Naloxone: A look at dispensing versus distribution in North Carolina

	DISPENSING to INDIVIDUALS	DISPENSING to ORGANIZATIONS	DISTRIBUTION by ORGANIZATIONS
Who can perform:	 Pharmacists Local health department nurses trained to dispense Dispensing physicians Dispensing nurse practitioners & physician assistants* 	• Pharmacists	 An agent of a governmental or nongovernmental organization, including a local health department, a law enforcement agency, or an organization that promotes scientifically proven ways of mitigating health risks associated with substance use disorders and other high-risk behaviors
Where it takes place:	PharmaciesLocal health department clinicsDispensing physician offices	• Pharmacies	Anywhere
What order is needed:	 State Health Director's standing order OR Individual prescription OR Local standing order 	 State Health Director's standing order if organization's agents will administer OR Local standing order allowing distribution 	Local standing order signed by a physician, nurse practitioner or physician assistant* for distribution
Education to be provided:	 As with any prescription, counseling pursuant to 21 NCAC 46 .2504 is required. Basic instruction and information on how to administer naloxone is recommended generally and is required by the State Health Director's standing order. 	 As with any prescription, counseling pursuant to 21 NCAC 46 .2504 is required. Basic instruction and information on how to administer naloxone is recommended generally and is required by the State Health Director's standing order. 	Basic instruction and information on how to administer the opioid antagonist as required by NCGS 90- 12.7(c1)

^{*}A nurse practitioner or physician assistant may dispense naloxone or issue a standing order so long as the issuance of such are included and consistent with the nurse practitioner's collaborative practice agreement or the physician assistant's supervisory arrangements.

- What is dispensing?
 - o In the case of naloxone, dispensing means preparing and packaging the drug in a container and labeling the container with information required by State and federal law; filling or refilling drug containers with naloxone for subsequent use by a patient; and/or providing naloxone for subsequent administration.
- What is distribution?
 - o In the case of naloxone, distribution occurs when an agent of a governmental or nongovernmental organization provides naloxone and basic instruction and information on how to administer it to a person at risk of experiencing an opiate-related overdose or a family member, friend, or other person in a position to assist a person at risk of experiencing an opiate-related overdose.
 - Although naloxone is a prescription medication, its distribution is permitted under NC General Statute § 90-12.7 https://www.ncleg.net/EnactedLegislation/Statutes/PDF/BySection/Chapter 90/GS 90-12.7.pdf
- What are key differences in dispensing and distribution of naloxone?

Dispensing	Distribution	
 Requires an individual patient prescription or meeting the criteria of the statewide standing order or a local standing order Is performed by a licensed healthcare professional (as listed in chart) Generally involves payment via insurance, insurance co-pay or cash, but not required 	 No specific patient order is required, although the organization needs a distribution standing order Is performed by an agent of the organization covered under the distribution order, who need not be a licensed healthcare professional Generally involves no payment 	

- There are two different types of standing orders: dispensing standing orders and distribution standing orders. A dispensing standing order allows a dispensing healthcare professional (such as a pharmacist) to dispense naloxone to an individual or an organization. A distribution standing order allows an organization to distribute (i.e., give out) naloxone that has been already dispensed to that organization. Templates found at https://publichealth.nc.gov/lhd/ under Pharmacy.
- The following two scenarios help demonstrate which type of standing order is needed depending on the circumstances:
 - o Frances Community Outreach Group (FCOG) or Frances County Health and Human Services (FCHHS) wants to distribute naloxone at events. To do so, the following standing orders are needed:
 - A local dispensing standing order to enable a pharmacy to dispense naloxone to FCOG or FCHHS.
 [NOTE: The State Health Director's standing order allows dispensing to people who plan to keep the naloxone for their own use. It does not allow dispensing to an "intermediary" that will go out and distribute the naloxone to others. For this reason, a local dispensing standing order specific to the organization receiving the naloxone is needed when the organization intends to distribute the naloxone.]

 AND
 - A local distribution standing order to enable FCOG or FCHHS to distribute naloxone to community members.
 - Frances County Police Department (FCPD) wants to equip officers with naloxone in case they need to administer it to a fellow officer or to a community member. To do so, it needs the following order in place:
 - State Health Director's standing order OR a local dispensing standing order to enable a pharmacy to dispense naloxone to FCPD.
 [NOTE: The State Health Director's standing order may be used to dispense to organizations whose members will use the naloxone themselves.]
 - Since FCPD does not plan to distribute naloxone in the community, it does not need a distribution standing order.
- Who can sign a local dispensing standing order or a local distribution standing order?
 Under NCGS 90-12.7, a "practitioner acting in good faith and exercising reasonable care" may sign a dispensing standing order or a distribution standing order. Such practitioners are held immune from civil or criminal liability connected with their signing the standing order.