Queensland

Health Act 1937

Health (Drugs and Poisons) Regulation 1996

Reprinted as in force on 28 January 2011

Reprint No. 10D

This reprint is prepared by
the Office of the Queensland Parliamentary Counsel

Information about this reprint

This regulation is reprinted as at 28 January 2011. The reprint—

- shows the law as amended by all amendments that commenced on or before that day (Reprints Act 1992 s 5(c))
- incorporates all necessary consequential amendments, whether of punctuation, numbering or another kind (Reprints Act 1992 s 5(d)).

The reprint includes a reference to the law by which each amendment was made—see list of legislation and list of annotations in endnotes. Also see list of legislation for any uncommenced amendments.

This page is specific to this reprint. See previous reprints for information about earlier changes made under the Reprints Act 1992. A table of reprints is included in the endnotes.

Also see endnotes for information about—

- **when provisions commenced**
- **editorial changes made in earlier reprints.**

Spelling

The spelling of certain words or phrases may be inconsistent in this reprint or with other reprints because of changes made in various editions of the Macquarie Dictionary (for example, in the dictionary, 'lodgement' has replaced 'lodgment'). Variations of spelling will be updated in the next authorised reprint.

Dates shown on reprints

Reprints dated at last amendment All reprints produced on or after 1 July 2002, authorised (that is, hard copy) and unauthorised (that is, electronic), are dated as at the last date of amendment. Previously reprints were dated as at the date of publication. If an authorised reprint is dated earlier than an unauthorised version published before 1 July 2002, it means the legislation was not further amended and the reprint date is the commencement of the last amendment.

If the date of an authorised reprint is the same as the date shown for an unauthorised version previously published, it merely means that the unauthorised version was published before the authorised version. Also, any revised edition of the previously published unauthorised version will have the same date as that version.

Replacement reprint date If the date of an authorised reprint is the same as the date shown on another authorised reprint it means that one is the replacement of the other.

Queensland

Health (Drugs and Poisons) Regulation 1996

Contents

Contents

Endnotes

Health (Drugs and Poisons) Regulation 1996

[as amended by all amendments that commenced on or before 28 January 2011]

Chapter 1 Introduction

Part 1 Preliminary

1 Short title

This regulation may be cited as the *Health (Drugs and Poisons) Regulation 1996*.

Part 2 Interpretation

3 Dictionary

(1) The dictionary in appendix 9 of this regulation defines particular words used in this regulation.

(2) Definitions found elsewhere in this regulation are signposted in the dictionary.

4 Meaning of *manufacture*

(1) ***Manufacture***, of a controlled drug, restricted drug or a poison, means—

(a) perform a process to produce the drug or poison; or

Example—

mix 2 substances that are not a controlled drug, restricted drug or a poison to produce a controlled drug, restricted drug or a poison

(b) refine the drug or poison; or

(c) convert the drug or poison into another controlled or restricted drug or another poison; or

(d) make or prepare an ampoule, capsule, tablet, vial or other similar article that is or contains the drug or poison; or

(e) mix or compound the drug or poison with another controlled or restricted drug, poison or substance; or

(f) pack or repack the drug or poison.

(2) However, ***manufacture*** of a controlled or restricted drug or a poison does not include an act mentioned in subsection (1)(d), (e) or (f) done by a dispenser in relation to or for dispensing the drug or poison.

(3) In addition, ***manufacture***, of a poison, does not include an act mentioned in subsection (1)(e) done—

(a) by a primary producer for use only by the person on the person's property, other than the act of self-administering the poison or administering the poison to another person; or

(b) by a pest management technician under a licence under the *Pest Management Act 2001*.

(4) Also, a registered nurse or indigenous health worker does not ***manufacture*** a controlled or restricted drug or a poison only by packing or repacking it under a certified written policy, about packing or repacking controlled or restricted drugs or poisons, published by the department.

4A Quality standards for dispensing certain drugs and selling certain poisons

(1) A ***quality standard***, for dispensing controlled drugs, dispensing restricted drugs or selling S2 or S3 poisons (each an ***activity***), is a document that states, for the activity—

(a) the standard for carrying out the activity; and

(b) how the standard is met.

(2) A pharmacist may, for an activity—

(a) prepare a quality standard; or

(b) adopt a quality standard prepared by another entity.

(3) If the Pharmacy Board of Australia recognises a quality standard (a ***PBA standard***) for an activity, the quality standard prepared or adopted by a pharmacist, for the activity, must be at least equivalent to the PBA standard for the activity.

(4) A quality standard must be consistent with the following principles—

(a) in selecting a way to manage a person's condition, a pharmacist should consider appropriate options, including, for example, medicinal and non-medicinal options;

(b) for a medicinal option, the pharmacist should choose the medicine the pharmacist considers is the most appropriate having regard to relevant matters, including, for example, potential risks and benefits of using the medicine;

(c) a medicine should be used in a way that—

(i) maximises the efficacy of the medicine; and

(ii) minimises misuse of the medicine.

(5) In this section—

Pharmacy Board of Australia means the Pharmacy Board of Australia established under the Health Practitioner Regulation National Law.

5 Meaning of *S2* to *S9*

(1) The expression ***S2***, ***S3***, ***S4***, ***S5***, ***S6***, ***S7***, ***S8*** or ***S9***, if followed by a controlled drug, restricted drug or a poison, means the drug or poison in the schedule to the standard with the number given in the expression.

(2) The expression ***S2***, ***S3***, ***S4***, ***S5***, ***S6***, ***S7***, ***S8*** or ***S9***, if followed by 'poison' or 'substance' without naming a poison or substance, means any poison in the schedule to the standard with the number given in the expression.

5A Meaning of *supervision* and *personal supervision*

(1) ***Supervision***, by a person of another person, includes supervision using any technology that allows reasonably contemporaneous and continuous communication between the persons.

(2) ***Personal supervision***, by a person (the ***supervisor***) of another person, includes supervision using any technology that allows reasonably contemporaneous and continuous communication between the persons, and allows reasonably contemporaneous and continuous observation by the supervisor of actions taken by the other person.

Example—

videoconferencing

6 Meaning of *transaction*

Transaction means an event by which—

(a) a controlled drug, restricted drug or a poison comes into or goes out of a person's possession; or

(b) the composition, form or strength of, or way of packing, a controlled or restricted drug or a poison is changed.

Examples of transactions—

- obtaining and keeping samples of chemical starting materials used in manufacturing a controlled or restricted drug or a poison

- obtaining and keeping samples of finished products of a manufactured controlled or restricted drug or a poison
- manufacturing, packing and repacking a controlled or restricted drug or a poison
- moving a controlled or restricted drug or a poison from one place to another (with or without a change of ownership)

7 Application of interpretation provisions in standard to regulation

(1) A word used in this regulation that is defined in the standard has the same meaning in this regulation as it does in the standard.

(2) An interpretation provision in the standard applies in the interpretation of this regulation.

(3) However, subsection (1) does not apply to the definition *poison* in the standard because, as defined in the standard, *poison* includes all substances to which this regulation applies, whether the substance is a controlled drug, restricted drug or poison under this regulation.

(4) Despite the fact that the definition *poison* in this regulation does not have the same meaning as it has in the standard, the interpretation provisions in the standard that apply to the definition *poison* apply to controlled drugs, restricted drugs and poisons as defined in this regulation.

Example of subsection (4)—

Paragraph 1(2) of the standard states that, unless a contrary intention appears, a reference to a poison in a schedule includes a number of other things, including, for example, every salt, active principle or derivative of the poison and every salt of such an active principle or derivative.

Also, paragraph 1(2)(g), (h) and (i) provides that a reference in a schedule to a poison does not include certain poisons, including, for example, a poison in a product in appendix A of the standard.

8 References to entering details, signing or dating entries etc.

(1) This section applies if a person is required to—

(a) enter details in a document, including writing a prescription; or

(b) sign or date an entry; or

(c) otherwise write on a document.

(2) The person must write—

(a) in ink; and

(b) in a way that the entry or other matter is legible, except the person's signature.

Maximum penalty—20 penalty units.

(3) This section does not apply to a person when the person uses a computer to keep records or make an electronic prescription.

Part 3 Application of regulation to certain substances

9 Provisions not applied to morphine or opium in certain preparations

The provisions mentioned in appendix 1 of this regulation do not apply to—

(a) morphine in a compounded preparation containing 0.1% or less of morphine calculated as anhydrous morphine; or

(b) opium in a compounded preparation containing 0.1% or less of morphine calculated as anhydrous morphine.

9A Classification of new drugs and poisons

(1) This section applies to a drug or poison for human or animal therapeutic use (a ***new drug or poison***) if—

(a) the drug or poison becomes available for sale in the State before a decision is made about whether it is to be included in a schedule to the standard; and

(b) the chief executive reasonably believes it will be listed in schedule 4 or schedule 8 of the standard.

(2) The new drug or poison is taken to be a restricted drug until—

(a) the new drug or poison is included in a schedule to the standard; or

(b) the Secretary to the Department in which the *Therapeutic Goods Act 1989* (Cwlth) is administered, or the Secretary's delegate, decides the new drug or poison is not to be included in a schedule.

9B Reclassifications of poisons

(1) This section applies to a poison if—

(a) any of the following about the poison is varied—

(i) the method of manufacture;

(ii) the composition;

(iii) the dosage;

(iv) how the poison may be administered;

(v) the purposes for which the poison may be used; and

(b) a decision has not been made since the variation about in which schedule to the standard the poison is to be included.

