**An Act respecting Podiatry, 1983**

**REGULATIONS RESPECTING THE PRESCRIBING AND ADMINISTERING OF DRUGS**

**OF THE NEW BRUNSWICK PODIATRY ASSOCIATION INC.**

**CONTENTS**

PART I - DEFINITIONS AND INTERPRETATION

PART II - INJECTIONS, PRESCRIPTIONS AND STANDARDS OF PRACTICE

PART III - ADMINISTERING SUBSTANCES BY INHALATION AND STANDARDS OF PRACTICE

PART IV - INSURANCE

Schedule 1 - Substances administered by injection into the foot

Schedule 2 - Drugs that may be prescribed by podiatrists

**PART I**

**DEFINITIONS AND INTERPRETATION**

1(1) Subject to subsection (2), the words and phrases used in these Regulations have the same meaning as those defined in the Act.

1(2) The following definitions apply in these Regulations.

“Act” means *An Act respecting Podiatry*.

**PART II**

**INJECTIONS, PRESCRIPTIONS AND STANDARDS OF PRACTICE**

2(1) For the purposes of paragraphs 2(3)(c) and 13(1)(d) of the Act, a podiatrist may administer by injection into the foot a substance set out in Schedule 1 of these Regulations, if the podiatrist complies with the standards of practice set out in section 3.

2(2) For the purposes of paragraph 2(3)(a) and 13(1)(f) of the Act, a podiatrist may prescribe a drug set out in Schedule 2 of these Regulations, if the podiatrist complies with the standards of practice set out in section 4.

*Standards of Practice - Injections*

3(1) Subject to the other provisions of this section, it is a standard of practice of the profession that a podiatrist who administers a substance by injection into the foot shall first have successfully completed at least one of the following which has been approved by the council:

 (a) A course on administering substances by injection into the foot.

(b) A program that includes administering substances by injection into the foot.

 (c) Relevant training in administering substances by injection into the foot.

3(2) Despite subsection (1), a podiatrist or podiatry student may administer by injection into the foot a substance set out in Schedule 1, if,

(a) the administration by injection is done as part of a course, program or training approved by the council; and

(b) the administration by injection is performed under the direct supervision of a podiatrist who is authorized under subsection 3(1) to perform that administration by injection.

3(3) Podiatrists authorized to administer drugs must:

1. have policies and procedures in place for administering drugs and dealing with emergencies;
2. ensure that the environment in which the drug is to be administered is appropriate;
3. have proper regard for the interests of the patient and take all steps necessary to ensure that the drug is administered safely;
4. have insurance as required by Part IV of these Regulations; and
5. have successfully completed any other requirements specified by council.

3(4) A podiatrist who administers a drug to a patient must make and retain a record in the office of:

1. the name and address of the patient;
2. the name of the drug and total dose administered;
3. the route, and site, of administration;
4. the lot number and expiry date of the product administered;
5. the name of the podiatrist administering the drug;
6. the date and the time of the administration;
7. any patient counselling provided; and
8. any adverse events and their management.

*Standards of Practice - Prescriptions*

4(1) Subject to the other provisions of this section, it is a standard of practice of the profession that a podiatrist who prescribes a drug shall first have successfully completed at least one of the following which has been approved by the council:

(a) a pharmacology course;

(b) a pharmacology program; or

(c) relevant training in pharmacology.

4(2) A podiatrist is deemed to have met the standard of practice referred to in subsection (1) if the podiatrist had on or after September 26, 2008, passed a course in prescribing drugs containing both a clinical and didactic component taken at the Michener Institute for Applied Health Sciences as part of a program, the successful completion of which program was a requirement for the issuance of a certificate of membership in the association.

