



# Victoria Government Gazette

No. S 277 Wednesday 10 June 2020  
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## Drugs, Poisons and Controlled Substances Act 1981

### PUBLIC HEALTH EMERGENCY ORDER UNDER SECTION 22G (PHEO #6)

I, Kym Peake, Secretary to the Department of Health and Human Services, pursuant to section 22G of the **Drugs, Poisons and Controlled Substances Act 1981** (the Act), amend the public health emergency order (Order) published in the Victoria Government Gazette on 26 March 2020 page 4 in the belief that it is necessary to do so in order to respond to the public health emergency which is the demand on the workforce of registered medical practitioners and nurse practitioners dealing with prevention and treatment of human infection with coronavirus (COVID-19) in Victoria. This Order (PHEO #6) incorporates both the original Order published on 26 March 2020 and the amendments and can be read as a standalone Order.

The purpose of this Order is:

- (1) to remove the requirement for a registered medical practitioner or nurse practitioner to apply to for a Schedule 8 permit in certain circumstances, for the duration of the Order.
- (2) To remove the limitation in paragraph (b) of the Order published on 26 March 2020 that a Special Schedule 8 permit was not required only if the prescription or the supply was limited to a set maximum number of treatment days, namely 30.

By this Order, I authorise all registered medical practitioners and nurse practitioners registered under the Health Practitioner Regulation National Law (Victoria) to practise in their respective profession (other than as a student), to administer, supply or prescribe a Schedule 8 poison in the following circumstances:

Under this Order:

- (a) subject to paragraphs (c) and (d), despite section 34(2) of the Act, a registered medical practitioner or nurse practitioner **is not required** to apply for a Schedule 8 permit for a patient where treatment is for a continuous period greater than 8 weeks and the patient is **not** a drug dependent person;
- (b) a registered medical practitioner or nurse practitioner **is not required** to apply for a special Schedule 8 permit under Division 1 of Part 2 of the Drugs, Poisons and Controlled Substances Regulations 2017;
- (c) paragraphs (a) and (b) are conditional on the requirement that the registered medical practitioner or nurse practitioner **must take all reasonable steps to check the monitored poisons database** (SafeScript) for the patient's Schedule 8 medication history and Schedule 8 permit history **prior** to administering, supplying or prescribing the Schedule 8 poison;
- (d) the registered medical practitioner or nurse practitioner **must record** that the administration, supply or prescription of the Schedule 8 poison was made under this Order (PHEO #6) as amended;
- (e) this Order does not affect the requirement that a registered medical practitioner or nurse practitioner **must** apply for a Schedule 8 permit for a drug-dependent person under section 34(1) of the Act.

This Order comes into force on the date of its publication in the Government Gazette and continues in force until midnight 27 September 2020 unless earlier revoked.

Dated 9 June 2020

KYM PEAKE  
Secretary to the Department of Health and Human Services

**SPECIAL**

## Drugs, Poisons and Controlled Substances Act 1981

### PUBLIC HEALTH EMERGENCY ORDER UNDER SECTION 22D (PHEO #7)

I, Kym Peake, Secretary to the Department of Health and Human Services, pursuant to section 22D of the **Drugs, Poisons and Controlled Substances Act 1981**, make this public health emergency order (Order) in the belief that it is necessary to do so in order to prevent a serious risk to public health and to respond to the public health emergency which is the potential for serious medicines shortages caused by the impact of coronavirus (COVID-19) in Victoria.

The Therapeutic Goods Administration has established a process to identify medicine shortages, and propose conditions to apply nationally under which a medicine in short supply may be substituted by the pharmacist.

The purpose of this Order is to enable pharmacists to supply a medicine in Victoria consistent with a Therapeutic Goods Administration Serious Shortage Medicine Substitution Notice (SSN).

For the purposes of regulation 50(4) of the Drugs, Poisons and Controlled Substances Regulations 2017, this Order specifies additional exceptional circumstances in which a pharmacist may sell or supply a Schedule 4 poison on a prescription contrary to the instructions on the prescription.

By this Order I authorise all pharmacists registered under the Health Practitioner Regulation National Law (Victoria) to practise in the pharmacy profession (other than as a student) to sell or supply the Schedule 4 poison specified in the SCHEDULE contrary to the instructions on the prescription to a person ('the patient') in an emergency and without consulting the prescriber, in accordance with the conditions specified in the SCHEDULE.

#### SCHEDULE

**Name of medicine (including strength and formulation):** *Metformin modified-release (also known as extended-release or XR) 500mg tablets* (Schedule 4 Prescription Only Medicine)

**Permitted medicine (including strength and formulation) to be supplied under this Order:** *Metformin immediate-release 500 mg tablets or metformin modified-release 1000 mg tablets*, in accordance with the table set out below.

<i>Metformin modified-release 500 mg dose</i>	<i>Medicine to be supplied</i>
1500 mg daily	Metformin modified-release 1000 mg plus metformin immediate-release 500 mg in separate doses
1000 mg daily	Metformin modified-release 1000 mg
500 mg daily	Metformin immediate-release 500 mg daily*

\*some brands of metformin immediate-release tablets are scored

#### Restrictions on this dose form e.g. dose intervals

Details: When modified-release tablets are supplied, they should be taken at the time of day the patient would usually take their modified-release dose.

Where the result of the substitution is a dosing regimen using modified-release and immediate-release tablets, the timing of the modified-release dose should remain unchanged. The immediate-release dose in the regimen should be taken at a different time from the modified-release dose.

Limitations on substitution: Patients previously intolerant to metformin immediate-release formulations must be referred to the prescriber if the relevant substitution includes immediate-release metformin.

#### Conditions

1. The patient must present with a valid prescription for the medicine to be substituted for.
2. The registered health practitioner who issued the prescription has not provided further verbal or written instructions that the pharmacist should not supply the medicine specified on the prescription in accordance with this Order.

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3. Total quantity supplied under this protocol to be equivalent to the number of days supplied on original prescription.
  4. The patient or their carer must consent to receiving the medicine(s) supplied pursuant to this Order.
  5. The pharmacist may, in their professional judgement, determine that the patient is not suitable to receive alternative medicine under the notice e.g. known previous hypersensitivity or severe adverse reaction to excipients; known previous intolerance to immediate-release metformin formulations.
  6. The pharmacist creates a record that the supply of a Schedule 4 poison was made in accordance with this Order PHEO #7.
  7. Where the prescription allows for the supply of repeats, the pharmacist marks that the supply was made in accordance with this Order PHEO #7.

This Order comes into force on the date of publication in the Government Gazette and continues in force until midnight 1 August 2020 unless earlier revoked.

Dated 9 June 2020

KYM PEAKE  
Secretary to the Department of Health and Human Services

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