

# Requirements for a Valid Prescription in Minnesota

Recognize the components that comply with the prescription requirements found in Minnesota Statutes. Please note that Minnesota Statutes Section 62J.497 actually requires that all prescriptions be electronically prescribed. However, the Board is aware that handwritten and faxed prescriptions are still being prepared so information is provided about such prescriptions. Prescribers are required to follow the requirements for a valid prescription as specified in Minnesota Statutes section 151.01, Subd. 16a. They must also follow the requirements found in section 152.11, if the prescription is for controlled substances.

The example below provides guidance for prescribers to ensure compliance in dispensing medication to their patients. Handwritten prescriptions should be legible and indicate precisely what should be dispensed to the patient. All handwritten prescriptions must be manually signed (pen to paper). All faxed prescriptions must also be printed out and manually signed before being faxed. Electronic signatures are only allowed for true electronic prescriptions.

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**4** Oxycodone 5mg  
**5** Sig: Take 1 tab every 4-6 hours as needed for pain  
**6** Disp: 12/twelve tablets

**7** Refills: Zero **8** Prescriber's Signature Here  
**9** DEA no. AS2426814

- 1** The name, address, and telephone number at which the prescriber can be reached.
- 2** Name and address of the patient, their birthdate is recommended.
- 3** The date the prescription is issued.
- 4** List the full name of the drug including drug strength. Capitalize the first letter of brand names. Use lower case letters for generic names.
- 5** The "Sig" or directions for use should be as specific as possible to ensure patient compliance and proper use of medication.
- 6** Indicate the quantity to dispense, preferably describing it numerically and alphabetically.
- 7** Specify the number of times or the period of time the prescription may be refilled. If no such authorization is given, the prescription may not be refilled.
- 8** All written prescriptions (or printed on paper and given to the patient or an agent of the patient or that is transmitted by fax) must be manually signed on the day issued by the prescriber. An electronic prescription must contain the prescriber's electronic signature.
- 9** For controlled substances only: Indicate the Drug Enforcement Administration (DEA) registration number of the prescriber.

## Faxed Prescriptions

Written prescriptions signed by a prescriber may be transmitted by the prescriber or the prescriber's agent by a fax machine. All faxed prescriptions must comply with the requirements for a written prescription and in accordance with MN Rule 6800.3000 subp. 2. They must also provide for the identification of the person sending the prescription. All faxed prescriptions must also be printed out and manually signed before being faxed.

In order to expedite the filling of a prescription, a prescriber may transmit a Schedule II prescription to the pharmacy by facsimile provided that the original manually signed prescription is presented to the pharmacist for review prior to the dispensing of the controlled substance in accordance with 21 CFR 1306.11.

## Electronic Prescriptions

Prescribers may electronically transmit prescriptions directly to the pharmacy. Except for a manual signature, the systems must be able to transmit all the information as required on a written prescription. Any electronic prescription transmitted from the prescriber to the pharmacy must comply with Minnesota Statutes, section 62J.497, chapter 325L, and any applicable rules. Electronic prescriptions for controlled substances must conform to the rules of the federal Drug Enforcement Administration.

*The prescription may also contain additional instructions to the pharmacist. For example, generic substitution permitted, designated days' supply, and/or medical diagnosis code.*

## Generic Substitutions

To help control drug costs, federal and state governments allow pharmacists to make generic substitution choices. Minnesota statutes governing substitution can be found under MN stat. 151.21.

## Tamper-Resistant Prescription Forms

The Appropriations Act of 2007 states that payment will not be made for prescriptions in non-electronic form for Medical Assistance (Medicaid)-covered outpatient drugs unless the prescription was executed on a tamper-resistant prescription blank.

This law does not affect E-prescribed, faxed or prescriptions phoned in to the pharmacy by the prescriber. Handwritten prescriptions must be executed on a tamper-resistant prescription blank with at least one characteristic from all three categories as outlined in the July 2008 National Council for Prescription Drug Programs (NCPDP) letter to Medicaid.

## Refill Limitations

The prescription label specifies the number of times or the period of time the prescription may be refilled. If no such authorization is given, the prescription may not be refilled. Important information on refills of controlled substances:

- No authorized refills for Schedule II controlled substances.
- Schedule III and IV controlled substances may be refilled not more than five times in a six month period from the date of issuance.
- Refills may be authorized for up to one year from the date of issuance for schedule V controlled substances and for prescription drugs that are not controlled substance.

As per MN Rules 6800.3510, prescription drug orders may not be filled more than 12 months after the date it was issued, and additional authorizations may not be accepted for that prescription. If the prescriber desires continued therapy, a new prescription drug order must be generated and a new prescription number assigned.



## Guidelines for the Safe Communication of Medical Information

- Do not use trailing zeros when expressing medication/solution doses (e.g., use 5 mg, never 5.0 mg)
- Use leading zeros for doses less than 1 measurement unit (e.g., 0.3 mg, never .3 mg).
- Avoid using abbreviations (example, q.o.d. or QOD for every other day; spell out “every other day”).
- Express weights and measures in a standard fashion and use USP standard abbreviations for dosage units. See examples below.
  - cm = centimeter
  - m (lower case) = meter
  - kg = kilogram
  - g = gram
  - mg = milligram
  - mcg = microgram (do not use the Greek letter  $\mu$  as  $\mu\text{g}$  which has been misread as mg)
  - L (upper case) = liter
  - mL (lower/upper case) = milliliter (do not use cc which has been misread as U or the number 4)
  - mEq = milliequivalent
  - mmol = millimole