



Nova Scotia  
College of  
Pharmacists

# **Standards of Practice: Drug Administration**

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# Introduction

These Standards specify the practice requirements for pharmacy practitioners when undertaking drug administration activities in a community setting, including pharmacy and non-pharmacy settings.

## Terminology

The following terms and definitions serve as a reference for these Standards.

Term	Definition
Anaphylaxis Kit	A kit containing the necessary supplies and protocols for the treatment of anaphylactic reactions.
Drug Administration by Injection Permit	A permit issued to a pharmacist upon meeting the requirements in these Standards that qualifies them to administer drugs by injection to patients.
Drug Administration by Injection Technical Permit	A permit issued to a pharmacy technician, pharmacy technician candidate, intern, or pharmacy student that authorizes them to administer a drug by injection to a patient in accordance with these standards.
Patient	A patient or their agent.
Personal protective equipment (PPE)	Items worn to help prevent potential exposure to infectious disease. <sup>1</sup>
Pharmacy Practitioner	A pharmacist, pharmacy technician, pharmacy technician candidate, intern, or pharmacy student licensed with the Nova Scotia Pharmacy Regulator (NSPR).

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<sup>1</sup> Government of Canada. Personal Protective Equipment: Overview. Available: <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/medical-devices/personal-protective-equipment/overview.html>

# Standards of Practice

## 1. Authorized Activities

- 1.1. A pharmacy practitioner undertaking the administration of a drug to a patient will do so by injection, orally, sublingually, buccally, via inhalation or topically.
- 1.2. A pharmacy practitioner administering a drug to a patient will have current certification in First Aid and Cardiopulmonary Resuscitation (CPR). (Refer to *Appendix A - First Aid and CPR Certification Requirements*)
- 1.3. A pharmacy practitioner administering a drug by injection will do so only where:
  - the pharmacist has a NSPR Drug Administration by Injection Permit (Refer to Appendix C - NSPR Drug Administration by Injection Permit Requirements);
  - the pharmacy technician, pharmacy technician candidate, intern, or pharmacy student has a NSPR Drug Administration by Injection Technical Permit (Refer to Appendix D - NSPR Drug Administration by Injection Technical Permit Requirements);
  - the drug is administered by the intramuscular (IM) or subcutaneous route; and
  - the drug is administered in accordance with Appendix B – Special Consideration When Providing Injections.
- 1.4. A pharmacy practitioner will not administer a drug or other substance used for cosmetic purposes (e.g., Botox®, Dysport®, etc.)
- 1.5. A pharmacist with a NSPR Drug Administration by Injection Permit may delegate the authority to administer drug therapy by injection to a pharmacy technician candidate, intern, or pharmacy student with a NSPR Drug Administration by injection **Technical** Permit (Refer to *Appendix D - NSPR Drug Administration by Injection Technical Permit Requirements*) where the pharmacist:
  - is present in the pharmacy or other place where the drug administration is taking place (e.g., offsite clinic); and
  - in consideration of the knowledge, skills, and experience of the pharmacy practitioner to whom the authority is delegated:
    - provides the necessary level of supervision for a pharmacy student, or pharmacy technician candidate,  
**or**
    - provides the necessary direction for a pharmacy intern.
- 1.6. A pharmacy technician with a NSPR **Technical** Permit may delegate the authority to administer drug therapy by injection to a pharmacy technician candidate with a NSPR **Technical** Permit where the pharmacy technician:
  - is present in the pharmacy or other place where the drug administration is taking place (e.g., offsite clinic),  
**and**
  - provides the necessary level of supervision for the pharmacy technician candidate in consideration of the knowledge, skills, and experience of the individual to whom the authority is delegated.

- 1.7. A pharmacy technician candidate, intern, or pharmacy student with a NSPR **Technical** Permit may accept the delegation and administer a drug by injection provided they:
- are satisfied they are competent to administer the drug;
  - are satisfied they have the level of supervision/direction necessary given their registration category and in consideration of their knowledge, skills, and experience; and
    - in the case of pharmacy technician candidate, delegated to do so by a pharmacist or pharmacy technician with a NSPR Permit or **Technical** Permit; OR
    - in the case of a pharmacy student or intern, delegated to do so by a pharmacist with a NSPR Permit.