(2) The poison is taken to be a restricted drug until a decision is made about in which schedule to the standard the poison is to be included and the poison is included in the schedule.

Part 4 Packing and labelling

10 Packaging of controlled or restricted drugs or poisons

(1) A person must not sell a controlled drug, restricted drug or a poison, unless the way it is packed complies with part 2 of the standard.

Maximum penalty—20 penalty units.

Editor's note—

part 2 (Labels and containers) of the standard

(2) However, subsection (1) does not apply to a person if the controlled or restricted drug or poison is packed in a way certified under this section.

(3) The chief executive may certify a container for packing a controlled or restricted drug or a poison only if—

(a) it does not comply with the standard because—

(i) it is uncoloured; or

(ii) its shape or dimensions differ from a shape or dimension permitted under the standard; or

(iii) it is designed for a particular purpose; and

(b) the chief executive is reasonably satisfied using the container as a package for a controlled or restricted drug or a poison is as safe as using a container permitted under the standard.

11 Labelling of controlled or restricted drugs or poisons—Act, s 131I

A package containing a controlled drug, restricted drug or a poison must bear a label that complies with part 2 of the standard.

12 Certain containers not to be used

(1) A person must not sell any of the following in a container of a kind mentioned in paragraph 21, 22 or 23 of the standard or a container that is a certified container under section 10(3) of this regulation—

(a) a drug for internal human use;

(b) a medicine for internal human use;

(c) a poison for internal human use;

(d) food;

(e) a drink;

(f) a condiment.

Maximum penalty—60 penalty units.

Editor's note—

See paragraphs 21 and 22 (Containers for poisons other than Schedule 5 poisons) and paragraph 23 (Containers for Schedule 5 poisons) of the standard.

(2) A person must not use an immediate container permanently marked with the name of a controlled or restricted drug or a poison as a container for a different drug or poison.

Maximum penalty—60 penalty units.

Editor's note—

Part 1 of the standard—

Immediate container includes all forms of containers in which a poison is directly packed but does not include any such container intended for consumption or any immediate wrapper.

13 Camphor and naphthalene

A person must not sell camphor or naphthalene in ball, block, disc or pellet form for domestic use, unless it is in a device that, in normal use, prevents removal or ingestion of the camphor or naphthalene.

Maximum penalty—60 penalty units.

Part 5 Endorsements

Division 1 Preliminary

15 Suitability of person to hold endorsement

(1) In deciding whether a person is a suitable person to hold, or to continue to hold, an endorsement the chief executive may have regard to, and may make inquiries about, the following—

(a) the person's knowledge and understanding of the person's obligations under this regulation;

(b) the person's qualifications and experience;

(c) the person's character and standing;

(d) any previous convictions the person has under the Act or this regulation;

Example of paragraph (c)—

The chief executive's inquiries about an applicant's suitability may include asking the commissioner of the police service for a written report about the applicant's criminal history.

(e) whether the person engages, or has engaged, in conduct that risks, or is likely to risk, a controlled drug, a restricted drug or a poison being used for a purpose that is unlawful under a law of a State or the Commonwealth.

(2) Subsection (1) does not limit the matter to which the chief executive may have regard in considering the suitability of the person to hold an endorsement.

(3) In this section—

this regulation includes the *Poisons Regulation 1973*.

16 Inquiries about person's criminal history

(1) If asked by the chief executive, the commissioner of the police service must give the chief executive a written report about the criminal history of a person who has applied for, or holds, an endorsement.

(2) Subsection (1) applies to the criminal history in the commissioner's possession or to which the commissioner has access.

Division 2 Applications for endorsements

17 Applications—form and fee

An application for an endorsement, or the renewal of a drug licence, poison licence, treatment approval or wholesale representative licence, must—

(a) be in the approved form (if any); and

(b) be accompanied by the appropriate fee (if any) in appendix 2 of this regulation.

Editor's note—

See section 15A (Approval of forms) of the Act.

18 How chief executive may deal with applications

(1) The chief executive must consider an application for an endorsement and either—

(a) grant the endorsement, with or without conditions; or

(b) refuse to grant the endorsement.

(2) Also, the chief executive must consider an application for the renewal of a drug licence, poison licence, treatment approval or wholesale representative licence and either—

(a) renew the licence or approval, with or without conditions; or

(b) refuse to renew the licence or approval.

(3) If the chief executive decides to grant the endorsement or renew an endorsement that is a drug licence, poison licence, treatment approval or wholesale representative licence, the chief executive must promptly give the applicant the relevant endorsement.

(4) If the chief executive decides to state a condition on the endorsement, the chief executive must also give the applicant—

(a) if the endorsement is an endorsement other than a treatment approval, a QCAT information notice about the decision to state the condition on the endorsement; or

(b) if the endorsement is a treatment approval, a notice stating the following—

(i) the decision;

(ii) that the applicant may apply to the chief executive for a statement of reasons for the decision under the QCAT Act, section 158, within the period stated in that provision;

(iii) the person has a right to have the decision reviewed by QCAT;

(iv) how, and the period within which, the person may apply for the review;

(v) the right the person has to have the operation of the decision stayed under the QCAT Act, section 22.

(5) However, if the treatment approval is subject to a condition relating to the treatment of a drug dependent person to ensure the treatment under the approval continues to be for the welfare of the person, including, for example, 1 or more of the following conditions, the applicant may not apply for review of the imposition of the condition—

(a) the way in which the controlled or restricted drug is to be dispensed or prescribed for, or administered or supplied to or for, the drug dependent person;

(b) the applicant must, at stated times, examine the drug dependent person or conduct tests in relation to the drug dependent person—

(i) to ensure the controlled or restricted drug is being used in the way the applicant has directed; or

(ii) for the use or presence of other drugs or poisons.

(6) If the chief executive decides not to grant the endorsement or renew the drug licence, poison licence, treatment approval or wholesale representative licence, the chief executive must promptly give the applicant a QCAT information notice about the decision.

19 Renewal of drug licence, poison licence, treatment approval or wholesale representative licence before expiry

(1) The chief executive may renew a drug licence, poison licence, treatment approval or wholesale representative licence on application made to the chief executive before the licence or approval expires (the ***expiry day***).

(2) However, the chief executive must not renew a general poison licence if, on the expiry day, there is a pharmacy within 25km by road of the licensee's business premises.

(3) Despite subsection (2), if, during the term of a general poison licence, a pharmacy opens within 25km by road of the licensee's business premises, the chief executive may renew the licence for up to 6 months to allow the licensee to sell stock on hand.

(4) No fee is payable for a renewal under subsection (3).

Editor's note—

For general poison licences, see chapter 4 (Poisons).

20 Renewal of drug licence, poison licence, treatment approval or wholesale representative licence after expiry

(1) This section applies if—

(a) not less than 14 days before the expiry day, the holder of a drug licence, poison licence, treatment approval or wholesale representative licence applies for a renewal of the licence or approval; and

(b) the chief executive has not, before the expiry day, made a decision whether to renew the licence or approval.

(2) The licence or approval continues until the day the applicant receives notice of the decision.

(3) If the chief executive decides to renew the licence or approval, the renewed licence or approval is taken to have been renewed on the expiry day.

Division 2A Applications for operating approvals

20A Purpose of division

This division states the requirements, in addition to the requirements in division 2, that apply to an application for an operating approval.

20B Who may apply for an operating approval

A person may apply for an operating approval only if the person is a pharmacist who is authorised, under section 64(1)(f), to administer or supply a controlled drug, under a drug therapy protocol, on the instruction of a doctor.

20C Additional requirements for applications for operating approvals

(1) A person who applies for an operating approval must publish a notice about the application in a newspaper circulating generally in the area in which it is proposed to operate a controlled drugs administration facility.

(2) The notice must—

(a) invite members of the local community to make written submissions to the applicant about the establishment and operation of the facility; and

(b) state a period of at least 28 days after the notice is published in which submissions under paragraph (a) must be made.

(3) An application for an operating approval must include—

(a) a copy of the notice published under subsection (1); and

(b) copies of any submissions made to the applicant by members of the local community, in response to the notice; and

(c) a statement made by the applicant about the views of members of the local community in relation to the likely impact of the facility on the amenity of the community.

20D Chief executive may require further information or documents

(1) If the chief executive considers further information or a document is required for deciding an application for an operating approval, the chief executive may—

(a) by written notice given to the applicant, require the applicant to give the information or document to the chief executive within a reasonable period, of at least 21 days, stated in the notice; or

(b) ask another person to give the information or document to the chief executive.

(2) Despite subsection (1)(a), the chief executive and the applicant may, within the period stated in the notice, agree to extend the period for complying with a requirement in the notice to a day (the ***agreed compliance day***) after the end of the period stated in the notice.

(3) If the applicant is given a notice under subsection (1)(a) and does not comply with a requirement under the notice within the period stated in the notice, or if applicable by the agreed compliance day, the applicant is taken to have withdrawn the application.

20E Deciding applications for operating approvals

(1) The chief executive must not grant an operating approval for a controlled drugs administration facility proposed for an area unless the chief executive is satisfied it is appropriate for the facility to be in the area.

(2) In deciding whether it is appropriate, the chief executive may only consider—

(a) the need for the facility in the area, taking into account the type and availability of health services in and near the area; and

(b) the likely impact of the facility on the amenity of the local community, taking into account the views of members of the community.

20F Time for deciding applications for operating approvals

(1) The chief executive must decide an application for an operating approval within 30 days after the application is made (the ***decision period***).

