to the statute.
Mr. Britton recommended finding out if physicians are prescribing these medications.
Ms. Martin stated when DMP's are applying for licensure, the Division has been requesting an indication of what medications are being provided, however the report has not been generated.
Ms. Martin stated so far there are 153 DMP's and 15 clinics licensed with the Division here in Utah.
Ms. Blackburn recommended placing a hold on this rule change for now, until it has been researched more in depth to see if this rule is covered in another rule anywhere else.

R156-17B-623-APPROVED DRUGS FOR DISPENSING MEDICAL PRACTITIONERS (Audio 02:39:35)
Ms. Martin discussed with the Board a generated Dispensing Medical Practitioner (DMP) clinic dispensing report. Ms. Martin stated there were five DMP clinics that were impacted due to Chapter 58-83 being repealed in the 2023 legislative session.
Dr. Dunford stated due to Chapter 83 being repealed, Subsection R156-17b-623(2) should also be repealed. Dr. Dunford asked the Board if they felt inclined to remove Subsection R156-17b-623(2).
The Board discussed and amended the list of approved drugs as found in Utah Code R156-17b- 623; the following legend non-controlled drugs were eliminated: finasteride; sildenafil citrate; tadalafil; vardenafil hydrochloride; varenicline; avanafil.
Dr. Gunning made a motion to approve changes as discussed regarding approved drugs for Dispensing Medical Practitioners.
Dr. Daeery seconded the motion.
The Board motion passed unanimously.

continuance of the order of suspension in order to prevent harm to the pharmacist's patients or the general public.

(6) A pharmacist whose license is revoked, suspended, or in any way restricted under this section may request the division and the board to consider, at reasonable intervals, evidence presented by the pharmacist, under procedures established by division rule, regarding any change in the pharmacist's condition, to determine whether:

(a) the pharmacist is or is not able to safely and competently engage in the practice of pharmacy; and

(b) the pharmacist is qualified to have the pharmacist's licensure to practice under this chapter restored completely or in part.

Amended by Chapter 329, 2023 General Session

Part 8
Dispensing Medical Practitioner and Dispensing Medical Practitioner Clinic Pharmacy

58-17b-801 Title.

This part is known as "Dispensing Medical Practitioner and Dispensing Medical Practitioner Clinic Pharmacy."

Enacted by Chapter 72, 2014 General Session

58-17b-802 Definitions.

As used in this part:

(1)

(a) "Cosmetic drug" means a prescription drug that:

(i) is for the purpose of promoting attractiveness or altering the appearance of an individual; and

(ii)

(A) is listed as a cosmetic drug subject to the exemption under this section by the division by administrative rule; or

(B) has been expressly approved for online dispensing, whether or not it is dispensed online or through a physician's office.

(b) "Cosmetic drug" does not include a prescription drug that is:

(i) a controlled substance;

(ii) compounded by the physician; or

(iii) prescribed for or used by the patient for the purpose of diagnosing, curing, or preventing a disease.

(2) "Employer sponsored clinic" means:

(a) an entity that has a medical director who is licensed as a physician as defined in Section 58-67-102 and offers health care only to the employees of an exclusive group of employers and the employees' dependents; or

(b) a clinic designated as a clinic for state employees and their dependents by the Public Employees' Benefit and Insurance Program under the pilot program created by Section 49-20-413 including all the patients at that clinic, regardless of the patients' participation in the pilot program.

(3) "Health care" is as defined in Section 31A-1-301.
(4)
(a) "Injectable weight loss drug" means an injectable prescription drug:
(i) prescribed to promote weight loss; and
(ii) listed as an injectable prescription drug subject to exemption under this section by the division by administrative rule.
(b) "Injectable weight loss drug" does not include a prescription drug that is a controlled substance.
(5) "Prepackaged drug" means a prescription drug that:
(a) is not listed under federal or state law as a Schedule I, II, III, IV, or V drug; and
(b) is packaged in a fixed quantity per package by:
(i) the drug manufacturer;
(ii) a pharmaceutical wholesaler or distributor; or
(iii) a pharmacy licensed under this title.