## 2. Knowledge, Competencies and Professional Ethics

- 2.1. A pharmacy practitioner with a NSPR Drug Administration by Injection **Permit** or **Technical Permit** assumes responsibility for their decision to be involved in the administration of a drug and related subsequent actions that they take, including their decision not to administer a drug.
- 2.2. Prior to administering a drug to a patient, a pharmacy practitioner is satisfied that:
- they have the requisite competency to administer the drug in the given circumstance, including ensuring they have appropriate training to administer the drug;
  - a pharmacist has determined the therapeutic appropriateness and timing of the administration; **and**
  - consideration has been given to:
    - the appropriate site, route, and method of administration (including landmarking and injection technique);
    - the appropriate length and gauge of needle;
    - any special precautions required for the administration of the drug (e.g., hazardous drugs); **and**
    - any requirements as set out in *Appendix B – Special Considerations When Providing Injections*.
- 2.3. A pharmacy practitioner is prepared to treat emergencies or adverse events associated with administering drugs, including *at a minimum*:
- providing basic first aid
  - use of adrenaline/epinephrine
  - performing CPR
  - managing vasovagal and anaphylactic reactions
  - addressing needlestick injuries
- 2.4. A pharmacy practitioner is familiar with and adheres to the pharmacy's established policies and procedures.

### 3. Patient Involvement

- 3.1. Prior to administering a drug to a patient, a pharmacist is satisfied that the patient has provided informed and voluntary consent (Refer to [\*Standards of Practice: General Pharmacy Practice\*](#)). Consent can be written, oral, or implied. However, if relying on implied consent, a pharmacy practitioner will be certain that the actions of the patient would be interpreted by others as having implied consent. Further, a pharmacy practitioner will not accept a signature on a consent form as a substitute for having a conversation with a patient such that it satisfies the requirements as described in Standard 3.2.
- 3.2. A pharmacist will be satisfied that the patient has been provided with enough information about the benefits, risks, and procedures involved in the administration of a drug to allow them to make an informed decision about providing consent.

Information provided to the patient to help inform their decision may include, where applicable:

- the purpose and benefits of the treatment
  - the risks and possible adverse effects of the treatments, including serious adverse reactions
  - what the treatment involves (e.g., the insertion of a needle into the deltoid muscle)
  - requirements for post administration monitoring
- 3.3. A pharmacy manager ensures that a record of the drug administration is available to the patient.

### 4. Facilities and Equipment

- 4.1. A pharmacy practitioner ensures that drug administration that takes place in a community pharmacy occurs in a private consultation room that meets the requirements of the [\*Pharmacy Practice Policy: Private Consultation Rooms\*](#) (effective as of December 31, 2020), except in circumstances where this is not possible (e.g., pandemics, mass immunization initiatives, emergency situations).
- 4.2. When drug administration takes place outside of a community pharmacy setting, a pharmacy practitioner ensures that:
  - the environment in which the administration takes place:
    - is clean, and in the case of drug administration by injection, allows for the use of appropriate aseptic technique and infection control procedures.
    - provides adequate patient privacy for the drug administration activity.
    - allows for the treatment of adverse reactions and emergencies.
  - measures are in place to maintain the necessary cold chain, and the cold chain is maintained.
- 4.3. A pharmacy practitioner ensures the supplies necessary to administer medications and treat emergencies are readily available and include, *but are not limited to*:
  - needles and syringes of varying sizes as necessary for the patient, site of injection and the characteristics of the drug

- personal protective equipment and other supplies as determined necessary to ensure proper infection control
- sharps containers
- an anaphylaxis kit consistent with the [Public Health Agency of Canada \(PHAC\) Canadian Immunization Guide](#)
- a first aid kit consistent with [Workplace Health and Safety Regulations](#)
- a mat or an examination table to allow a patient to lie down in the event of an adverse reaction or emergency
- an examination table if the practitioner is administering a drug that requires the patient to lie down for the administration (e.g., a drug that is administered into sites other than the deltoid muscle, or for drugs that have specific administration requirements such as Sublocade®)