(2) However, if the chief executive has given the applicant a notice under section 20D(1)(a), the chief executive may extend the time for deciding the application—

(a) for up to 30 days after the chief executive receives the information or document required under the notice (the ***extended decision period***); or

(b) if the chief executive and the applicant agree—for a reasonable period after the period mentioned in paragraph (a) (the ***agreed extended decision period***).

(3) Also, if the chief executive has asked a person for information or a document under section 20D(1)(b), the chief executive may extend the time for deciding the application—

(a) for up to 60 days after the chief executive receives the application (also the ***extended decision period***); or

(b) if the chief executive and the applicant agree—for a reasonable period after the period mentioned in paragraph (a) (also the ***agreed extended decision period***).

(4) The chief executive must give the applicant a written notice about the extended decision period, or the agreed extended period, for a decision.

(5) If the chief executive fails to decide the application within the decision period, or if applicable, the latest extended decision period or agreed extended decision period, the failure is taken to be a decision by the chief executive to refuse to grant the operating approval.

Division 3 Other provisions about endorsements

21 Holder of endorsement must comply with conditions

The holder of an endorsement must not contravene a condition of the endorsement.

Maximum penalty—80 penalty units.

22 Term of drug licence, poison licence or wholesale representative licence

A drug licence, poison licence or wholesale representative licence has effect for 1 year from the day stated in the licence.

Division 4 Suspension or cancellation of endorsement

23 Grounds for suspension or cancellation of endorsement

Each of the following is a ground for the suspension or cancellation of an endorsement—

(a) the endorsement has been obtained on the basis of incorrect or misleading information;

(b) the holder of the endorsement is not a suitable person to hold the endorsement;

(c) if the endorsement is granted by the chief executive and states premises for the conduct of business under the endorsement—the premises are unfit for use under the endorsement;

(d) the holder of the endorsement has breached a condition stated in the endorsement;

(e) the holder of the endorsement has contravened a provision of this regulation;

(f) if the endorsement is an operating approval—the authority of the holder of the endorsement under section 64(1)(f) is suspended, cancelled or otherwise ceases.

24 Procedure for suspension or cancellation of endorsement

(1) If the chief executive considers there is a ground to suspend or cancel an endorsement (the ***proposed action***), the chief

executive may give the holder of the endorsement (the ***endorsement holder***) a written notice that—

(a) states the proposed action; and

(b) states the grounds for the proposed action; and

(c) outlines the facts and circumstances forming the basis for the grounds; and

(d) if the proposed action is suspension of the endorsement—states the proposed suspension period; and

(e) invites the endorsement holder to show, in writing and within a stated time of at least 28 days, why the proposed action should not be taken.

(2) The notice must state whether the proposed action relates to—

(a) all controlled drugs, restricted drugs, poisons or activities permitted under the endorsement; or

(b) a stated controlled drug, restricted drug or poison or a stated activity permitted under the endorsement.

(3) If, after considering all written representations made within the stated time, the chief executive still considers there is a ground to take the proposed action, the chief executive may—

(a) if the proposed action was to suspend the endorsement for all controlled drugs, restricted drugs, poisons or activities permitted under the endorsement for a stated period—suspend the endorsement, for not longer than the proposed suspension period, for—

(i) all controlled drugs, restricted drugs, poisons or activities permitted under the endorsement; or

(ii) a stated controlled drug, restricted drug or poison or a stated activity; or

(b) if the proposed action was to suspend the endorsement for a stated controlled drug, restricted drug or poison or a stated activity for a stated period—suspend the endorsement for the controlled drug, restricted drug,

poison or activity for not longer than the proposed suspension period; or

(c) if the proposed action was to cancel the endorsement—

(i) for a stated controlled drug, restricted drug or poison or a stated activity—either cancel the endorsement, or suspend it for a stated period, for the controlled drug, restricted drug, poison or activity; or

(ii) if subparagraph (i) does not apply—either cancel the endorsement or suspend it for a stated period.

(4) Within 10 days after the chief executive makes the decision, the chief executive must give written notice of the decision to the endorsement holder.

(5) If the chief executive decides to suspend or cancel the endorsement, the notice must—

(a) be a QCAT information notice for the decision; and

(b) state the day before which the endorsement holder is not permitted to apply to the chief executive under section 26A.

(5A) The day mentioned in subsection (5)(b) must be a day the chief executive believes is reasonable having regard to the grounds for the suspension or cancellation.

(6) The decision takes effect on the later of—

(a) the day the notice is given to the endorsement holder; or

(b) the day of effect stated in the notice.

(7) However, if the endorsement is suspended or cancelled because of a conviction—

(a) the suspension or cancellation does not take effect until—

(i) the end of the time to appeal against the conviction; or

(ii) if an appeal is made against the conviction—the appeal is finally decided; and

(b) the suspension or cancellation has no effect if the conviction is quashed.

25 Urgent suspension or cancellation of endorsement

(1) This section applies if the chief executive is reasonably satisfied—

(a) urgent action about a particular endorsement is necessary in the circumstances; and

(b) undue delay in suspending or cancelling the endorsement may cause harm to the public.

(2) The chief executive may suspend or cancel the endorsement even though the chief executive has not given notice to the endorsement holder under section 30.

(3) However, the chief executive must immediately give written notice of the decision to the endorsement holder.

(4) The notice must—

(a) be a QCAT information notice for the decision; and

(b) state the day before which the endorsement holder is not permitted to apply to the chief executive under section 26A.

(4A) The day mentioned in subsection (4)(b) must be a day the chief executive believes is reasonable having regard to the grounds for the suspension or cancellation.

(5) The notice must also state whether the urgent suspension or cancellation relates to—

(a) all controlled drugs, restricted drugs, poisons, business premises or activities permitted under the endorsement; or

(b) a stated controlled drug, restricted drug or poison, stated business premises or a stated activity permitted under the endorsement.

(6) The decision takes effect on the later of—

(a) the day the notice is given to the endorsement holder; or

(b) the day of effect stated in the notice.

25A Urgent cancellation of certain approvals

(1) This section applies to each of the following approvals (a ***specified approval***)—

(a) an approval mentioned in section 78(1)(a) for the treatment of a person by a doctor;

(b) an approval under section 122, other than an approval for the treatment of a class of drug dependent persons;

(c) an approval under section 213, other than an approval for the treatment of a class of drug dependent persons.

(2) The chief executive may cancel a specified approval if the chief executive is reasonably satisfied—

(a) the holder of the specified approval (the ***former approval holder***) has ceased to treat the person to whom the approval relates; and

(b) it is reasonably necessary, for the welfare of the person, for the chief executive to urgently give a specified approval to a doctor other than the former approval holder.

(3) The chief executive must immediately give written notice of the decision to the former approval holder.

(4) The notice must be a QCAT information notice for the decision.

(5) The decision takes effect on the later of—

(a) the day the notice is given to the former approval holder; or

(b) the day of effect stated in the notice.

(6) For subsection (2)(a), the chief executive may be reasonably satisfied a former approval holder has ceased to treat a person regardless of—

(a) the reason the treatment ceased; or

(b) when the former approval holder last treated the person.

26 Return of endorsement

(1) The holder of a suspended endorsement, or the former holder of a cancelled endorsement, must return the endorsement to the chief executive within 14 days after the suspension or cancellation takes effect, unless the person has a reasonable excuse for not returning it within the 14 days.

Maximum penalty—20 penalty units.

(2) If a suspended endorsement is returned to the chief executive, the chief executive must return it to the endorsement holder at the end of the suspension period.

26A Application for amendment or repeal of decision to suspend or cancel endorsement

(1) The holder of an endorsement that is suspended or cancelled may apply to the chief executive in writing for an amendment or repeal of the decision to suspend or cancel the endorsement.

(2) This part applies to an application made under subsection (1) in the same way as it would if it were an application for an endorsement.

Division 5 Replacement, amendment, return and surrender of endorsements

27 Replacement of endorsement

(1) The holder of an endorsement may apply to the chief executive for the replacement of a lost, stolen or destroyed endorsement.

(2) If the chief executive is reasonably satisfied the endorsement has been lost, stolen or destroyed, the chief executive must replace the endorsement.

(3) If the chief executive is not satisfied the endorsement has been lost, stolen or destroyed, the chief executive must—

(a) refuse to replace the endorsement; and

(b) give the applicant a QCAT information notice about the decision to refuse to replace the endorsement.

28 Amendment of endorsement on application

(1) The holder of an endorsement may apply to the chief executive for an amendment of the endorsement.

(2) The chief executive must decide the application by—

(a) amending the endorsement in the way sought; or

(b) refusing to amend the endorsement.

(3) The chief executive may amend the endorsement only if the chief executive is reasonably satisfied the amendment is necessary or desirable in the interests of the effective administration of this regulation.

(4) If the chief executive refuses to amend the endorsement, the chief executive must give the applicant a QCAT information notice about the decision to refuse to amend the endorsement.

29 Amendment of endorsement without application

(1) The chief executive may amend an endorsement if—

(a) the holder of the endorsement agrees to the amendment; or

(b) the chief executive is reasonably satisfied the endorsement should be amended.

(2) If the chief executive is reasonably satisfied the endorsement should be amended, the chief executive must give the endorsement holder a written notice that—

(a) states the proposed amendment and the reasons for the amendment; and

(b) outlines the facts and circumstances that form the basis for the reasons; and

(c) invites the endorsement holder to make written representations to the chief executive, within a stated time of at least 28 days, to show why the endorsement should not be amended.

