

Prescribing Matters for Dental Practitioners

Dental Practitioners' Formulary (DPF)

Dental prescribing within the NHS (i.e. using HS21D form) is restricted to those drugs contained within the 'List of Dental Preparations' in the British National Formulary (BNF). Registered dentists are legally entitled to prescribe from the entire BNF but only those listed in the dental

formulary can be issued on an HS21D script. For all prescriptions dentists should only prescribe medication that has uses in dentistry and meets the dentistry needs of the patient. Dentists have a duty of care to prescribe only within their competence.



Prescription Writing

Legal Requirement

- Prescriptions should be written or printed in indelible ink, clearly and legibly, stating the date, name and address of the patient, dose, frequency and total quantity of the medication required. The number of days' treatment should be indicated in the box provided on the NHS forms.
- State the age /date of birth of a child under 12 years
- Write the quantity in words and figures when prescribing medicines that might be prone to abuse. This is obligatory for Controlled Drugs in schedule 2 and 3 (except temazepam).

Good Practice Points

- It is good practice for the dentist to both write and sign the prescriptions
- Where appropriate¹, prescribe using the <u>generic</u> drug name, even if the drug is not available in the generic form
- Prescribe sugar-free medicines where available and state this clearly on the prescription
- For preparations to be taken as required, specify the minimum dose interval.
- Do not use abbreviations
- Record prescription details in the patient's notes
- Draw a diagonal line across the blank part of the form under the prescription to prevent fraudulent alterations or additions being made
- Alterations are best avoided but if any are made they should be clear, unambiguous and endorsed with the prescriber's signature
- Avoid the unnecessary use of decimal points eg 3 grammes should be written as 3g and <u>not 3.0g</u>, quantities of less than 1 gram should be written in milligrams e.g. 500mg, <u>not 0.5g</u>
- When decimals are unavoidable, a zero should be written in front of the decimal point where there is no other figure e.g. 0.5ml, <u>not .5ml</u>. It is advisable to avoid trailing zeros e.g. 0.50ml
- 1. Refer to list of items unsuitable for generic prescribing for those items which should not be prescribed generically http://www.hscboard.hscni.net/medicinesmanagement/Prescribing%20Guidance/index.html#P-1 0



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Points to consider when Prescribing

- Is prescribing necessary? Consider risks vs. benefits
- Check medical history for contraindications and interactions
- Caution in potential high-risk groups e.g. pregnancy/breastfeeding, elderly, children (refer to BNF for further details)
- Provide adequate patient information e.g. clear instructions, side-effects and suitable disposal
- Do not prescribe for own family members

Prescription Security

Blank NHS prescription forms are of considerable value and should be stored securely. The practice should have a written protocol, signed up to by all staff, which outlines procedures for the management of prescription security. The following points should be addressed:

- Keep stocks of blank forms to the minimum necessary
- Stocks of blank forms/pads should be stored in a locked cupboard at all times
- Two staff members should be involved in the ordering and receipting in of prescriptions
- On receipt of prescription forms, a record should be made of the prescription numbers received for each prescriber
- A log should be kept of prescriptions forms/pads signed out to each dentist
- Do not leave blank prescription forms visible or unattended if called away from the surgery. When not in use, keep prescription forms in a locked drawer within the surgery.
- There is an obligation on each prescriber to check if the volume of their prescription pad is going down unexpectedly
- When a practitioner retires or leaves the Dental List, appropriate arrangements must be made by the dentist or practice for the destruction of any remaining prescriptions or unused pads.
- If prescriptions are to be collected by the patient, they should be stored in a safe place. A record should be kept of prescriptions collected by third parties e.g. community pharmacy.

*

Stolen Prescriptions

- If available, ensure that any CCTV that may have recorded the incident is retained and not routinely copied over; this may become vital at a later date
- Any information that can identify the time frame of the theft is also highly valuable as it provides parameters for any follow up action
- If a patient prescription has been stolen or altered, take steps to secure any patient records which may confirm the actual medication prescribed
- If your dental practice believes it has been a victim of fraudulent medication activity, contact Counter Fraud and Probity Services (CFPS) to discuss your concerns and report the matter
- Report all confirmed instances of fraudulent medication activity to the PSNI on 0845 600 8000, as these are criminal offences.

CFPS contact details

Advice can be sought direct from CFPS on 02890 532973 or via CFPS@hscni.net or via the following link www.cfps.hscni.net/reportfmr

Prescribing oral benzodiazepines—what is on the BNF DPF?

