



Prescribing and Dispensing Profile

Wisconsin



Research current through November 2015.

This project was supported by Grant No. G1599ONDCP03A, awarded by the Office of National Drug Control Policy. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the Office of National Drug Control Policy or the United States Government.



©2015 The National Alliance for Model State Drug Laws (NAMSDL). Headquarters Office: 420 Park Street, Charlottesville, VA 22902. This information was compiled using legal databases and state agency websites.



Schedule II Prescribing Limitations (not related to pain clinics)

Schedule II substances may only be dispensed on the written prescription of a practitioner

- May be dispensed on the oral prescription in an emergency
 - Must be promptly reduced to writing
 - Emergency situation means a situation where the prescribing practitioner determines that:
 - Immediate administration of the substance is necessary for proper treatment of the patient
 - No appropriate alternative treatment is available, including the administration of a drug that is not a Schedule II
 - It is not reasonably possible for the prescribing practitioner to provide a written prescription to the pharmacist prior to dispensing
 - Quantity prescribed and dispensed must be limited to an amount adequate to treat the patient during the emergency period
 - If the practitioner is not known to the pharmacist, the pharmacist shall make a reasonable effort to determine that the oral authorization came from an authorized practitioner, which may include a call back to the prescribing practitioner using good faith efforts to insure the practitioner's identity
 - Prescribing practitioner must deliver a written prescription to the pharmacist within seven days
- May be dispensed on the faxed prescription of a practitioner in following circumstances:
 - The prescription order is for a controlled substance to be compounded for direct administration to a patient by certain methods
 - The prescription is for a patient in a long term care facility or who meets the eligibility requirements for placement in a long term care facility but who elects to remain at home
 - The prescriptions is for a patient in a hospice

Schedule II prescriptions may not be dispensed more than 60 days after initially written

Schedule II prescriptions must be maintained in a separate file or may be filed with Schedule III – V prescriptions as long as those prescriptions are clearly marked with a “C” in red ink

May not be filed with non-controlled substance prescriptions

Schedule II prescriptions may not be refilled

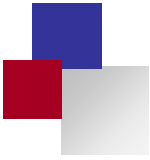
Schedule III, IV and V Prescribing Limitations (not related to pain clinics)

Schedule III – V substances may only be dispensed on the written, oral, faxed, or electronic prescription of a practitioner

Schedule III and IV prescriptions shall not be filled or refilled more than six months after originally issued nor refilled more than five times unless renewed by the practitioner

Schedule V substances may only be dispensed for a medical purpose

Schedule III – V prescriptions must be maintained in a separate file or may be filed with non-controlled substances as long as they are clearly marked in red ink with a “C”



Miscellaneous Prescribing/Dispensing Requirements

A practitioner may dispense or deliver a controlled substance to or for an individual only for medical treatment in the ordinary course of that practitioner's profession

- A practitioner shall maintain complete and accurate records of each prescription drug received, dispensed, or disposed of
- All prescription drugs dispensed by a practitioner shall be recorded in the patient record

It is unprofessional conduct for a physician to administer, prescribe, dispense, supply, or obtain a controlled substance other than in the course of legitimate professional practice

Prescriptions must contain the following:

- Date of issue
- Name, address, and registration number of practitioner
- Name and address of patient
- Name and quantity of drug
- Directions for use
- The symptom or purpose for which the drug is being prescribed, if required
- Signature of practitioner

Prescribing/Dispensing Limitations for Dentists

No separate statutes or regulations related to prescribing and dispensing limitations for dentists.

Prescribing/Dispensing Limitations for Optometrists

Optometrists may not prescribe, dispense, or administer a Schedule II substance but may prescribe, dispense, or administer Schedule III – V substances

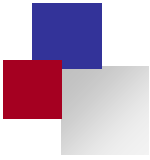
Therapeutic pharmaceutical agents may be prescribed or administered by an optometrist who holds a current TPA certificate

Diagnostic pharmaceutical agents may be administered by an optometrist who holds a current DPA certificate

No optometrist may use therapeutic pharmaceutical agents unless the individual meets the requirements for certification

Pain Clinic/Pain Management Regulations

No specific statutes or regulations identified.



Training or Education Requirements or Recommendations for Practitioners who Prescribe or Dispense Controlled Substances

No specific statutes or regulations identified.

Medical Marijuana or Controlled Substances Therapeutic Research Program Provisions

This section deals only with the conditions that qualify a patient for the use of medical marijuana or a therapeutic research program and the attendant physician responsibilities. For complete information on state medical marijuana and therapeutic research programs, please visit the NAMSDDL website at www.namsddl.org.

The controlled substances board shall aid a practitioner in applying for and processing an investigational drug permit for marijuana and, if approved, the board shall approve which pharmacies can distribute marijuana to patients upon a written prescription

- Only pharmacies within hospitals are eligible to receive marijuana for distribution
- The board shall also approve which practitioners can write prescriptions for the marijuana

Upon the request of a physician, the controlled substances board shall aid the physician in applying for and processing an investigational drug permit for cannabidiol as treatment for a seizure disorder

- If approved, the board shall approve which pharmacies and physicians may dispense cannabidiol to patients

If cannabidiol is removed from the list of controlled substances, or determined not to be a controlled substance under Schedule I, the board shall approve which pharmacies and physicians may dispense cannabidiol to patients as treatment for seizure disorder

Approved pharmacy or physician may dispense cannabidiol in a form without a psychoactive effect as a treatment for a seizure disorder or any physician may provide an individual with a hard copy of a letter or other official documentation stating that the individual possesses cannabidiol to treat a seizure disorder if the cannabidiol is in a form without psychoactive effect

PMP Requirements for Mandatory Registration and Access

No specific statutes or regulations identified.

Patient Referral to Treatment

No specific statutes or regulations identified.

Board Guidelines

None.