(3) If, after considering the representations properly made by the endorsement holder, the chief executive is still reasonably satisfied the endorsement should be amended in the way mentioned in the notice, or in another way having regard to the representations, the chief executive must give the endorsement holder—

(a) a new endorsement; and

(b) a written notice that states—

(i) the old endorsement has been cancelled; and

(ii) the way in which the new endorsement is different from the old endorsement; and

(iii) the reasons for the amendment; and

(iv) the endorsement holder has a right to have the decision reviewed by QCAT; and

(v) how, and the period within which, the person may apply for the review; and

(vi) the right the endorsement holder has to a have the operation of the decision stayed under the QCAT Act, section 22.

30 Minor amendment of endorsement

(1) This section applies if—

(a) the chief executive is reasonably satisfied an endorsement should be amended; and

(b) the proposed amendment does not adversely affect the endorsement holder's interests, including, for example—

(i) by omitting a condition; or

(ii) by correcting an error; or

(iii) by making another change, other than a change of substance.

(2) The chief executive may amend the endorsement by written notice given to the endorsement holder.

(3) The notice must state the reasons for the decision.

(4) Section 29(2) and (3) do not apply to the amendment.

31 Date amendment of endorsement takes effect

A decision to amend an endorsement under section 28, 29 or 30 takes effect on the later of—

(a) the day the notice of the amendment is given to the endorsement holder; or

(b) the day of effect stated in the notice.

32 Surrender of endorsement

(1) The holder of an endorsement may surrender the endorsement by written notice given to the chief executive.

(2) The endorsement holder must return the endorsement with the notice, unless the endorsement holder has a reasonable excuse.

Maximum penalty—20 penalty units.

(3) The surrender takes effect on the day the notice is given.

(4) Subsection (2) does not apply to an endorsement holder if the endorsement is an authority.

Part 6 External review

33 Decisions that may be reviewed

(1) An applicant for an endorsement may apply, as provided under the QCAT Act, to QCAT for review of the chief executive's decision to refuse to grant the endorsement or to grant an endorsement subject to conditions.

(2) An endorsement holder may apply, as provided under the QCAT Act, to QCAT for review of the following decisions of the chief executive—

(a) a decision to refuse to renew a drug licence, poison licence, treatment approval or wholesale representative licence;

(b) a decision to renew a drug licence, poison licence, treatment approval or wholesale representative licence on new conditions;

(c) a decision to suspend or cancel an endorsement;

(d) a decision to refuse to amend an endorsement;

(e) a decision to amend an endorsement without application, including a decision to make a minor amendment.

Chapter 2 Controlled drugs

Part 1 Licences

Division 1 Preliminary

40 Application of pt 1

This part applies to the following types of licences—

(a) controlled drug manufacturer licences;

(b) controlled drug wholesaler licences.

41 Licence to state business premises and other particulars

(1) A licence under this chapter applies only to the place stated in the licence as the licensee's business premises.

(2) The chief executive must not state more than 1 place in the licence as the licensee's business premises.

(3) For a controlled drug manufacturer licence, the chief executive must also state in the licence—

(a) the controlled drug or drugs the licensee may manufacture under the licence at the premises; and

(b) the title of the position that has responsibility for supervising the manufacture of the controlled drug or drugs at the premises.

(4) For a controlled drug wholesaler licence, the chief executive may state in the licence the controlled drug or drugs the licensee is authorised to sell under the licence.

Division 2 Controlled drug manufacturer licence

42 Restrictions on grant of controlled drug manufacturer licence

The chief executive may grant a controlled drug manufacturer licence to a person only if the chief executive is reasonably satisfied—

(a) the person—

(i) intends to carry on business as a controlled drug manufacturer; and

(ii) is a suitable person to manufacture and sell controlled drugs; and

(b) an individual who holds the position responsible for supervising the manufacture of the controlled drug or drugs has the qualifications and experience necessary to effectively supervise the manufacture; and

(c) the premises to be used for manufacturing the controlled drug or drugs are suitable for the purpose.

43 Controlled drug manufacturer licence

A controlled drug manufacturer—

(a) may manufacture only the controlled drugs stated in the manufacturer's licence; and

(b) is taken to hold the following licences—

(i) a controlled drug wholesaler licence;

(ii) a restricted drug wholesaler licence;

(ii) a poison wholesaler licence.

44 General conditions that apply to controlled drug manufacturer licence

A controlled drug manufacturer—

(a) must not manufacture, have, keep or sell a controlled drug at a place other than the manufacturer's business premises; and

(b) must ensure each controlled drug manufactured under the manufacturer's licence is manufactured under the personal supervision of the individual who holds the position named in the licence; and

(c) must ensure a controlled drug at the manufacturer's business premises is not handled by a person other than the manufacturer or a competent adult employee of the manufacturer.

Maximum penalty—80 penalty units.

45 Offence to manufacture controlled drugs without licence

A person must not manufacture a controlled drug unless the person—

(a) holds a controlled drug manufacturer licence for the drug; or

(b) manufactures the controlled drug under a licence, permit or other authority under the *Narcotic Drugs Act 1967* (Cwlth); or

(c) is a State analyst, or a trainee State analyst under the supervision of a State analyst, who manufactures the controlled drug for the analyst's, or trainee's, official duties; or

(d) holds an endorsement under section 18(1) to manufacture the controlled drug.

Maximum penalty—80 penalty units.

Division 3 Controlled drug wholesaler licence

46 Restrictions on grant of controlled drug wholesaler licence

The chief executive may grant a controlled drug wholesaler licence to a person only if the chief executive is reasonably satisfied—

(a) the person intends to carry on business as a controlled drug wholesaler; and

(b) the person is a suitable person to sell controlled drugs; and

(c) the premises to be used for wholesaling the controlled drugs are suitable for the purpose.

47 Controlled drug wholesaler licence

(1) A controlled drug wholesaler may sell a controlled drug (whether or not for resale) to—

(a) an authorised person; or

(b) someone in another State who may obtain the drug under the law of the other State.

(2) Also, a controlled drug wholesaler may sell a controlled drug by wholesale to a person in another country who may lawfully obtain the drug in the other country.

(3) Subsection (2) does not apply to a controlled drug that is a prohibited export under the *Customs Act 1901* (Cwlth).

48 General conditions that apply to controlled drug wholesaler licence

(1) A controlled drug wholesaler—

(a) must not have, keep or sell a controlled drug at a place other than the wholesaler's business premises; and

(b) must ensure a controlled drug at the wholesaler's business premises is not handled by a person other than the wholesaler or a competent adult employee of the wholesaler; and

(c) must not sell a controlled drug to anyone other than someone to whom the wholesaler may sell the drug under this regulation.

Maximum penalty—80 penalty units.

(2) Subject to subsection (3), a controlled drug wholesaler must, in carrying on business under the wholesaler's licence, comply with the Australian Code of Good Wholesaling Practice for Therapeutic Goods for Human Use.

Maximum penalty—80 penalty units.

Editor's note—

The code is available from the Therapeutic Goods Administration's website at <www.tga.gov.au>.

(3) Subsection (2) does not apply to a controlled drug wholesaler to the extent the wholesaler carries on business under the wholesaler's licence in a way that does not require the wholesaler to store, handle or transport a controlled drug.

49 Offence to wholesale controlled drugs without licence

A person must not sell a controlled drug by wholesale unless the person—

(a) holds a controlled drug manufacturer licence or controlled drug wholesaler licence for the drug; or

(b) manufactures the controlled drug under a licence, permit or other authority under the *Narcotic Drugs Act 1967* (Cwlth).

Maximum penalty—80 penalty units.

Division 4 General

49A Licensee to give invoice when selling controlled drug

(1) A licensee must, when selling a controlled drug to a person, give the person an invoice for the sale of the drug.

Maximum penalty—40 penalty units.

(2) The licensee must ensure the invoice—

(a) has a unique number; and

(b) states—

(i) the date of the sale; and

(ii) the name and address of the person to whom the controlled drug is sold; and

(c) describes the controlled drug and the quantity or volume of the drug sold.

Maximum penalty—40 penalty units.

50 Records of transactions to be kept by licensee

(1) A licensee must keep a record of controlled drugs (a ***controlled drugs register***)—

(a) as written entries in a book; or

(b) in an electronic form; or

(c) in another certified way.

Maximum penalty—40 penalty units.

(2) If the controlled drugs register is a book, the licensee must ensure each page of the register—

(a) has a general heading describing the class and measurement unit of the controlled drug recorded on the page; and

(b) is ruled into columns with headings describing the nature of the details to be recorded in each column.

Maximum penalty—40 penalty units.

(2A) If the controlled drugs register is in an electronic form, the licensee must ensure the entries in the register are stored in a computer system that has enough capacity and backup capability for the purpose.

Maximum penalty—40 penalty units.

(3) The licensee must—

(a) use a separate page, or a separate part of the drugs register, for each class of controlled drug; and

(b) enter in the register the following details of each transaction for a controlled drug—

(i) the date of the transaction;

(ii) the name and address of the person who sold the controlled drug to the licensee;

(iii) the name and address of the person to whom the controlled drug was sold;

(iv) the invoice or other number of the transaction;

(v) the quantity or volume of the controlled drug obtained or sold;

(vi) the quantity or volume of the controlled drug in stock after the transaction; and

(c) ensure each transaction is recorded in the order in which it happens.

Maximum penalty—40 penalty units.

(4) A licensee must not make entries about a restricted drug or a poison in the controlled drugs register.

Maximum penalty—40 penalty units.

(5) The licensee must keep the controlled drugs register at the licensee's business premises.

Maximum penalty—40 penalty units.