## 5. Policies and Procedures

- 5.1. Pharmacy managers ensure that policies and procedures for activities associated with the administration of drugs are established, implemented, and enforced. These will be maintained in a readily retrievable format, and will address, *at a minimum*, the following topics:
  - routine drug administration processes and procedures, including:
    - the process for ensuring that clinical appropriateness for the administration has been completed by a pharmacist when the technical procedure is delegated, **and**
    - the process for delegating the technical administration to a **Technical Permit** holder.
  - post-administration observation in accordance with the established standard of care as determined by the [Public Health Agency of Canada Canadian Immunization Guide](#) and the [Nova Scotia Immunization Manual](#)
  - universal precautions and infection control, including hazardous waste management
  - treatment of adverse events, emergencies, and needle stick injuries
  - anaphylaxis kits
  - precautions for patients with latex allergies
  - reporting of adverse reactions (e.g., Adverse Events Following Immunization [AEFI] reporting)
  - management of the cold chain
  - documentation of drug administration and notification to other healthcare professionals
- 5.2. Pharmacy managers ensure that policies and procedures are reviewed and updated as necessary, at least every three (3) years, upon a change in practice or Standards, or in the event of a quality related event (QRE).
- 5.3. Pharmacy managers ensure that a process for updating and reviewing policies and procedures is in place.

## 6. Follow-up and Monitoring

- 6.1. A pharmacist ensures a follow-up plan is in place as appropriate and documents the plan and any results as part of the patient record.
- 6.2. When providing immunizations, a pharmacy practitioner monitors the post-administration response by ensuring that post-immunization observation takes place in accordance with the established standard of care as determined by the [Public Health Agency of Canada Canadian Immunization Guide](#) and the [Nova Scotia Immunization Manual](#).

The Public Health Agency of Canada has created resources for providers of immunizations during the COVID-19 pandemic. Please consult the following resources for additional information:

- [Guidance for influenza vaccine delivery in the presence of COVID-19](#)
- [NACI Statement: Recommendations on the duration of the post-vaccination observation period for influenza vaccination during the COVID-19 pandemic](#)
- [Interim guidance on continuity of immunization programs during the COVID-19 pandemic](#)

- 7.1. A pharmacy practitioner ensures that the details of the drug administration are documented in the patient record, including:
  - date of administration;
  - drug administered;
  - planned follow-up, as appropriate;
  - the name of any pharmacy practitioner involved in the process;
  - pharmacy information including name and contact information;
  - information regarding adverse events, in particular, if an AEFI form has been completed; **and**
  - In the case of an **immunization**, documentation required by the Nova Scotia Department of Health and Wellness as set out in the [Nova Scotia Immunization Manual](#).
- 7.2. A pharmacy practitioner ensures the details of the drug administration are communicated to the patient's primary health care provider or specialist at the earliest opportunity:
  - in every instance for drugs administered by injection (for vaccines see the specific requirements in 7.3 below); **and**
  - when appropriate in instances when a drug has been administered by a non-injectable route.

**Note:** A template notification form is included with these Standards and is available on the *NSPR* website. However, notifications can be created and communicated electronically using pharmacy software or other means provided the above data elements are included.
- 7.3. Each time a pharmacy practitioner administers a **vaccine** to a patient, the pharmacy practitioner will communicate the record of the injection to the patient's primary healthcare provider by ensuring that the details of the immunization are submitted to the provincial centralized immunization record (PANORAMA) using the following processes established by the Nova Scotia Department of Health and Wellness:

- For all vaccines **other** than those exempted by the Chief Medical Officer of Health, the details of the immunization are submitted into the Immunization Module in the Nova Scotia Drug Information System (NS DIS).
- For vaccines **exempted** by the Chief Medical Officer of Health, the details of the immunization are submitted into CANImmunize Clinic Flow.

***For clarity, the current exempted vaccines are those against SARS-CoV-2 and publicly funded influenza. The record of these vaccines is to be submitted using CANImmunize Clinic Flow.***

- 7.4. If a patient does not have a primary care provider or specialist, a pharmacy practitioner informs the patient that they will subsequently forward the drug administration information to a primary care provider or specialist, upon the patient's direction.
- 7.5. As required by the Nova Scotia Department of Health and Wellness, a pharmacy practitioner ensures that a reciprocal notification form is completed and submitted to the local Public Health office for vaccines that are both supplied and funded by Public Health (**except** for the influenza vaccine and vaccines against SARS-CoV-2 which do not require a reciprocal notification form).
- 7.6. As required by the Nova Scotia Department of Health and Wellness, a pharmacy practitioner ensures that adverse events that occur following vaccine administration are reported to the local Public Health office (the Nova Scotia Immunization Manual includes AEFI Guidelines).