Drug	Strengths available
Diazepam tablets	2mg, 5mg, 10mg
Diazepam oral solution	2mg/5ml
Temazepam tablets	10mg, 20mg
Temazepam oral solution	10mg/5ml

- An oral dose of a benzodiazepine may be used for premedication to aid anxiety
 management prior to dental treatment. The drugs are addictive and susceptible to abuse
 and therefore a maximum of 3-4 tablets should be prescribed.
- Temazepam has a shorter duration and more rapid onset of action than diazepam and is preferred when it is important to minimise residual effects
- Due to residual side effects of benzodiazepines patients should be warned that they may feel sleepy and should not drive or operate machinery
- Nitrazepam is not listed in the BNF Dental formulary and should not be prescribed on a HS21D
- Diazepam is classed as a Schedule 4 Controlled Drug, and temazepam is Schedule 3.
 Regular monitoring of dental prescriptions for benzodiazepines is carried out by HSCB
 dental advisers. Practitioners prescribing high quantities or unusual patterns of these
 drugs may be asked to provide further information regarding their prescribing.

Benzodiazepine dose prior to procedures

Usual dose 1-2 hours before procedure:

Adults >18yrs: Diazepam: 5-10mg,

Temazepam: 10-20mg

Elderly Half adult dose

Children: Refer to BNF for Children

Refer to BNF for further information

Patients should be advised that they will require an escort and they

should not drive to or from their appointment.

Private prescriptions for CDs —PCD1 form

If dentists are writing private prescriptions for Schedule 2 and 3 controlled drugs including temazepam, they must use the private prescription form PCD1. A dentist can prescribe privately any Schedule 2 or 3 controlled drug on this form within his/her professional competence as long as it meets the dental needs of the patient. The dental prescriber must be able to justify the clinical need and quantities of the drug prescribed.

To obtain a stock of PCD1 forms, an application form must be completed and returned to the BSO. Refer to the BSO website for further information.

http://www.hscbusiness.hscni.net/services/2272.htm

The HSCB is responsible for monitoring controlled drug prescribing on both private and NHS prescriptions. Prescribing information from NHS and PCD1 forms dispensed by community pharmacists is made available to the HSCB by the BSO, and used for this purpose.



Prescribing — Drug Amounts

Quantities prescribed should be sufficient to cover a specific episode of treatment. In the case of analgesics and controlled drugs, the minimum quantity required should be prescribed. Usually quantities of up to 5 days' treatment is sufficient.

In line with The Controlled Drugs (Supervision of Management and Use) Regulations (Northern Ireland) 2009, regular monitoring of dental prescriptions for schedule 1-5 Controlled Drugs is carried out by HSCB staff. Those practitioners with high quantities or unusual patterns of prescribing may be contacted by a dental adviser and asked to provide further information regarding their prescribing.

It is important that both clinical need and supporting evidence for less commonly prescribed items (e.g. mouthwashes and toothpastes) is reviewed before issuing a prescription. This includes repeat requests.

GP requests to prescribe dental products

GPs often receive requests to prescribe medication for the treatment of dental conditions e.g. antibiotics and analgesia to treat abscesses, fluoride toothpastes and mouthwashes. These are areas of <u>dental</u> <u>expertise</u> and as such dentists should take responsibility for prescribing.

It is not appropriate for GDPs or their staff to advise patients to contact their GP for any type of medication to treat dental-related conditions.

These items should only be prescribed by dentists where there is both clinical need and good evidence to support their use.

Anaphylaxis

Age	IM Dose of Adrenaline (epinephrine) 1:1000 (1mg/1ml)	
Adult	500 micrograms (0.5ml)	
Child more than 12 years	500 micrograms (0.5ml) 300 micrograms (0.3ml) if child is small or prepubertal	
Child 6 - 12 years	300 micrograms (0.3ml)	
Child less than 6 years	150 micrograms (0.15ml)	
These doses may be repeated several times if necessary at five minute intervals		

(http://www.resus.org.uk/pages/reaction.pdf)

Adrenaline can be obtained either in ampoule form 0.5ml or 1ml size or auto injector form i.e. pen device. If ampoules are stocked then the correct volume of drug must be used as per age. If a pen device is stocked all three strengths must be available e.g. Anapen[®] 150, Anapen[®] 300 and Anapen[®] 500.

according to blood pressure, pulse and respiratory function.

This newsletter has been produced with the aim of informing and guiding dentists in areas of medicines governance and prescribing safety. We welcome your feedback and suggestions for articles that you would find useful for future editions. If you have any queries or require further information on the contents of this newsletter, please contact Mr Adrian Millen, Dental Governance Adviser, HSCB at Adrian.millen@hscni.net