Minnesota Board of Pharmacy’s Guidance on Compounding of Veterinary Products

On March 4, 2015, the Pharmacy Board issued the following guidance to veterinarians and pharmacies, pursuant to MN Stats. §214.108. It will remain in effect only until the Board can promulgate appropriate rules related to this issue. Compounding pursuant to a patient-specific prescription is not the subject of this guidance. The full document is available at: http://mn.gov/health-licensing-boards/images/Urgent%2520and%2520Emergency%2520Veterinary%2520Compounding%2520Guidance%2520Document.pdf

1. Pharmacies licensed by the Board can already compound and dispense drugs, pursuant to a prescription received in advance of the dispensing, provided that such compounding and dispensing is done according to MN Stats. §151.253 and the applicable rules of the Board. Note that only pharmacies that have selected the non-sterile and/or sterile compounding licensing categories are allowed to compound drugs. A pharmacy’s license type can be checked at: https://www.hlb.state.mn.us/mnbop/GLSuiteWeb/Clients/MNBOPharm/Public/LicenseeSearch.aspx

2. The Board will exercise enforcement discretion and not take action against a pharmacy that, in good faith, provides a compounded drug to a veterinarian, at wholesale and without first receiving a patient-specific prescription, only when:
   a) The compounded drug is needed to treat animals in urgent or emergency situations; that is, where the health of an animal is threatened, or where suffering or death of an animal is likely to result, from failure to treat.
   b) Timely access to a compounding pharmacy is not available, as determined by the prescribing veterinarian.
   c) There is no FDA-approved, commercially manufactured drug that is suitable for treating the animal; or there is a documented shortage of such drug.
   d) The compounded drug is to be administered by a veterinarian or a bona fide employee of the veterinarian; or dispensed to a client of a veterinarian in an amount not to exceed what is necessary to treat an animal for a period of five days.
   e) The pharmacy is licensed by the Board as a drug wholesaler. (Except that a pharmacy could distribute compounded drugs as described in this guidance until May 1, 2015 without being licensed as a drug wholesaler).
   f) The pharmacy has selected the sterile or non-sterile compounding licensing category.
   g) The pharmacy is appropriately registered by the United States Drug Enforcement Administration when providing compounded products that contain controlled substances.

Release of Medical Records

Must you release medical records to client if asked? The answer is yes, even if the client owes the practice money. MN Rule 9100.0800 Subpart 4 (Record keeping) states: Medical records, or an accurate summary of them, must be released to the animal owner or the owner’s authorized agent, including the board, within two weeks of a written request. A reasonable charge for copying or preparation of a summary may be made, except in the case of a board investigation, in which case no charges are authorized. Furthermore, a radiograph is considered part of the medical record, and must be permanently identified. It must be released on the written request of another veterinarian who has the written authorization of the owner of the animal to whom it pertains. Film radiographs must be returned within a reasonable time to the practice originally prepared the radiograph(s). If a veterinarian is using digital radiography, a compact disc with the files would fall under the same category. Beware that downloads of files, such as DICOM images in some systems removes all identifiers. Veterinarians should work with their vendor to be able to export files with identifiers intact or added back into the image. Lastly, the contents of medical records must be kept private and not released to third parties unless authorized by the client or required by law. For example, law enforcement can request medical records via a search warrant. The Department of Health can request rabies vaccination information in the case of an animal bite, as vaccination status of the animal determines the course of action for both the animal and human.