(6) If the licensee has more than 1 licence and the licensee's records are kept on a computer at the licensee's central or main office, the licensee must keep the records for each licence at the relevant business premises.

Maximum penalty—40 penalty units.

50A Discrepancy to be immediately reported to chief executive

(1) This section applies if a licensee—

(a) finds an discrepancy between—

(i) the quantity or volume of a class of controlled drug held by the licensee; and

(ii) the balance shown in the licensee's controlled drugs register for the drug; or

(b) knows, or reasonably suspects, a controlled drug has been lost, misappropriated or stolen.

(2) The licensee must immediately give the chief executive written notice about the discrepancy, loss, misappropriation or theft.

Maximum penalty—40 penalty units.

Part 2 Endorsements

Division 1 Preliminary

51 Endorsement needed for controlled drugs

(1) A person must not have in the person's possession a controlled drug unless the person is, under this regulation, endorsed to possess the drug.

Maximum penalty—80 penalty units.

(2) A person must not obtain a controlled drug unless the person is, under this regulation, endorsed to obtain the drug.

Maximum penalty—80 penalty units.

(3) A person must not dispense, issue, prescribe, purport to prescribe or sell a controlled drug unless the person is, under this regulation, endorsed to dispense, issue, prescribe or sell the drug.

Maximum penalty—80 penalty units.

(4) A person must not administer a controlled drug to someone else unless the person is, under this regulation, endorsed to administer the drug to the other person.

Maximum penalty—80 penalty units.

(5) A person who may, under an endorsement, administer, dispense, issue, obtain, possess, prescribe or sell a controlled drug, or write a written instruction or give an oral instruction for a controlled drug, must not destroy a controlled drug unless the person is endorsed to destroy the drug.

Maximum penalty—80 penalty points.

(6) A person must not write a written instruction or give an oral instruction for a controlled drug unless the person is endorsed to write the written instruction or give the oral instruction.

Maximum penalty—80 penalty points.

(7) Subsection (8) applies to a person who may only administer, destroy, dispense, issue, obtain, possess, prescribe or sell a controlled drug, or write a written instruction or give an oral instruction for a controlled drug, at a stated place or under stated conditions.

(8) The person must not administer, destroy, dispense, issue, obtain, possess, prescribe or sell the drug or write a written instruction or give an oral instruction for the drug at another place or in contravention of the conditions.

Maximum penalty—80 penalty units.

Division 2 Particular authorities

52 Anaesthetic assistants and enrolled nurses

(1) Subsection (2) applies to the following persons—

(a) an anaesthetic assistant holding a qualification acceptable to the Australian and New Zealand College of Anaesthetists;

(b) an enrolled nurse.

(2) The anaesthetic assistant or enrolled nurse is authorised to possess, under the written instruction of a doctor administering anaesthesia, a controlled drug at a hospital when preparing for, and during, anaesthetic procedures.

(3) Subsection (4) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise as an anaesthetic assistant.

(4) To the extent necessary to undergo the course of training, the trainee is authorised to possess a controlled drug, only if the trainee possesses the drug—

(a) at a hospital, when preparing for, or during, an anaesthetic procedure; and

(b) under the written instruction of a doctor administering anaesthesia; and

(c) under the direction and personal supervision of an anaesthetic assistant mentioned in subsection (1)(a).

54 Bases and outposts of Royal Flying Doctor Service

(1) The person in charge of a base of the Royal Flying Doctor Service of Australia is authorised to—

(a) obtain a controlled drug that a doctor employed by the service considers necessary; or

(b) possess a controlled drug obtained under paragraph (a).

(2) The person in charge of an outpost of the Royal Flying Doctor Service of Australia is authorised to—

(a) possess a controlled drug that a doctor employed by the service considers necessary; or

(b) administer or supply a controlled drug at the outpost under a doctor's oral or written instruction.

55 Carriers

To the extent necessary to transport and deliver a controlled drug, the following persons are authorised to possess a controlled drug—

(a) a person engaged to transport and deliver the controlled drug;

(b) an adult acting for a person engaged to transport and deliver the controlled drug.

56 Dentists

(1) To the extent necessary to practise dentistry, a dentist is authorised to—

(a) obtain codeine, morphine, oxycodone, papaveretum, pentazocine or pethidine; or

(b) possess codeine, morphine, oxycodone, papaveretum, pentazocine or pethidine at the place where the dentist practises dentistry; or

(c) administer codeine, morphine, oxycodone, papaveretum, pentazocine or pethidine to a person while treating the person; or

(d) prescribe not more than 3 days supply of codeine or pentazocine for a person's dental treatment; or

(e) give someone who may administer a controlled drug an oral or written instruction to administer codeine, morphine, oxycodone, papaveretum, pentazocine or pethidine at the place where the dentist practises dentistry.

(2) Also, to the extent necessary to practise dentistry, a dentist who has successfully completed a certified course of training relating to the use of fentanyl is authorised to—

(a) obtain fentanyl; or

(b) possess fentanyl at the place where the dentist practises dentistry; or

(c) administer fentanyl to a person while treating the person.

(3) Subsection (4) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise dentistry.

(4) To the extent necessary to undergo the course of training, the trainee is authorised to—

(a) possess codeine, morphine, oxycodone, papaveretum, pentazocine or pethidine under a dentist's direction at the place where the dentist practises dentistry; or

(b) administer codeine, morphine, oxycodone, papaveretum, pentazocine or pethidine, under a dentist's

personal supervision, while the dentist is treating a person.

57 Detention centres

(1) The manager of a detention centre is authorised to—

(a) obtain a controlled drug for use at the detention centre on a purchase order complying with part 5; or

(b) possess a controlled drug at the detention centre; or

(c) issue a controlled drug to an authorised person who may administer or supply it for the treatment of a child detained at the detention centre.

(2) A detention centre's director of nursing or medical superintendent, or the pharmacist in charge of a detention centre's dispensary, is authorised to—

(a) obtain a controlled drug for use at the detention centre on a purchase order complying with part 5; or

(b) possess a controlled drug at the detention centre; or

(c) issue a controlled drug to an authorised person who may administer or supply it for the treatment of a child detained at the detention centre.

58 Doctors

(1) To the extent necessary to practise medicine, a doctor is authorised to—

(a) obtain a controlled drug; or

(b) possess a controlled drug at a place occupied by the doctor; or

(c) if the doctor is reasonably satisfied a person the doctor is treating needs a controlled drug for a therapeutic use as part of the person's medical treatment—

(i) administer the drug to the person; or

(ii) dispense or prescribe the drug to or for the person; or

(iii) supply the drug to or for the person; or

(iv) obtain the drug for the person; or

(d) give someone who may administer or supply a controlled drug an oral or written instruction to administer or supply the drug.

(2) A doctor is authorised to obtain, possess or use a controlled drug, other than a regulated controlled drug, for a genuine research or teaching purpose.

58A Enrolled nurses

(1) To the extent necessary to practise nursing, an enrolled nurse is authorised to—

(a) possess a controlled drug at the place where the enrolled nurse practises nursing; or

(b) administer a controlled drug, other than an anaesthetic—

(i) on the written instruction of a dentist, doctor, nurse practitioner, physician's assistant or surgical podiatrist; and

(ii) under the supervision of a dentist, doctor or registered nurse; or

(c) administer a controlled drug to a person for whom it has been dispensed and under the supervision of a dentist, doctor or registered nurse.

(2) Subsection (1) does not apply if the registration of the enrolled nurse under the Health Practitioner Regulation National Law is subject to a condition that the enrolled nurse is not qualified to administer controlled drugs.

(3) Subsection (4) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise as an enrolled nurse.

(4) To the extent necessary to undergo the course of training, the trainee is authorised to—

(a) possess a controlled drug under the direction of a registered nurse at the place where the registered nurse practises nursing; or

(b) administer a controlled drug, other than an anaesthetic—

(i) on the written instruction of a dentist, doctor, nurse practitioner or physician's assistant; and

(ii) under the personal supervision of a dentist, doctor or registered nurse; or

(c) administer a controlled drug to a person for whom it has been dispensed and under the personal supervision of a dentist, doctor or registered nurse.

58B Hospital pharmaceutical assistants

To the extent necessary to perform the person's pharmaceutical imprest duties in a hospital, a hospital pharmaceutical assistant acting under the supervision of a pharmacist, is authorised to—

(a) possess a controlled drug at the hospital; or

(b) issue a controlled drug to an authorised person for treatment of the hospital's patients.

59 Hospitals

(1) The persons authorised to do an authorised thing at a hospital are—

(a) the medical superintendent of the hospital; and

(b) a doctor nominated by the medical superintendent; and

(c) if there is a pharmacist in charge of the hospital's dispensary—

(i) the pharmacist in charge; and

(ii) a pharmacist nominated in writing by the pharmacist in charge.

(2) Subsection (3) applies if none of the persons mentioned in subsection (1) are present at the hospital.

(3) The director of nursing of the hospital is authorised to do an authorised thing.

(4) If subsection (2) applies and the director of nursing is not present at the hospital, the registered nurse in charge of the hospital is authorised to do an authorised thing.

(5) In this section—***do an authorised thing***, at a hospital, means—

(a) obtain a controlled drug for use at the hospital; or

(b) possess a controlled drug at the hospital; or

(c) issue a controlled drug for treatment of the hospital's patients.

59A Indigenous health workers

An indigenous health worker, while practising in an Aboriginal or Torres Strait Islander community in an isolated practice area in a specified health service district, is authorised—

(a) to obtain and possess a controlled drug; or

(b) to administer a controlled drug, under a drug therapy protocol, on the oral or written instruction of a doctor, nurse practitioner or physician's assistant.

