

# Issuing a Valid Prescription

Prescribers and pharmacists have a common goal – to ensure that patients receive their medications as quickly and accurately as possible. This guidance helps you meet that goal by outlining what the law requires of a prescription, as well as offering best practices to avoid confusion, improve patient compliance and reduce errors.



## Anatomy of an ideal prescription

The written prescription below complies with the NC Board of Pharmacy's prescription requirements.

### 1 Issue date

All prescriptions must be dated the day they are issued. Federal law permits the prescriber to add a “do not fill until” date to a prescription for a Schedule II controlled substance, up to a total 90-day supply dependent on good medical practice (e.g. three one-month prescriptions may be issued at a single visit).

### 12 Patient's full legal name and address

### 11 Signature/Permissions

Prescriber must include a legal signature and indicate whether generic substitution is allowed by signing either the “Product Selection Permitted” or “Dispense as Written” line.

To facilitate accurate prescriber identification for multi-provider practices, indicate prescriber by circling name on prescription.

### 10 DEA Number (for controlled substances only)

DEA recommends prescribers add their DEA numbers manually rather than pre-printing on prescription blanks to reduce the chance of fraud.

### 9 National Provider Identifier (NPI)

- Not required by law, but a best practice.
- Facilitates insurance filing for your patient, allowing speedier access to needed medication therapy.

Note: Items in *blue italics* indicate handwritten prescription elements

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123 Main Street  
Chapel Hill, North Carolina 27514  
919-555-2627

Date \_\_\_\_\_

**Name**  
*Adam C. Jones*

**Address**  
*678 Main Street  
Chapel Hill, NC 27514*

Product Selection Permitted \_\_\_\_\_

Dispense as Written \_\_\_\_\_

DEA no. *YM6768912*  
NPI no. 0123456789

**Rx**

**Losartan 50 (fifty) mg tablet**  
Sig: 1 (one) tablet by mouth daily  
Disp: 30 (thirty) tablets  
Days Supply: 30 (thirty) days  
Diagnosis: ICD10 Code  
Refills: 2 (two)

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### 2 Prescriber's full name(s), professional title, address and telephone number to facilitate questions from pharmacists or patients

### 3 Drug name, strength, and dosage form

Avoid abbreviations or other jargon.

### 4 Specific directions for use

Avoid vague directions such as “use as directed,” which can lead to medication errors, patient confusion and poor patient adherence.

### 5 Exact quantity of the drug prescribed

### 6 Days Supply

- Not required by law, but a best practice.
- Supports patient education and medication adherence.
- Facilitates NC STOP Act compliance.

### 7 Diagnosis or Indication

- Not required by law, but a best practice.
- Supports patient education and medication adherence.
- Provides clarity regarding compliance with the NC STOP Act and expedites the insurance authorization process.
- Patient consent is NOT required to disclose PHI to another health care provider – including a pharmacy – for treatment purposes.

### 8 Number of refills

Schedule III and IV prescriptions may be refilled no more than five times within six months of the date the prescription issued. See #1 for guidance on writing multiple months of Schedule II medications.



A collaboration of the North Carolina Board of Pharmacy and the North Carolina Medical Board. To learn more on prescribing visit NCBOP's FAQ section: [www.ncbop.org/faqs/Pharmacist/faq\\_pharmacistsHome.htm](http://www.ncbop.org/faqs/Pharmacist/faq_pharmacistsHome.htm). To learn more about the NC STOP Act, visit: [www.ncmedboard.org/stop-act](http://www.ncmedboard.org/stop-act).