Amended by Chapter 159, 2016 General Session

58-17b-803 Qualifications for licensure as a dispensing medical practitioner -- Scope of practice.
(1) An applicant for a license as a dispensing medical practitioner shall:
(a) be licensed in good standing under at least one of the chapters listed in Subsection 58-17b-102(23)(a); and
(b) submit an application for a license as a dispensing medical practitioner in a form prescribed by the division and pay a fee established by the division.
(2) The division shall accept the licensing in good standing under Subsection (1) in lieu of requiring an applicant for a license under this part to comply with Sections 58-17b-303 and 58-17b-307.
(3) A dispensing medical practitioner may dispense, in accordance with this part:
(a) a cosmetic drug and an injectable weight loss drug if:
(i) the drug was prescribed by the dispensing medical practitioner to the dispensing medical practitioner's patient; and
(ii) the dispensing medical practitioner complies with administrative rules adopted by the division under Section 58-17b-802;
(b) a cancer drug treatment regimen if the dispensing medical practitioner complies with Section 58-17b-805; and
(c) a pre-packaged drug to an employee or a dependent of an employee at an employer sponsored clinic if the dispensing medical practitioner:
(i) treats an employee, or the dependent of an employee, of one of an exclusive group of employers at an employer sponsored clinic;
(ii) prescribes a prepackaged drug to the employee or the employee's dependent;
(iii) dispenses the prepackaged drug at the employer sponsored clinic; and
(iv) complies with administrative rules adopted by the division in consultation with the Board of Pharmacy that establish labeling, record keeping, patient counseling, purchasing and distribution, operating, treatment, quality of care, and storage requirements.
(4) A dispensing medical practitioner:
(a) shall inform the patient:
(i) that the drug dispensed by the practitioner may be obtained from a pharmacy unaffiliated with the practitioner;
(ii) of the directions for appropriate use of the dispensed drug;

(b) curriculum-based programs from an ACPE accredited college of pharmacy, or an ASHP accredited pharmacy technician program;

(c) state or local health department programs; and

(d) other Board recognized providers.

(4) An individual who engages in the administration of prescription drugs or devices shall:

(a) maintain documentation that they obtained their required training; and

(b) for each renewal cycle after their initial training, complete at least two hours of continuing education related to their administration of prescription drugs or devices, under Section R156-17b-309.

(5) The "Vaccine Administration Protocol: Standing Order to Administer Immunizations and Emergency Medications", adopted September, 2023, by the Division in collaboration with the Board of Pharmacy and the Utah Medical Licensing Board, as posted on the Division website, is the guideline or standard for pharmacist administration of vaccines and emergency medications, and for pharmacy intern or pharmacy technician administration pursuant to delegation by a pharmacist.

R156-17b-621a. Operating Standards - Pharmacist Administration of a Long-acting Injectable and Naloxone - Training.

In accordance with Subsections 58-17b-502(1)(i) and 58-17b-625(2):

(1) Prior to engaging in the administration of a long-acting injectable drug pursuant to Section 58-17b-625, a pharmacist shall successfully complete:

(a) current Basic Life Support (BLS) certification; and

(b) a training program for administering long-acting injectables intramuscularly that is provided by an ACPE-accredited provider.

(2) An individual who engages in the administration of long-acting injectable drugs intramuscularly shall maintain documentation that they obtained their required training.

R156-17b-621b. Operating Standards - Pharmacist and Pharmacy Intern Dispensing of a Self-Administered Hormonal Contraceptive - Training.

This section establishes training standards under Subsection 58-17b-502(1)(n) and Section 26B-4-506.

(1) Before dispensing a self-administered hormonal contraceptive, a pharmacist or pharmacy intern shall successfully complete a training program for dispensing self-administered hormonal contraceptives that is provided by an ACPE-accredited provider and approved by the Division in collaboration with the Board.

(2) A pharmacist or pharmacy intern who engages in the dispensing of a self-administered hormonal contraceptive shall:

(a) maintain documentation that they obtained their required training before any dispensing;

(b) for each renewal cycle after the initial training, successfully complete a minimum of two hours of continuing education related to dispensing a self-administered hormonal contraceptive, in accordance with Section R156-17b-309; and

(c) review the Utah Guidance for Self-Administered Hormonal Contraceptives which can be found on the Division's website at https://dopl.utah.gov/pharmacy/resources.

R156-17b-622. Standards - Dispensing Training Program.

(1) In accordance with Subsection R156-17b-102(21)(c), a formal or on-the-job dispensing training program completed by a DMP designee is one that covers the following topics to the extent that the topics are relevant and current to the DMP practice where the DMP designee is employed:

(a) role of the DMP designee;

(b) laws affecting prescription drug dispensing;

(c) pharmacology including the identification of drugs by trade and generic names, and therapeutic classifications;

(d) pharmaceutical terminology, abbreviations and symbols;

(e) pharmaceutical calculations;

(f) drug packaging and labeling;

(g) computer applications in the pharmacy;

(h) sterile and non-sterile compounding;

(i) medication errors and safety;

(j) prescription and order entry and fill process;

(k) pharmacy inventory management; and

(l) pharmacy billing and reimbursement.

