

## ALABAMA BOARD OF MEDICAL EXAMINERS

### Qualified Alabama Controlled Substances Certificate (QACSC) (Schedules III-V) Prescribing Protocol #001

Authority: Ala. Code § 20-2-61(c); 20-2-50, et. seq.  
Approved for PA: Minutes of November 18, 2009  
Revised: Minutes of March 10, 2010  
Revised: Minutes of August 17, 2011  
Revised: Minutes of March 21, 2012  
Approved for CRNP/CNM: Minutes of Sept. 8, 2013  
Revised: Minutes of April 16, 2015

1. The quantity of a controlled substance in Schedule III, IIIN (non-narcotic), IV, or V initially prescribed by a Physician Assistant (PA), Certified Registered Nurse Practitioner (CRNP) or Certified Nurse Midwife (CNM) who holds a QACSC shall be limited to a thirty (30) day supply, and a reissue must be authorized by the approved supervising, collaborating or covering physician.
2. If a prescription for a controlled substance in Schedule III, IIIN, IV, and/or V is initiated by the approved supervising, collaborating or covering physician AND the patient is well maintained on the medication, the QACSC holder may authorize no more than 30 days with two (2) reissues or ninety (90) days total.
3. The QACSC holder may have on site a more restrictive prescribing protocol which is specific to the individual practice, but it may not be more permissive than this stated protocol.
4. A QACSC holder may make a verbal order for a controlled substance in Schedules III-V under the circumstances stated in this protocol.
5. The approved supervising or collaborating physician should audit the prescribing of the QACSC holder via the Alabama Department of Public Health's Prescription Drug Monitoring Program at least once per quarter.
6. A QACSC holder is not authorized to dispense controlled substances in any Schedule. For the purposes of this protocol, "dispense" is defined as ordering a controlled substance to be dispensed or distributed from a dispensary located in the facility where the QACSC holder practices to a patient for off-premises consumption or administration.
7. The QACSC holder may sign for samples of those controlled substances in Schedules III-V approved in the QACSC holder's Formulary for office use as is normal and customary for that practice specialty.
8. The prescribing of controlled substances for the purpose of weight reduction is addressed in Administrative Rule 540-X-17.



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### Limited Purpose Schedule II (LPSP) Prescribing Protocol #001

**Authority: Ala. Code § 20-2-260**

**Approved: April 16, 2015**

**Revised: June 21, 2017**

1. A Physician Assistant (PA), Certified Registered Nurse Practitioner (CRNP) or Certified Nurse Midwife (CNM) who holds an LPSP is limited to prescribing only those specific controlled substances in Schedule II or IIN (non-narcotic) which have been requested on the LPSP application and approved by the Board of Medical Examiners.
2. **For long-acting Schedule II controlled substances, the initial dose and any subsequent escalation of the dose must be written by the physician with CRNP/ CNM/ PA writing maintenance doses only. Long-acting Schedule II medications may only be prescribed for patients in Hospice/ Palliative Care; Nursing Home/Rehabilitation Facilities; or Oncology.**
3. The quantity of an approved **short-acting** Schedule II or **any** IIN controlled substance initially prescribed by an LPSP holder shall be limited to a thirty (30) day supply, and a reissue must be authorized by the approved collaborating, supervising or covering physician. The collaborating, supervising or covering physician must see the patient before authorizing the reissue.
4. If a prescription for an approved Schedule II controlled substance is initiated by the approved collaborating, supervising or covering physician, the LPSP holder may authorize only one (1) reissue for a thirty (30) day supply of medication.
5. If a prescription for an approved Schedule IIN (non-narcotic) controlled substance is initiated by the approved collaborating, supervising or covering physician AND the patient is well maintained on the medication, the LPSP holder may authorize no more than a thirty (30) day supply with two (2) reissues.
6. Any escalation of a previously prescribed Schedule II or IIN (non-narcotic) controlled substance should be authorized by the approved collaborating, supervising or covering physician.
7. The LPSP holder may have on site a more restrictive prescribing protocol which is specific to the individual practice, but it may not be more permissive than this stated protocol.
8. The approved supervising or collaborating physician should audit the prescribing of the LPSP holder via the Alabama Department of Public Health's Prescription Drug Monitoring Program at least once per quarter.
9. An LPSP holder is not authorized to dispense controlled substances in any Schedule. For the purposes of this protocol, "dispense" is defined as ordering a controlled substance to be dispensed or distributed from a dispensary located in the facility where the LPSP holder practices to a patient for off-premises consumption or administration