

Standards of Practice: Prescribing Drugs FAQ

January 2026

Q: Do these amendments mean I *must* start prescribing to the full scope on January 1, 2026?

A: No. These amendments are **enabling**, not mandatory. They remove regulatory barriers so that you *can* practice to this scope if you have the individual competence and an enabling practice environment (e.g., private space, equipment, workflow, staffing) to do so safely. If you do not feel competent or if your practice environment does not support these activities, you should not provide them.

Q: How should I begin to prepare for this scope?

A: While the amendments enable full scope for all pharmacists, safe practice relies on building individual competence. All pharmacists should proactively review the amended Appendix F and the new list of conditions in Appendix G and identify areas where education and professional development may be required in 2026.

Q: Is there mandatory training I need to complete for the new conditions in Appendix G?

A: Pharmacists are required to undertake approved education prior to assessing and prescribing for acute otitis media and externa and for Group A streptococcal (GAS) pharyngitis as outlined in Appendix G.

While the NSPR does not designate specific mandatory courses, for the purposes of these standards, approved education includes education:

- attained as part of the curriculum of a CCCAP accredited pharmacy program (e.g., Dalhousie College of Pharmacy);
- accredited by the Canadian Council for the Continuing Education in Pharmacy (CCCEP), or by Dalhousie Continuing Pharmacy Education (Dal CPE);
- approved by another pharmacy regulatory authority in Canada;
- attained as part of a research protocol as described in *Appendix I* of these standards;
- provided by another organization as approved by the Board; or
- recognized by a pharmacy regulatory authority or recognized pharmacy education accreditor in an approved jurisdiction set out in Schedule A of the NSPR Waiver of Registration or Licensing Requirements in the Public Interest Policy.

For all other conditions listed in Appendix G, there is no requirement to complete approved education. However, it is your professional responsibility to self-assess your competence, including identifying gaps in your knowledge regarding specific disease states or ability to assess. If you are uncertain whether you can deliver the same standard of care to a patient that they would receive from another qualified practitioner, you must undertake education *before* providing that care to patients.

PANS has begun developing training resources and recommendations, assessment tools, and other educational resources for full scope. These are available through the [Member Lounge](#).

Q: My pharmacy does not operate like a Community Pharmacy Primary Care Clinic (CPPCC). Does this scope still apply to me?

A: All pharmacists, regardless of setting, are enabled to practice to this scope. However, if your pharmacy lacks the necessary private space, equipment, workflow, or staffing levels to perform this scope in accordance with the standard of care or clinical guidelines, you should not provide this care until practice environment changes are made.

Q: I cannot currently order lab tests at my pharmacy. Can I still practice to this scope?

A: Maybe. If the care you are providing requires lab values to safely assess or prescribe, and you cannot access them or order new labs, you must consider whether to proceed with providing this care.

However, it is important to remember that lab values can be gathered in different ways, including by being provided by the patient.

Pharmacists and pharmacy technicians should sign up to access the One Patient One Record (OPOR) Provider Portal on the [OPOR website](#) if they have not already done so.

Q: What if I am feeling pressured to prescribe?

A: Your clinical judgment must be the sole driver of patient care, and the care you provide must always be patient centered (i.e., the patient is involved in and consents to the assessment of their care needs and treatment decisions), and respect the autonomy, values, and dignity of each patient.

If you feel your professional independence and ethics are being undermined and/or the best interests of your patients are being compromised by pressure to practice beyond your competence or capacity, please notify the NSPR at complaints@nspharmacy.ca.

Q: Are there limitations on prescribing for sexually transmitted infections (STIs)?

A: Yes. Currently, assessment and prescribing for chlamydia and gonorrhea is authorized **only** in the context of providing HIV Pre-Exposure Prophylaxis (PrEP) care.

Q: Will there be more information provided?

A: Yes. The NSPR and PANS will be communicating additional information early in the new year, including hosting a joint webinar.