(2) Documentation demonstrating successful completion of a formal or on-the-job dispensing training program shall include the following information:

(a) name of individual trained;

(b) name of individual or entity that provided training;

(c) list of topics covered during the training program; and

(d) training completion date.

R156-17b-623. Standards - Approved Cosmetic Drugs and Injectable Weight Loss Drugs for Dispensing Medical Practitioners.

The drugs that may be dispensed by a DMP in accordance with Subsection 58-17b-802(1) and Section 58-17b-803 are limited to:

(1) the following cosmetic drugs:

(a) Latisse or generic equivalent; and

(b) the injectable weight loss drug human chorionic gonadotropin; and

(2) the following legend, non-controlled drugs:

(a) hormonal based contraception unless using except injectable or implantable methods;

(b) hydroquinone up to 4%; and

(c) tretinoin up to 0.1%.

R156-17b-624. Operating Standards. Repackaged or Compounded Prescription Drugs - Sale to a Practitioner for Office Use.

Pursuant to Section 58-17b-624, a pharmacy may repackage or compound a prescription drug for sale to a practitioner for office use provided that it is in compliance with all applicable federal and state laws and regulations regarding the practice of pharmacy, including, but not limited to the Food, Drug, and Cosmetic Act, 21 U.S.C.A 301 et seq.

R156-17b-625. Standards - Reporting and Maintaining Records on the Dispensing of an Opiate Antagonist.

(1) In accordance with Subsections 26-55-105(2)(c) and (d), the pharmacist-in-charge or a responsible corporate officer of each pharmacy licensee that dispenses an opiate antagonist pursuant to a valid standing prescription drug order issued by a physician, shall affirm that the pharmacy licensee has complied with the protocol for dispensing an opiate antagonist as set forth in Section 26-55-105, and shall report, on an annual basis, to the division and to the physician who issued the opiate antagonist standing drug order, the following information:

(a) the total number of single doses of opiate antagonists dispensed during the reporting period; and

(b) the name of each opiate antagonist dispensed, along with the total number of single doses of that particular named opiate antagonist.

(2) Corporations or organizations with multiple component pharmacy licenses may submit one cumulative report for all its component pharmacy licensees. However, that report must contain the information described above for each of the component pharmacy licensees.

(3) Null reporting is not required. If a pharmacy licensee does not dispense an opiate antagonist during any year, that pharmacy licensee is not required to make an affirmation or report to the division.

(4) The annual affirmation and report described above is due to the division and to the physician who issued the standing drug order no later than 15 days following December 31 of each calendar year.

(5) In accordance with Subsection 26-55-105(2)(d), a pharmacy licensee who dispenses an opiate antagonist pursuant to a valid standing prescription order issued by a physician, shall maintain, subject to audit, the following information:

(a) the name of the individual to whom the opiate antagonist is dispensed;

(b) the name of the opiate antagonist dispensed;

(c) the quantity of the opiate antagonist dispensed;

(d) the strength of the opiate antagonist dispensed;

(e) the dosage quantity of the opiate antagonist dispensed;

(f) the full name of the drug outlet which dispensed the opiate antagonist;

(g) the date the opiate antagonist was dispensed; and

(h) the name of physician issuing the standing order to dispense the opiate antagonist.

(6) The division approves the protocol for the issuance of a standing prescription drug order for opiate antagonists, which is set forth in Subsection 26-55-105(2)(a) through (d) along with the requirements set forth in the foregoing provisions, and the reporting requirements set forth in Sections R156-67-604 and R156-68-604.

R156-17b-626. Operating Standards - Appropriate Substitutes for Albuterol.

(1) In accordance with Subsections 58-17b-601(1) and 58-17b-605(9), a pharmacist or pharmacy intern may make appropriate substitutes for an albuterol inhaler with any brand or proprietary name albuterol product that has the same milligram dose per actuation.

(2) The pharmacist or pharmacy intern shall document an albuterol substitution on the prescription hard copy or in the medication profile system.

R156-17b-627. Operating Standards - Prescription of Drugs or Devices by a Pharmacist.