4(3) Subject to subsection 5, it is a standard of practice of the profession that a podiatrist may prescribe a drug set out in the following table for the indicated maximum duration, in the indicated maximum daily dosage:

|  |  |  |
| --- | --- | --- |
| Drug  | Maximum duration  | Maximum daily dosage (oral) |
| Ketorolac tromethamine  | Five days  | 10 mg every 4-6 hours, as needed for pain, not to exceed 4 doses per day, or 40 mg in total  |

4(4) Subject to subsection (5), it is a standard of practice of the profession that a podiatrist may prescribe a drug set out in the following table for a patient, prior to the performance of any act that podiatrist is authorized to perform, for a maximum of a single dose only, in the indicated maximum daily dosage:

|  |  |
| --- | --- |
| Drug  | Maximum daily dosage (oral) |
| Diazepam  | 10 mg |
| Hydroxyzine hydrochloride | 50 mg  |
| Lorazepam  | 3 mg  |

4(5) A podiatrist who may prescribe a drug set out in the tables to subsections (3) and (4) may prescribe the drug in a prescription that exceeds the maximum duration or maximum daily dosage or both, if the podiatrist first consults with the patient’s physician, and retains records of that consultation.

4(6) A podiatrist may only prescribe a drug if:

(a) the indication and treatment is within the podiatrist’s scope of practice, knowledge, skills, competencies and experience;

(b) the podiatrist has:

i. performed an assessment in an environment that is appropriate,

ii. determined treatment is indicated.

iii. discussed treatment options with the patient, and

iv. prescribed the most appropriate treatment based on the assessment; and

1. the drug is appropriate to treat the patient’s condition

*General Conditions*

4(7) Notwithstanding any other provision of these Regulations, a podiatrist shall not prescribe a drug unless the podiatrist has obtained sufficient information by reviewing the patient’s medication history and discussing treatment options with the patient or, if necessary, and with the patient’s consent, obtains pertinent information about the patient’s care and treatment from family, friends, or caregivers.

4(8) A podiatrist may only prescribe a drug pursuant to the authority conferred by these Regulations if:

1. the podiatrist reasonably believes that the prescription decision of the podiatrist has been consented to, in accordance with the following:
	* 1. There is an established podiatrist-patient relationship,
		2. in the context of services provided within a health care institution, the podiatrist reasonably believes the prescription decision of the podiatrist has been consented to in accordance with the bylaws or policies of the institution regarding consent, or
		3. in the context of a practice outside of a health care institution, the podiatrist reasonably believes, following communication with the patient, that the prescription decision of the podiatrist has been consented to:
			1. by the patient, or
			2. by the patient’s parent, legal guardian, attorney for personal care, proxy, or other substitute decision-maker in circumstances authorized by law;
2. the podiatrist has successfully completed any training requirements determined by council, and has available any required reference resources (print or electronic); and
3. the podiatrist has insurance as required by Part IV of these Regulations.

4(9) A podiatrist may not delegate any authority granted under subsection 2(2).

*Criteria for prescribing*

4(10) A podiatrist is authorized to prescribe a drug as enumerated in Schedule 2 of these Regulations, where:

1. the podiatrist has made an assessment to determine whether the drug will be safe and effective in the circumstances of the patient, including, but not limited to the following:
	1. the patient’s symptoms,
	2. co-existent disease states and chronic conditions,
	3. the patient’s allergies and other contradictions and precautions,
	4. other medications the patient may be taking,
	5. the patient’s gender, age, weight and height (where applicable),
	6. pregnancy and lactation status, if applicable, and
	7. any other inquiries reasonably necessary in the circumstances;
2. the podiatrist has assessed the patient in compliance with The New Brunswick Podiatry Association Code of Ethics and any applicable practice directives;
3. the drug is prescribed in a circumstance which is within the podiatrist’s area of practice, knowledge and skills, or specialty;
4. the podiatrist has determined that a prescription is reasonably necessary to treat the patient; and
5. the podiatrist has discussed with the patient, or the patient’s agent, reasonable and available therapeutic options.

4(11) If the podiatrist identifies that the condition being assessed is outside his or her scope of practice, the podiatrist shall refer the patient to an appropriate health care practitioner, and shall record the assessment and the referral in the patient’s profile.