60 Inspectors

To the extent necessary to perform an inspector's official duties, an inspector is authorised—

(a) to obtain a controlled drug; or

(b) to possess a controlled drug; or

(c) in a disaster or emergency situation—to destroy a controlled drug.

61 Manufacturer or wholesaler of controlled drugs

(1) A controlled drug manufacturer is authorised to—

(a) obtain a controlled drug (an ***ingredient drug***) for manufacturing a different controlled drug stated in the manufacturer's licence; or

(b) possess an ingredient drug at the manufacturer's business premises.

(2) A controlled drug wholesaler is authorised to—

(a) obtain a controlled drug; or

(b) possess a controlled drug at the wholesaler's business premises.

(3) An adult employee of a controlled drug manufacturer or wholesaler is authorised to possess a controlled drug at the manufacturer's or wholesaler's business premises if—

(a) the drug is packed in the way required under chapter 1, part 4; and

(b) the employee is acting within the scope of the employment; and

(c) the possession is reasonably necessary for the employee to deliver the drug to an authorised person under a lawful transaction between the employer and the authorised person.

62 Midwives

To the extent necessary to practise midwifery, a midwife is authorised to—

(a) obtain a controlled drug; and

(b) possess a controlled drug at the place where the person practises midwifery; and

(c) administer a controlled drug to the person for whom it has been dispensed under the instructions stated by the dispenser; and

(d) administer or supply a controlled drug—

(i) on the oral or written instruction of a doctor, nurse practitioner or physician's assistant; or

(ii) under a drug therapy protocol.

63 Nursing homes

(1) This section applies to the following persons—

(a) a nursing home's director of nursing or medical superintendent;

(b) the registered nurse in charge of a nursing home;

(c) the pharmacist in charge of a nursing home's dispensary.

(2) A person to whom this section applies is authorised to—

(a) obtain a controlled drug for use at the nursing home on a purchase order complying with part 5; or

(b) possess a controlled drug at the nursing home; or

(c) issue a controlled drug to an authorised person who may administer or supply it for the treatment of a resident of the nursing home.

64 Pharmacists

(1) To the extent necessary to practise pharmacy, a pharmacist is authorised to—

(a) obtain a controlled drug; or

(b) dispense a controlled drug; or

(c) sell a controlled drug (other than by wholesale) on a purchase order; or

(d) possess a controlled drug at a dispensary, an institution or another place at which the pharmacist administers or supplies a controlled drug under paragraph (f); or

(e) for a pharmacist practising pharmacy at a public sector hospital—supply a controlled drug, on the oral or written instruction of a doctor, nurse practitioner or physician's assistant, to a person being discharged from the hospital or an outpatient of the hospital; or

(f) administer or supply a controlled drug, under a drug therapy protocol, on the oral or written instruction of a doctor who holds a treatment approval or an oral approval under section 122(6).

(2) A pharmacist is authorised to obtain, possess or use a controlled drug, other than a regulated controlled drug, for a genuine research or teaching purpose.

(3) A trainee pharmacist is authorised to do, under a pharmacist's direction and personal supervision, anything a pharmacist is authorised to do under subsection (1).

64AA Physician's assistants

To the extent necessary to perform duties under a practice plan developed for a physician's assistant, the physician's assistant acting under the supervision of his or her supervising medical officer is authorised to—

(a) possess a controlled drug at the place where the physician's assistant practices; or

(b) administer, prescribe or supply a controlled drug; or

(c) give someone who may administer or supply a controlled drug an oral or written instruction to administer or supply the drug.

64A Surgical Podiatrists

(1) To the extent necessary to practise podiatry, a surgical podiatrist is authorised to—

(a) prescribe oxycodone (in short-acting form) as an oral preparation; or

(b) give someone, who may administer oxycodone (in short-acting form), a written instruction to administer the drug as an oral preparation.

(2) A surgical podiatrist must not prescribe or give a written instruction to administer more than 10 doses of 5mg each to a person for a relevant condition.

65 Prisons

(1) The general manager of a prison is authorised to—

(a) obtain a controlled drug for use at the prison on a purchase order complying with part 5; or

(b) possess a controlled drug at the prison; or

(c) issue a controlled drug to an authorised person who may administer or supply it for the treatment of a prisoner at the prison.

(2) A prison's director of nursing or medical superintendent, or the pharmacist in charge of a prison's dispensary, is authorised to—

(a) obtain a controlled drug for use at the prison on a purchase order complying with part 5; or

(b) possess a controlled drug at the prison; or

(c) issue a controlled drug to an authorised person who may administer or supply it for the treatment of a prisoner at the prison.

66 Queensland Ambulance Service

(1) To the extent necessary for performing ambulance duties for the Queensland Ambulance Service, an ambulance officer mentioned in appendix 2A, part 1, column 2 is authorised to obtain, possess or administer, under a clinical practice protocol approved by the Queensland Ambulance Service, a controlled drug set out opposite in appendix 2A, part 1, column 1.

(2) However, an ambulance officer who is a paramedic 3 (ECP) may administer a controlled drug to a person only if the officer—

(a) is working in an ECP area; and

(b) is acting on a doctor's oral or written instruction to administer the drug to a person.

(3) An ambulance officer who is undergoing a certified course of training, upon the successful completion of which the officer would be authorised to obtain, possess or administer a controlled drug mentioned in appendix 2A, part 1, column 1, is authorised to administer the controlled drug to a person under the supervision of someone who—

(a) has completed the training; and

(b) is—

(i) acting under a clinical practice protocol approved by the Queensland Ambulance Service; and

(ii) working in an ECP area and acting on a doctor's oral or written instruction if required by subsection (2).

(4) To the extent necessary to perform ambulance duties for the Queensland Ambulance Service, an isolated practice area paramedic at an isolated practice area (paramedics) is authorised to—

(a) obtain a controlled drug; or

(b) possess a controlled drug at a place in the isolated practice area (paramedics); or

(c) administer or supply a controlled drug to a person—

(i) on the oral or written instruction of a doctor, nurse practitioner or physician's assistant; or

(ii) under a drug therapy protocol.

67 Registered nurses

(1) To the extent necessary to practise nursing, a registered nurse is authorised to—

(a) possess a controlled drug at a place where he or she practises nursing; or

(b) administer a controlled drug—

(i) on the oral or written instruction of a dentist, doctor, nurse practitioner or physician's assistant; or

(ii) on the written instruction of a surgical podiatrist; or

(iii) to the person for whom it has been dispensed under the instructions stated by the dispenser.

(2) To the extent necessary to practise nursing in a rural hospital or an isolated practice area, a rural and isolated practice endorsed nurse is authorised to—

(a) obtain a controlled drug; or

(b) supply a controlled drug to a person—

(i) on the oral or written instruction of a doctor, nurse practitioner or physician's assistant; or

(ii) under a drug therapy protocol; or

(c) administer a controlled drug to a person under a drug therapy protocol.

(3) To the extent necessary to practise nursing at a hospital within an isolated practice area, a registered nurse is authorised to supply a controlled drug, on the oral or written instruction of a doctor, nurse practitioner or physician's assistant, to a person being discharged from the hospital or to an outpatient of the hospital.

(4) To the extent necessary to practise nursing, a nurse practitioner is authorised to—

(a) obtain a controlled drug; or

(b) under a drug therapy protocol—

(i) administer or supply a controlled drug; or

(ii) give a registered nurse, midwife or indigenous health worker an oral or written instruction to administer a controlled drug; or

(iii) give a rural and isolated practice endorsed nurse an oral or written instruction to administer or supply a controlled drug; or

(iv) for subsection (3), give a registered nurse an oral or written instruction to supply a controlled drug; or

(v) give a pharmacist an oral or written instruction to supply a controlled drug; or

(vi) give an isolated practice area paramedic an oral or written instruction to administer or supply a controlled drug; or

(vii) prescribe a controlled drug.

68 Certain registered nurses at rural hospitals

(1) To the extent necessary to practise nursing at a rural hospital, the following persons are authorised to supply a controlled drug, on the oral or written instruction of a doctor, nurse practitioner or physician's assistant, to a person being discharged from the hospital or an outpatient of the hospital—

(a) the hospital's director of nursing;

(b) a registered nurse nominated by the hospital's director of nursing.

(2) However, subsection (1) applies only if—

(a) the hospital does not employ a pharmacist; or

(b) if the hospital employs a pharmacist—the pharmacist is absent from the hospital at the time the controlled drug is supplied.

69 Ship's master

(1) The master of a ship in the State is authorised to obtain a controlled drug for use on the ship, or possess a controlled drug on the ship, to the extent necessary to comply with the *Navigation Act 1912* (Cwlth) or the *Transport Operations (Marine Safety) Act 1994*.

(2) Otherwise, the master of a ship in the State is authorised to obtain, possess or administer a controlled drug, only if—

(a) for obtaining a controlled drug—

(i) the purchase order for the drug is signed by a doctor; and

(ii) the drug is obtained for use on the ship; or

(b) for possessing a controlled drug—the drug is possessed for use on the ship; or

(c) for administering a controlled drug—the drug is administered on the ship—

(i) for the treatment of a person in an emergency; and

(ii) on a doctor's oral or written instruction.

70 State analysts

(1) To the extent necessary to perform a State analyst's official duties, a State analyst is authorised to—

(a) obtain or manufacture a controlled drug; or

(b) possess a controlled drug at the place where the analyst is performing official duties; or

(c) use a controlled drug for official purposes or destroy it.