(1) Under Subsection 58-17b-601(1) and Section 58-17b-627, a pharmacist from a Class A or Class B pharmacy may prescribe a prescription drug or device as follows:

(a) Before prescribing, the pharmacist shall conduct a patient assessment that includes:

(i) current health status;

(ii) past medical history;

(iii) allergies;

(iv) medication sensitivities;

(v) rationale for care;

Allison Pulsipher <allisonpulsipher@utah.gov>

Fwd: Vaccine Protocol

Tue, Sep 9, 2025 at 11:55 AM

To:

Below is the proposed language for the Vaccine Protocol. Attached is a copy of the protocol for reference.

Vaccines

To protect people from preventable infectious diseases, each trained pharmacist, pharmacy intern, or pharmacy technician may administer the following vaccines to eligible patients for all appropriate ages, according to: indications and contraindications recommended in current guidelines from the Advisory Committee on Immunization Practices (ACIP) of the U.S. Centers for Disease Control and Prevention (CDC) and/or local or state health departments:

1. Guidelines established by the Advisory Committee on Immunization Practices (ACIP) of the U.S. Centers for Disease Control and Prevention (CDC);
2. Guidelines established by local or state health departments; or
3. In accordance with FDA approved or authorized indications.

Notwithstanding #3 above, a pharmacist may administer a vaccine for use beyond the scope of the original FDA authorized indication, if the vaccine is FDA approved and such use is supported by:

1. Evidence based recommendations from recognized professional organizations;
2. Current clinical standards; and
3. Public health best practices.

Influenza	Hepatitis B	Tetanus-Diphtheria Toxoids
Hepatitis A	Meningococcal	Pneumococcal
Varicella	Herpes Zoster	Haemophilus Influenza type b
Measles-Mumps-Rubella	Human Papilloma Virus	Tetanus-Diptheria Acellular Pertussis
Inactivated Polio	COVID-19 (SARS-CoV-2)	Respiratory Syncytial Virus

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SPENCER J. COX
Lieutenant Governor

State of Utah
Department of Commerce
Division of Occupational and Professional Licensing

CHRIS PARKER
Executive Director
MARK B. STEINAGEL
Division Director

VACCINE ADMINISTRATION PROTOCOL
Standing Order to Administer Immunizations and Emergency Medications
Revised September 2023

In compliance with Utah Code §§ 58-17b-620; 58-17b-102(16), (17), (56), (57)(b) and (c); and 58-17b-502(1)(i) of Utah's Pharmacy Practice Act, a licensed Utah pharmacist may administer medications for a fee pursuant to this Vaccine Administration Protocol. The pharmacist may also delegate administration to a licensed Utah pharmacy intern or pharmacy technician, if the delegating pharmacist provides on-site, direct supervision to the delegatee. A pharmacy intern and pharmacy technician may not delegate the administration of a vaccine to another person.

Each pharmacist who administers medications or delegates such administration, and each pharmacy intern and pharmacy technician who administers medications, shall have completed all of the training and continuing education required by Utah Admin. Code §§ R156-17b-309 and R156-17b-621 of the Pharmacy Practice Act Rules.

Vaccines
To protect people from preventable infectious diseases, each trained pharmacist, pharmacy intern, or pharmacy technician may administer the following vaccines to eligible patients for all appropriate ages, according to indications and contraindications recommended in current guidelines from the Advisory Committee on Immunization Practices (ACIP) of the U.S. Centers for Disease Control and Prevention (CDC) and/or local or state health departments:

Influenza	Hepatitis B	Tetanus-Diphtheria Toxoids
Hepatitis A	Meningococcal	Pneumococcal
Varicella	Herpes Zoster	Haemophilus Influenza type b
Measles-Mumps-Rubella	Human Papilloma Virus	Tetanus-Diptheria Acellular Pertussis
Inactivated Polio	COVID-19 (SARS-CoV-2)	Respiratory Syncytial Virus

Striking through the name of any of the above vaccines will indicate deletion from this protocol.

The above-listed vaccines, and any vaccines not listed in this Vaccine Administration Protocol, may also be administered by a licensed Utah pharmacist pursuant to a prescription from a licensed prescriber. The pharmacist may delegate administration to a licensed Utah pharmacy intern or pharmacy technician, if the delegating pharmacist provides on-site, direct supervision to the delegatee. A pharmacy intern and pharmacy technician may not delegate the administration of a vaccine to another person.