## Appendix A – First Aid and CPR Certification Requirements

The Standards require that pharmacy practitioners who undertake drug administration activities maintain current certification in First Aid and Cardiopulmonary Resuscitation (CPR). As such, current certification in First Aid and CPR is required for a pharmacy practitioner to obtain an NSPR Drug Administration by Injection *Permit* or *Technical Permit*.

The specific requirements for First Aid and CPR certification are set out below. Training must be obtained from an organization that is recognized as an approved provider by Occupational Health and Safety in a province in Canada.

### First Aid

- Certification in Emergency First Aid (minimum)

### Cardiopulmonary Resuscitation (CPR) Certification

- CPR certification (minimum CPR Level C or equivalent)

# Appendix B – Special Considerations When Providing Injections

## *Intramuscular Administration into Sites Other than the Deltoid Muscle*

Most pharmacy practitioners have received formal training for IM injections limited to the deltoid muscle.

Prior to administering IM injections into sites other than the deltoid (e.g., thigh, hip, or buttocks), pharmacy practitioners must have received additional appropriate training, be satisfied they have the competency to administer the medication and have demonstrated their competency to do so. For clarity, appropriate training includes an opportunity for the pharmacy practitioner to have landmarked and administered the medication into the site under the guidance of an individual who assesses and confirms their competency.

## **Subcutaneous Administration into Sites Other than the Arm**

Most pharmacy practitioners have received formal training for subcutaneous injections limited to the back of the arm.

Prior to administering subcutaneous injections into sites other than the arm, (e.g., abdomen, leg), pharmacy practitioners must be satisfied that they have the training and competence necessary to administer into the site.

## **Drug Administration by Injection in Young Children**

Prior to administering injections in young children, pharmacy practitioners must be educated and knowledgeable about the factors specific to the administration of injections in this patient population. For clarity, education should include, but is not limited to, attaining the skills and knowledge to be able to:

- identify the most appropriate site for injection;
- counsel on, and provide, appropriate pain management strategies;
- use, and advise caregivers on, effective distraction techniques;
- advise and guide caregivers on appropriate bundling and positioning;
- manage anxiety, including caregiver anxiety;
- identify and manage anaphylaxis in young children, and
- advise caregivers on the identification of anaphylaxis.

Further, if administering injections into a site other than the deltoid, pharmacy practitioners must have undertaken appropriate training as described above in “*Intramuscular Administration into Sites Other than the Deltoid Muscle*”.

## **Other Considerations**

Pharmacies that provide drug administration into sites that require the patient to lie down must have a private consultation room equipped with a suitable table to accommodate the patient and that can be properly disinfected.

(**Note:** the requirements above are not applicable for the administration of emergency medications such as epinephrine and naloxone)

## Administration of Long-Acting Antipsychotics (LAIs)

Patients receiving LAIs can have complex health care needs and are often followed closely by a specialized care team, including doctors, nurses, social workers, and others in order to meet these complex needs. The ongoing relationship between the patient and their healthcare team is important for ensuring the long-term effectiveness and safety of LAI antipsychotic treatment and requires effective and timely communications among healthcare providers to ensure consistent, high-quality care.

Given these complex health care needs, and to ensure that pharmacy practitioners administering LAIs complement the quality of care provided to patients, pharmacy practitioners may administer LAI medications in circumstances where:

- the patient's mental health care team has contacted the pharmacy practitioner to request that they administer the medication and has provided patient specific administration details;
- the pharmacy practitioner has the training and facilities necessary to administer the medication in the recommended site and can accommodate the request;
- a process has been established between the patient's mental health care team and the pharmacy practitioner that allows for the timely exchange of information related to the patient's mental health, treatment response, adverse effects, and other issues related to the patient's health;
- the pharmacy practitioner communicates any pertinent observations, including if a patient does not receive a dose, to the patient's mental health care team; **and**
- the pharmacy practitioner is satisfied that regular contact is maintained between the patient and their mental health care team for ongoing assessments of mental health care needs.

# Appendix C – NSPR Drug Administration by Injection *Permit* Requirements

The Standards of Practice require that pharmacists administering drugs by injection have a *NSPR Drug Administration by Injection Permit*. The permit must be renewed at the end of each calendar year, regardless of when it was issued.