*Record of prescribing*

4(12) A podiatrist who issues a prescription must make and retain a record of:

1. the patient’s name and address;
2. the circumstances under which the drug was prescribed;
3. the rationale for prescribing – diagnosis, treatment plan, clinical indication, or expected outcome;
4. a summary of the podiatrist’s assessment of the patient;
5. the date of the prescription;
6. the name of the drug prescribed, the strength (where applicable) and quantity of the prescribed drug;
7. the directions for use;
8. the number of refills available to the patient;
9. the name, address, and telephone number of the podiatrist issuing the prescription;
10. a follow-up plan that is sufficiently detailed to monitor the patient’s progress and ensure continuity of care by the podiatrist, or other regulated health professionals or caregivers, if applicable; and
11. any other advice or treatment recommended to the patient.

*Notification to other health professionals*

4(13) A podiatrist, when prescribing a drug, shall notify the patient’s primary care provider (when such exists) when the order the podiatrist is prescribing is clinically significant.

*Prescribing restrictions*

4(14) A podiatrist may not prescribe

1. for himself or herself;
2. for any person with whom there is a close personal or emotional relationship; or
3. in contravention of federal legislation, including the *Narcotic Control Act* and its regulations, the *Controlled Drugs and Substances Act* and its regulations or any successor act or regulation.

*Prescription information*

4(15) A podiatrist who writes (on paper or electronically) a prescription for a patient shall ensure the following information is present on the prescription:

1. patient’s name and address;
2. diagnosis or expected outcome(s) of the treatment prescribed;
3. date of the prescription;
4. name of the drug prescribed, the strength (where applicable) and quantity of the prescribed drug;
5. directions for use;
6. number of refills available to the patient;
7. name, address, and telephone number of the podiatrist issuing the prescription; and
8. podiatrist’s signature and registration number.

**PART III**

**ADMINISTERING SUBSTANCES BY INHALATION AND STANDARDS OF PRACTICE**

5(1) For the purposes of paragraphs 2(3)(b) and 13(1)(d) of the Act, a podiatrist who complies with the standards of practice provided for in this section is authorized to administer the following designated substances to a patient by inhalation:

(a) A gas mixture of up to 50 per cent nitrous oxide, with the balance of the mixture being oxygen.

(b) Therapeutic oxygen.

5(2) A podiatrist shall only administer a designated substance described in paragraph (a) or (b) of subsection (1) if he or she complies with the following standards of practice:

(a) the podiatrist shall only administer the designated substance to a patient for the purposes of,

i. pain management during the performance of a procedure, or

ii. controlling anxiety before or during the performance of a procedure.

 (b) the podiatrist must have,

i. successfully completed a program approved by council that includes a didactic and a clinical training component provided under the supervision of,

A. a member of the College of Physicians and Surgeons of New Brunswick who is recognized by that College as a specialist in anaesthesia;

B. a member of the New Brunswick Dental Society who holds a speciality certificate of registration in dental anaesthesia, or

C. any other person who is approved by council, or

 ii. satisfied the registrar that,

1. the podiatrist’s education in podiatry included a program equivalent to the program referred to in subparagraph i. that was completed not more than five years before the day this Part came into force, or
2. the podiatrist has safely administered the designated substance by inhalation to patients as part of his or her practice during the five-year period before the day this Part came into force.

(c) the podiatrist must have insurance as required by Part IV of these Regulations.

5(3) Despite anything in this section, a podiatrist may administer therapeutic oxygen by inhalation to a patient in an emergency.

5(4) Despite anything in this section, a podiatrist may administer a designated substance described in paragraph (a) or (b) of subsection (1) to a patient by inhalation if the podiatrist does so,

 (a) as part of a program described in subparagraph (b) i. of subsection (2); and

(b) while under the direct supervision of a member of the College of Physicians and Surgeons of New Brunswick who is recognized by the College to be a specialist in anaesthesia, a member of the New Brunswick Dental Society holding a specialty certificate in dental anaesthesia, or any other person approved by council.