(2) A trainee State analyst under the personal supervision of a State analyst is authorised to—

(a) obtain or manufacture a controlled drug; or

(b) possess a controlled drug at the place where the trainee is performing official duties; or

(c) use a controlled drug for official purposes or destroy it.

70AA State forensic and scientific service facilities

(1) To the extent necessary to perform the person's official duties, the person in charge of a forensic and scientific facility operated by the State is authorised to—

(a) possess a controlled drug; or

(b) destroy a controlled drug.

(2) The person in charge may delegate the authority to an appropriately qualified officer of the department.

(3) In this section—

appropriately qualified, for an officer of the department, includes having the qualifications, experience or standing appropriate to the exercise of the authority.

70A Trainees in certain occupations

(1) This section applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to carry out a relevant occupation.

(2) To the extent necessary to undergo the course of training, the trainee is authorised to—

(a) possess a controlled drug under the direction of an authorised person carrying out the relevant occupation; or

(b) administer a controlled drug under the personal supervision of an authorised person carrying out the relevant occupation.

(3) However, a trainee may only possess or administer a controlled drug under subsection (2), if—

(a) the authorised person is authorised under this regulation to possess or administer the drug; and

(b) the trainee possesses or administers the drug under the conditions (if any) that would apply to the possession or administration of the drug by the authorised person.

(4) In this section—

relevant occupation means an occupation as a doctor, indigenous health worker, midwife, registered nurse, or veterinary surgeon.

71 Veterinary surgeons

(1) To the extent necessary to practise veterinary medicine, a veterinary surgeon is authorised to—

(a) obtain a controlled drug; or

(b) possess a controlled drug at a place occupied by the veterinary surgeon; or

(c) if the veterinary surgeon is reasonably satisfied that an animal the veterinary surgeon is treating needs a controlled drug for a therapeutic use as part of the animal's medical treatment—

(i) administer the drug to the animal; or

(ii) dispense or prescribe the drug for the animal; or

(iii) obtain the drug for the animal; or

(iv) sell a controlled drug to a person for the person's animal.

(2) A veterinary surgeon is authorised to obtain, possess or use a controlled drug, other than a regulated controlled drug, for a genuine research or teaching purpose.

72 Watch house keepers etc.

To the extent necessary for ensuring a person detained at a watch house or police establishment receives a controlled drug lawfully prescribed or supplied for the person as a dispensed medicine, the watch house keeper, or the person performing the duties of watch house keeper at a police establishment, is authorised to—

(a) possess the controlled drug at the watch house or police establishment; or

(b) supply the controlled drug to the person for whom it was prescribed or supplied under the directions stated on the label attached to the medicine's container.

Division 3 General

74 When endorsement is not needed

(1) A person does not need an endorsement under this regulation merely to deliver a controlled drug to a person for whom it has been dispensed, or the person's agent.

(2) A person (a ***carer***) does not need an endorsement under this regulation to help another person (an ***assisted person***) to take a controlled drug that has been supplied for the assisted person as a dispensed medicine, if—

(a) the assisted person asks for the carer's help to take the dispensed medicine; and

(b) the carer helps the assisted person to take the dispensed medicine under the directions on the label attached to the dispensed medicine's container.

(3) A person does not need an endorsement to administer, dispense, issue, manufacture, obtain, possess, prescribe, supply or use a controlled drug for a clinical trial approved by—

(a) the Therapeutic Goods Administration; or

(b) a human research ethics committee registered by the Australian Health Ethics Committee established under the *National Health and Medical Research Council Act 1992* (Cwlth).

Part 3 Regulated controlled drugs

77 Approved drug—dronabinol (*delta*-9-tetrahydrocannabinol)

Subject to section 74(3), a person must not dispense, prescribe, sell or use dronabinol unless the person—

(a) is a doctor, or a member of a class of doctors, approved for the purpose and dispenses, prescribes, sells or uses the drug under the approval; or

(b) is a pharmacist and dispenses dronabinol on the prescription of a doctor who has an approval to prescribe it.

Maximum penalty—80 penalty units.

78 Specified condition drugs—amphetamine, dexamphetamine, methylamphetamine, methylphenidate, phenmetrazine

(1) Subject to section 74(3), a person must not dispense, obtain, prescribe, sell or use a specified condition drug unless the person—

(a) dispenses, obtains, prescribes, sells or uses the specified condition drug under an approval; or

(b) is a doctor and dispenses, obtains or prescribes the specified condition drug for the treatment of—

(i) narcolepsy; or

(ii) brain damage in a child at least 4 years; or

(iii) attention deficit disorder in a child at least 4 years; or

(ba) is a paediatrician or psychiatrist and prescribes the specified condition drug for the treatment of brain damage or attention deficit disorder in a child; or

(c) is a dispenser and dispenses the specified condition drug on a lawful prescription; or

(d) is a controlled drug manufacturer or wholesaler and sells the specified condition drug; or

(e) is a person who is lawfully supplied with the specified condition drug for medical treatment and uses it in the way directed.

Maximum penalty—80 penalty units.

(2) The chief executive may give an approval mentioned in subsection (1)(a) only to—

(a) a doctor; or

(b) a person who satisfies the chief executive that the specified condition drug is to be used for a genuine analytical or research purpose.

(3) In this section—

specified condition drug means the following controlled drugs—

(a) amphetamine;

(b) dexamphetamine;

(c) methylamphetamine;

(d) methylphenidate;

(e) phenmetrazine.

Part 4 Prescribing and dispensing controlled drugs

Division 1 Prescribing controlled drugs

79 Prescribing controlled drugs

(1) A prescriber must not prescribe a controlled drug unless the prescription is made in a way that complies with this section.

Maximum penalty—60 penalty units.

(2) Subject to subsection (3), a prescription for a controlled drug must not prescribe more than 1 item.

(3) A prescription for a controlled drug may prescribe more than 1 item if each item is for the same controlled drug, including different forms of the drug.

(4) The following particulars must appear on the front of a paper prescription or in an electronic prescription—

(a) the prescriber's name, professional qualifications and address;

(b) the date it is made;

(c) if the controlled drug is for human use—the name, address and date of birth of the person for whose use it is prescribed;

(d) if the controlled drug is for an animal—the name and address of the animal's owner;

(e) the description of the controlled drug or the name of the preparation and the quantity or volume (in words and figures) of the drug or preparation;

(f) adequate directions about the use of the controlled drug;

(g) the dose to be taken or administered and if more than 1 item is prescribed the dose to be taken or administered for each item;

(h) if a doctor, nurse practitioner or physician's assistant prescribes a dose that is more than the official dose—

(i) for a paper prescription—a direction, to dispense the higher dose, that is underlined and initialled by the doctor, nurse practitioner or physician's assistant; or

(ii) for an electronic prescription—an indication that the prescription is for a dose that is more than the official dose;

Editor's note—

Under section 5 of the Act—

official dose, when used with reference to any drug or other article, means the maximum dose (if any) stated in the British pharmacopoeia.

(i) if a doctor, nurse practitioner, physician's assistant or veterinary surgeon intends that the controlled drug be dispensed more than once—a direction stating—

(i) the number of times (after the first) the drug may be dispensed; and

(ii) the time that must elapse between each dispensing of the drug;

(j) if the controlled drug is dronabinol—'Approved';

(k) if the controlled drug is amphetamine, dexamphetamine, methylamphetamine, methylphenidate or phenmetrazine—'Specified condition';

(l) if the prescriber is a veterinary surgeon—'For animal treatment only';

(m) if the prescriber is a dentist—'For dental treatment only';

(n) if the prescriber is a surgical podiatrist—'For treatment of foot conditions only'.

(5) All particulars on a paper prescription (other than the prescriber's name, professional qualifications and address) must be handwritten.

(6) However, a paper prescription may be generated—

(a) by a computer if the way the prescription is generated complies with appendix 4 of this regulation; or

(b) in another certified way.

(7) The prescriber must sign a paper prescription or electronically sign an electronic prescription.

(8) If the prescriber amends a prescription—

(a) for a paper prescription—the prescriber must initial and date the amendment; or

(b) for an electronic prescription—the prescriber must make the amendment in the approved way.

(9) If a prescription prescribes more than 1 item—

(a) the items must be numbered consecutively; and

(b) a line must be ruled under the last item.

(10) In this section—

approved way means the way approved by the chief executive.

80 Restrictions on making prescriptions

(1) A prescriber must not make an entry in a prescription in code unless the code is certified.

Maximum penalty—40 penalty units.

(2) A veterinary surgeon must not make a repeat prescription for a controlled drug authorising a dispenser to dispense the drug under the prescription more than twice.

Maximum penalty—60 penalty units.

(3) A dentist must not—

(a) make a repeat prescription for a controlled drug; or

(b) make a prescription for more than the official dose.

Maximum penalty—60 penalty units.

81 Oral prescription

(1) A prescriber may give a dispenser an oral prescription for a controlled drug the prescriber is endorsed to prescribe.

(2) Within 24 hours after giving the oral prescription, the prescriber must ensure a paper prescription for the drug is sent by facsimile transmission to the dispenser.

Maximum penalty—20 penalty units.

(3) Within 7 days after giving the oral prescription, the prescriber must send a paper prescription by post or by hand or send an electronic prescription for the drug to the dispenser.

Maximum penalty—40 penalty units.

(4) If the dispenser does not receive a paper or electronic prescription for the drug from the prescriber within 14 days after being given the oral prescription, the dispenser must immediately give a written report about the circumstances to the chief executive.