**To obtain an initial *NSPR Drug Administration by Injection Permit*, the following requirements must be met:**

- One of the following:
  - Completion of a pharmacist immunization and injection education training program that:
    - has obtained CCCEP Competency Mapped Accreditation:
    - is specifically approved by Council: or
    - that is recognized by another Canadian provincial pharmacy regulatory authority (PRA) as meeting that PRA's education and training requirements for authorization of pharmacists to administer drugs by injection.
- OR**
- Have obtained a Nova Scotia pharmacist license as an applicant from another province in Canada or an eligible jurisdiction set out in Schedule A of the [\*Waiver of Registration or Licensing Requirement in the Public Interest Policy\*](#) and had the authority to administer drugs by injection in that other province or jurisdiction.
- Current certification in First Aid and CPR as set out in *Appendix A - First Aid and CPR Certification Requirements*.
- For pharmacists with no previous *NSPR Drug Administration by Injection Technical Permit* or *Permit*, application for a permit within one (1) year of completion of the education program.
- For pharmacists with current authorization to administer drugs by injection from another PRA, or from another jurisdiction set out in Schedule A of the [\*Waiver of Registration or Licensing Requirements in the Public Interest Policy\*](#), submission of a declaration that they have administered a sufficient number of injections in the past two (2) years to maintain their competence.
- Pharmacists with lapsed authorization to administer drugs by injection in another PRA must meet the requirements for Lapsed Permits below.
- Submission of a completed application and fee

**To annually renew a *Permit*, a pharmacist must:**

- have current certification in First Aid and CPR as set out in *Appendix A - First Aid and CPR Certification Requirements*.
- declare that they have administered a sufficient number of injections in the past two (2) years to maintain their competence. (If this declaration cannot be made, a refresher course is necessary for permit renewal).
- submit a completed online application and fee.

## Lapsed Permits

To renew a Permit that has lapsed, a pharmacy practitioner must do the following:

- declare that they have administered a sufficient number of injections in the past two (2) years to maintain their competence (including through the authority granted in another province or health authority in Nova Scotia), **OR**
- complete a refresher version of a pharmacist immunization and injection education training program that:
  - has obtained CCCEP Competency Mapped Accreditation,
  - is specifically approved by Council, **OR**
  - is recognized by another Canadian provincial pharmacy regulatory authority (PRA) as meeting that PRA's education and training requirements for a refresher program,
- have current certification in First Aid and CPR as set out in *Appendix A - First Aid and CPR Certification Requirements*, **AND**
- submit a completed application and fee.

NSPR Drug Administration by Injection **Permit** Requirements

Permit Requirements	Initial NSPR Permit				Annual Online Permit Renewal	Renewal of Lapsed Permit (a or b)
	No previous authorization/permit to inject	Current authorization in another province in Canada or from an eligible jurisdiction*	Current Drug Admin <i>Technical Permit</i> -First application for Permit	Lapsed Drug Administration by Injection <i>Technical Permit</i> (a or b)		
Immunization and injection education and training program: CCCEP accredited, approved by Council, or recognized by another PRA	✓					
Current First Aid and Cardiopulmonary Resuscitation (CPR) certification (See <i>Appendix A</i> )	✓	✓	✓	✓	✓	✓
Refresher version of an immunization and injection education and training program as described above				✓ <sup>a</sup>		✓ <sup>a</sup>
Self-declaration of continued competence to administer drugs by injection		✓	✓	✓ <sup>b</sup>	✓	✓ <sup>b</sup>
Completed application and submitted fee	✓	✓	✓	✓	✓	✓

\* as set out in Schedule A of the *Waiver of Registration or Licensing in the Public Interest Policy*.

## Appendix D – NSPR Drug Administration by Injection *Technical Permit* Requirements

The Standards of Practice require that pharmacy practitioners who are pharmacy technicians, pharmacy technician candidates, interns, or pharmacy students have a NSPR Drug Administration by Injection Technical Permit. The Technical Permit must be renewed at the end of each calendar year, regardless of when it was issued.

To obtain an initial NSPR Drug Administration by Injection *Technical Permit*, the following requirements must be met:

### For pharmacy students and interns

- completion of a pharmacist immunization and injection education training program that:
  - has obtained CCCEP Competency Mapped Accreditation;
  - is specifically approved by Council; or
  - that is recognized by another Canadian provincial pharmacy regulatory authority (PRA) as meeting that PRA's education and training requirements and credentials for pharmacists to administer drugs by injection.