Patient Screening

Before a vaccination is dispensed for administration:

1. the vaccine candidate or legal guardian shall be questioned regarding the candidate's:
   a. previous adverse events after immunization;
   b. food or drug allergies;
   c. current health conditions;
   d. recent receipt of blood or antibody products;
   e. immunosuppression;
   f. pregnancy; and
   g. underlying diseases;

2. the administering or delegating pharmacist shall review the vaccine, and the vaccine candidate's screening information; and

3. the vaccine candidate or legal guardian shall be informed of the specific benefits and risks of the vaccine(s) offered, and provided the appropriate Vaccine Information Statement(s).

Adverse Events

1. In the course of treating adverse events following immunization, the pharmacist is authorized to administer, or supervise the administration by a pharmacy intern or pharmacy technician, the following:

   a. Diphenhydramine 1.25 mg/kg, maximum dose of 50 mg per dose orally, for mild allergic reactions including hives or itching;

   b. Epinephrine-intramuscular to patients in a dose appropriate for their stated weight, followed by an immediate call to Emergency Medical Services for any signs and symptoms consistent with anaphylaxis:
      - Epinephrine IM 0.3 mg for patient weight greater than 30 kg;
      - Epinephrine IM 0.15 mg for patient weight 15 - 30 kg; and
      - Epinephrine IM 0.01 mg/kg for patient weight less than 15 kg.

   c. If Emergency Medical Services has not arrived and symptoms are still present, the dose of epinephrine may be repeated up to every 5 minutes for up to 3 doses total, depending on th epatient's response.

   d. If any medications are administered for an adverse immunization reaction, the pharmacy staff shall call Emergency Medical Services or provide patient assessment by an on-site licensed independent practitioner.

   e. The pharmacist, pharmacy intern, or pharmacy technician may provide cardiopulmonary resuscitation as needed.

2. For adverse events, the administering or delegating pharmacist shall complete and submit the Vaccine Adverse Event Reporting System (VAERS) form to the CDC, to the undersigned licensed practitioner, and to the patient's primary care practitioner, if known.

3. The pharmacy shall post in a prominent place in the pharmacy an emergency plan to be implemented in case of an adverse event. Such plan shall include:

a. the phone number of the local EMS;
b. the phone number of the undersigned licensed practitioner; and
c. the roles of:

i. the administering or delegating pharmacist,
ii. any administering pharmacy intern or pharmacy technician; and
iii. other participants; and

d. dosing instructions for epinephrine and diphenhydramine according to this protocol

Reporting to Utah Statewide Immunization Information System (USIIS)

1. The pharmacist, pharmacy intern, or pharmacy technician shall report an administered vaccine to the Utah State Immunization Information System (USIIS) electronic registry within one week of administration. Register for USIIS: http://www.usiis.org/howtoparticipate_provider.shtml.

2. The pharmacist, pharmacy intern or pharmacy technician shall maintain perpetual record of all vaccines administered, including the:

a. patient name;
b. primary care practitioner (if known);
c. vaccination date;
d. name, address, title of administering or delegating pharmacist;
e. name of vaccine;
f. manufacturer; and
g. lot number.

Protocol/Order

As the authorizing licensed practitioner:

- **I shall periodically review (not less than annually) the activities of the authorized pharmacy personnel (pharmacists, pharmacy interns, and pharmacy technicians) who administer vaccines under this protocol.**

- **My authorization shall be valid for one year from the date indicated below, unless otherwise revoked or extended in writing.**

- **I understand that I need not review the administration of vaccines pursuant to a written prescription from a licensed prescriber, and that such vaccines shall be administered pursuant to the instructions from the licensed prescriber on the prescription.**

(Signature on this protocol by a licensed practitioner is required ONLY for vaccines administered according to this VACCNINE ADMINISTRATION PROTOCOL, without a written prescription by a licensed prescriber)

Licensed Practitioner Name	
Licensed Practitioner Address	
City, State	
Zip	
Practitioner License Number	
State of Licensure	
Authorized Pharmacy(ies)	

The licensed pharmacist(s), pharmacy intern(s), and pharmacy technician(s) employed by the pharmacy or pharmacies listed above who have received the required training in accordance with Utah Admin. Code §§ R156-17b-309 and R156-17b-621 of the Pharmacy Practice Act Rules are authorized to administer vaccines pursuant to:

(1) This VACCINE ADMINISTRATION PROTOCOL Standing Order to Administer Vaccines and Emergency Medications; or

(2) A written prescription by a licensed prescriber.

Licensed Practitioner Signature: _____

Date: _____