**PART IV**

**INSURANCE**

6(1) Every podiatrist must, before performing any of the acts authorized by these Regulations, be covered by personal professional liability (errors and omissions) insurance that provides a minimum of $2,000,000 per claim or per occurrence and a minimum of $2,000,000 annual aggregate and meets any other criteria established by the council.

6(2) Proof of personal professional liability insurance shall be provided to the Registrar upon registration, annually at the time of registration renewal, and when requested.

**SCHEDULE 1**

**SUBSTANCES ADMINISTERED BY INJECTION INTO THE FOOT**

Allograft adipose matrix

Betamethasone sodium phosphate beta-acetate

Bupivacaine

Carbocaine

Denatured alcohol 4% (ethyl alcohol)

Dexamethasone sodium phosphate

Diphenhydramine

Epinephrine

Hyaluronic acid

Hydrocortisone sodium succinate

Lidocaine hydrochloride (with or without epinephrine)

Mepivacaine hydrochloride

Methylprednisolone acetate

Sterile saline solution

Triamcinolone acetonide

Vitamin B12(Cyanocobalamin)

**SCHEDULE 2**

**DRUGS THAT MAY BE PRESCRIBED BY PODIATRISTS**

Antibiotics (Topical)

Bacitracin

Bacitracin/neomycin sulphate

Erythromycin

Framycetin sulfate

Fusidic acid

Gentamicin sulfate

Mupirocin

Neomycin sulphate/polymyxin B sulphate/bacitracin

Neomycin sulphate/polymyxin B sulphate/gramicidin

Silver sulfadiazine

Antifungals (Topical)

Ciclopirox olamine

Clotrimazole

Efinaconazole

Ketoconazole

Miconazole nitrate

Nystatin

Terbinafine

Tolnaftate

Undecylenic acid

Analgesics (Topical)

Benzocaine

Capsaicin

Diethylamine Salicylate

Lidocaine/prilocaine

Astringents (Topical)

Aluminum Chloride hexahydrate

Corticosteroids (Topical)

Amcinonide

Betamethasone diproprionate

Betamethasone valerate

Clioquinol/hydrocortisone

Desoximetasone

Flumethasone/clioquinol

Fluocinonide

Halcinonide

Hydrocortisone

Hydrocortisone 17 valerate

Mometasone furoate

Triamcinolone acetonide

Caustics (Topical)

Cantharidin Podophyllin Salicylic acid combination (1% or less Cantharidin with 2% or less Podophyllin with 30% or less Salicylic acid)

Salicylic acid (70% or less)

Salicylic acid/lactic acid combination (Salicylic acid 16.7% and Lactic acid 16.7% in flexible collodion)

Salicylic acid/lactic acid/formalin combination (Salicylic acid 25%, Lactic acid 10%, Formalin 5%)

Silver Nitrate (95% or less)

5-Fluorouracil (5% or less)

Immune Response Modifier (Topical)

Imiquimod

Wound Care Agents (Topical)

Becaplermin

Santyl collagenase

Antibiotics (Oral)

Amoxicillin trihydrate

Amoxicillin trihydrate/clavulanate potassium

Azithromycin dihydrate

Cefadroxil

Cephalexin monohydrate

Ciprofloxacin hydrochloride

Clindamycin hydrochloride

Cloxacillin sodium

Sulfamethoxazole/trimethoprim

Erythromycin

Tetracycline hydrochloride

Non-steroidal Anti-inflammatories (Oral)

Diclofenac potassium

Diclofenac sodium

Diclofenac sodium/misoprostol

Diflunisal

Ibuprofen

Indomethacin

Ketorolac tromethamine

Meloxicam

Naproxen

Naproxen sodium

Tiaprofenic acid

Anxiolytics (Oral)

Diazepam

Hydroxyzine hydrochloride

Lorazepam