21 NCAC 32M .0119 is adopted under emergency procedures as follows:

21 NCAC 32M .0119 COVID-19 DRUG PRESERVATION RULE

(a) The following drugs are “Restricted Drugs” as that term is used in this Rule:

(1) Hydroxychloroquine;
(2) Chloroquine;
(3) Lopinavir-ritonavir;
(4) Ribavirin;
(5) Oseltamivir;
(6) Darunavir; and
(7) Azithromycin.

(b) A nurse practitioner shall prescribe a Restricted Drug only if that prescription bears a written diagnosis from the prescriber consistent with the evidence for its use.

(c) When a patient has been diagnosed with COVID-19, any prescription of a Restricted Drug for the treatment of COVID-19 shall:

(1) Indicate on the prescription that the patient has been diagnosed with COVID-19;
(2) Be limited to no more than a fourteen-day supply; and
(3) Not be refilled, unless a new prescription is issued in conformance with this Rule, including not being refilled through an emergency prescription refill.

(d) A nurse practitioner shall not prescribe a Restricted Drug for the prevention of, or in anticipation of, the contraction of COVID-19 by someone who has not yet been diagnosed.

(e) A prescription for a Restricted Drug may be transmitted orally only if all information required by this Rule is provided to the pharmacy by the nurse practitioner or the nurse practitioner’s agent, and that information is recorded in writing by the pharmacy along with the identity of the nurse practitioner or the nurse practitioner’s agent transmitting the prescription.

(f) This Rule does not affect orders for administration to inpatients of health care facilities.

(g) This Rule does not apply to prescriptions for a Restricted Drug for a patient previously established on that particular Restricted Drug on or before March 10, 2020.