### For pharmacy technician candidates

- completion of a pharmacy technician injection education training program that:
  - has obtained CCCEP Competency Mapped Accreditation;
  - is specifically approved by Council; or
  - that is recognized by another Canadian provincial pharmacy regulatory authority (PRA) as meeting that PRA's education and training requirements and credentials for pharmacy technicians to administer drugs by injection.

### For pharmacy technicians

- One of the following
  - Completion of a pharmacy technician injection education training program that:
    - has obtained CCCEP Competency Mapped Accreditation;
    - is specifically approved by Council; or
    - that is recognized by another Canadian provincial pharmacy regulatory authority (PRA) as meeting that PRA's education and training requirements and credentials for pharmacy technicians to administer drugs by injection.

### OR

- Have obtained a Nova Scotia pharmacy technician license as an applicant from another province in Canada or an eligible jurisdiction set out in Schedule A of the [\*Waiver of Registration or Licensing Requirement in the Public Interest Policy\*](#) and have been provided the authority to administer drugs by injection in that province or jurisdiction.
- Current certification in First Aid and CPR as set out in *Appendix A - First Aid and CPR Certification Requirements*.

- For pharmacy practitioners with no previous NSPR Drug Administration by Injection Technical Permit, application for a Technical Permit within one (1) year of completion of the education program.
- For pharmacy practitioners with current credentials to administer drugs by injection from another PRA, or from another jurisdiction as set out in Schedule A of [the Waiver of Registration or Licensing Requirements in the Public Interest Policy](#), submission of a declaration that they have administered a sufficient number of injections in the past two (2) years to maintain their competence.
- For pharmacy practitioners with lapsed authorization to administer drugs by injection in another PRA must meet the requirements for Lapsed Permits below.
- Submission of a completed application and fee.

**To annually renew a Technical Permit, a pharmacy practitioner must:**

- have current certification in First Aid and CPR as set out in Appendix A - First Aid and CPR Certification Requirements.
- declare that they have administered a sufficient number of injections in the past two (2) years to maintain their competence. (If this declaration cannot be made, a refresher course is necessary for technical permit renewal)
- submit a completed application and fee.

**Lapsed Technical Permits**

**To renew a Technical Permit that has lapsed, a pharmacy practitioner must:**

- declare that they have administered a sufficient number of injections in the past two (2) years to maintain their competence, (including through the authority granted in another province or health authority in Nova Scotia), **OR**
- complete a refresher version of an education and training program that:
  - has obtained CCCEP Competency Mapped Accreditation,
  - is specifically approved by Council, **OR**
  - is recognized by another Canadian provincial pharmacy regulatory authority (PRA) as meeting that PRA's education and training requirements for a refresher program,
- have current certification in First Aid and CPR as set out in *Appendix A - First Aid and CPR Certification Requirements*, **AND**
- submit a completed application form and fee.



NSPR Drug Administration by Injection **Technical Permit** Requirements

NSPR Drug Administration by Injection Technical Permit Requirements	Initial NSCP Technical Permit		Annual Online Technical Permit Renewal	Renewal of Lapsed Technical Permit (a or b)
	No previous credential(s) to inject	Current credential(s) in another province in Canada or an eligible jurisdiction*		
Injection education and training program: CCCEP accredited, approved by Council, or recognized by another PRA	✓			
Current First Aid and Cardiopulmonary Resuscitation (CPR) certification See <i>Appendix A</i>	✓	✓	✓	✓
Refresher version of an injection education and training program as described above				✓ <sup>a</sup>
Self-declaration of continued competence to administer drugs by injection		✓	✓	✓ <sup>b</sup>
Completed application and submitted fee	✓	✓	✓	✓

\* as set out in Schedule A of the *Waiver of Registration or Licensing in the Public Interest Policy*.

# DRUG ADMINISTRATION NOTIFICATION

☐ Response Required    ☐ For your records    Date: \_\_\_\_\_

<b>T0:</b>	<b>REGARDING:</b>
Provider	Patient:
Tel:	DOB:
Fax:	HCN:

Date of Administration			Time
Drug Administered	Drug	DIN	Lot
	Site and Route		Dose # in series (if applicable)
Planned Follow-Up	<input type="checkbox"/> N/A		
Details			
Adverse Events	<input type="checkbox"/> N/A		
AEFI Completed	<input type="checkbox"/>		
Details			

## Pharmacy Practitioner Information:

Authorizing Pharmacist	
Signature	
Administrator/Immunizer	
Signature	
Pharmacy Name	Phone/Fax