Maximum penalty—20 penalty units.

81AA Faxed prescription

(1) A prescriber may give a dispenser a faxed prescription for a controlled drug the prescriber is endorsed to prescribe.

(2) Within 24 hours after giving the faxed prescription, the prescriber must telephone the dispenser and confirm the details of the faxed prescription.

Maximum penalty—20 penalty units.

(3) Within 7 days after giving the faxed prescription, the prescriber must send a paper prescription by post or by hand or send an electronic prescription for the drug to the dispenser.

Maximum penalty—40 penalty units.

(4) If the dispenser does not receive a paper or electronic prescription for the drug from the prescriber within 14 days after being given the faxed prescription, the dispenser must immediately give a written report about the circumstances to the chief executive.

Maximum penalty—20 penalty units.

(5) In this section—

faxed prescription means a paper prescription, that complies with this division, sent by facsimile transmission.

Division 2 Dispensing controlled drugs

81A Quality standard for dispensing controlled drugs

A pharmacist must not dispense a controlled drug unless the pharmacist—

(a) has prepared or adopted a quality standard for dispensing controlled drugs; and

(b) in dispensing the controlled drug, complies with the quality standard.

Maximum penalty—60 penalty units.

82 Conditions of dispensing

(1) A dispenser must not dispense a controlled drug unless—

(a) the drug is dispensed on a prescription that complies with division 1; and

(b) if the prescription is an electronic prescription, the prescription is sent by the prescriber and received by the dispenser by electronic means approved by the chief executive; and

(c) the drug dispensed—

(i) conforms with the prescription; or

(ii) is dispensed under section 83.

Maximum penalty—60 penalty units.

(2) Also, a dispenser must not dispense a controlled drug on a prescription if—

(a) the dispenser knows, or ought reasonably to know, the prescription was obtained because of false information given to the prescriber; or

(b) it is wholly or partly defaced, illegible or obliterated; or

(c) it appears to the dispenser to have been changed by someone other than the prescriber; or

(d) it includes an indication that it has been dispensed or is not to be dispensed; or

(e) it appears to the dispenser to be false in any particular; or

(f) it appears to have been prescribed more than 6 months before the date it is presented to the dispenser; or

(g) if the prescription is for the controlled drug dronabinol—it does not have 'Approved' on it; or

(h) if the prescription is for the controlled drug amphetamine, dexamphetamine, methylamphetamine, methylphenidate or phenmetrazine—it does not have 'Specified condition' on it.

Maximum penalty—60 penalty units.

(2A) Also, a dispenser must not dispense a controlled drug on a computer-generated paper prescription that has been changed unless the dispenser first contacts the prescriber to check the change is correct.

Maximum penalty—60 penalty units.

(3) Further, a dispenser must not dispense a controlled drug—

(a) more than the number of times stated by a valid repeat direction; or

(b) before the time stated on the prescription that must elapse between each dispensing of the drug.

Maximum penalty—60 penalty units.

(4) If a dispenser reasonably believes a prescription is false in any particular, the dispenser must—

(a) keep the prescription for the time reasonably necessary to enable the dispenser to find out if it is genuine; and

(b) make reasonable inquiries to establish the name and address of the person who gave it to the dispenser.

(5) Subsection (6) applies to a dispenser in relation to a prescription if—

(a) the dispenser is reasonably satisfied the prescription does not comply with division 1; or

(b) under subsection (2), the dispenser does not dispense a controlled drug on the prescription; or

(c) after checking under subsection (2A), the dispenser is reasonably satisfied a change to the prescription is incorrect.

(6) The dispenser must—

(a) cancel the prescription by legibly and permanently indicating on a paper prescription, or entering in an electronic prescription, the following information—

(i) the prescription is not to be dispensed;

(ii) the date;

(iii) the name or initials of the dispenser;

(iv) the name and address of the dispensary; and

(b) send the prescription to the chief executive within 14 days after cancelling it under paragraph (a).

Maximum penalty—60 penalty units.

82A Prescription made by person authorised under regulation

A dispenser must not dispense a controlled drug on a prescription unless the dispenser reasonably believes the prescription was made by a person who, under this regulation, is endorsed to prescribe the drug.

Maximum penalty—60 penalty units.

83 Dispensing generic drugs

(1) This section applies if a controlled drug is specified in a prescription by a brand name (the ***specified drug***) and the drug is also available under another brand name or without a brand name (both the ***generic drug***).

(2) A dispenser may dispense the generic drug in place of the specified drug if the drug is dispensed at a public sector hospital.

(3) Also, a dispenser may dispense the generic drug in place of the specified drug at a place other than a public sector hospital if—

(a) the specified drug and the generic drug are both drugs to which a pharmaceutical benefit applies under the National Health Act; and

(b) the prescriber did not indicate on the prescription that only the specified drug was to be dispensed; and

(c) either—

(i) both of the following apply—

(A) the schedule of pharmaceutical benefits, issued by the Commonwealth department within which the National Health Act is administered, states the specified drug and the generic drug are equivalent;

(B) a determination is in force for the generic drug under the National Health Act, section 85(6); or

(ii) if the dispenser is a pharmacist, the pharmacist has, using a relevant process under the pharmacist's quality standard for dispensing controlled drugs, confirmed the specified drug and the generic drug are equivalent; and

(d) it is lawful to dispense the generic drug on prescription; and

(e) the person to whom it is dispensed asks for, or agrees to, the dispensing of the generic drug in place of the specified drug.

(4) If a generic drug is dispensed, the dispenser must enter, in the prescription—

(a) the brand name of the generic drug; or

(b) if the generic drug does not have a brand name, the name of the manufacturer of the drug.

Maximum penalty—20 penalty units.

84 Dealing with paper prescriptions and certain written instructions

(1) This section applies to a dispenser who dispenses a controlled drug on a paper prescription or administers or supplies a controlled drug on a written instruction.

(2) The dispenser must, when dispensing, administering or supplying the controlled drug, legibly and permanently indicate the following information on the prescription or written instruction—

(a) for a prescription—the prescription has been dispensed;

(b) for a written instruction—the drug has been administered or supplied;

(c) the date;

(d) the name or initials of the dispenser;

(e) the name and address of the dispensary;

(f) for a repeat prescription—the repeat number.

Maximum penalty—40 penalty units.

(3) The dispenser must send the chief executive the prescription or written instruction—

(a) in paper form; or

(b) in an approved electronic form by electronic means.

(4) If the dispenser sends the prescription or written instruction under subsection (3)(a), the dispenser must—

(a) for a repeat prescription—send the prescription within 14 days after dispensing the controlled drug on the final repeat of the prescription; or

(b) for another prescription—send the prescription within 14 days after dispensing the controlled drug; or

(c) for a written instruction—send the instruction within 14 days after carrying out the final administration or supply of the controlled drug on the instruction.

Maximum penalty—40 penalty units.

(5) If the dispenser sends the prescription or written instruction under subsection (3)(b), the dispenser must—

(a) send the prescription or written instruction—

(i) for a repeat prescription—within 14 days after the end of each month in which the controlled drug is dispensed on a repeat, including the final repeat, of the prescription; or

(ii) for another prescription—within 14 days after the end of the month in which the controlled drug is dispensed; or

(iii) for a written instruction—within 14 days after the end of the month in which the final administration or supply of the controlled drug on the instruction is carried out; and

(b) keep the prescription or written instruction in paper form.

Maximum penalty—40 penalty units.

(6) Also, even if a dispenser has sent the chief executive a paper prescription or written instruction in an approved electronic form, the chief executive may give a written notice to the dispenser requiring the dispenser to send the chief executive the prescription or written instruction in paper form within the period, of at least 14 days, stated in the notice.

(7) The dispenser must comply with a notice given to the dispenser under subsection (6).

Maximum penalty—40 penalty units.

(8) If the dispenser dispenses the controlled drug on a repeat prescription, but not as the last repeat, the dispenser must give the chief executive a written notice of the relevant information for the prescription within 14 days after dispensing the controlled drug.

Maximum penalty—40 penalty units.

(9) Subsection (8) does not apply if the dispenser sends the repeat prescription to the chief executive in an approved electronic form under subsection (5)(a)(i).

(10) If a dispenser is asked to dispense more of a controlled drug for a person than appears to be reasonably necessary, or more

frequently than appears to be reasonably necessary, the dispenser must immediately give the chief executive a written notice about—

(a) the circumstances in which the dispenser has been asked to dispense the controlled drug; and

(b) the quantity of the drug dispensed or when it has been dispensed for the person.

(11) Subsection (2)(a) applies to a repeat prescription only if the last repeat of the prescription is dispensed.

(12) Subsection (2)(a) does not apply to a duplicate of a paper prescription issued under the National Health Act or Veterans Entitlements Act.

(13) In this section—

relevant information, for a prescription, means—

(a) the information appearing on the front of the prescription; and

(b) the information the dispenser is required to write on the prescription when dispensing the controlled drug.

84A Dealing with electronic prescriptions

(1) This section applies to a dispenser who dispenses a controlled drug on an electronic prescription.

(2) The dispenser must, when dispensing the controlled drug, enter the following information in the prescription—

(a) the prescription has been dispensed;

(b) the date;

(c) the name or initials of the dispenser;

(d) the name and address of the dispensary;

(e) for a repeat prescription—the repeat number.

Maximum penalty—40 penalty units.

(3) The dispenser must send the chief executive the prescription by electronic means—

(a) for a repeat prescription—within 14 days after the end of each month in which the controlled drug is dispensed on a repeat, including the final repeat, of the prescription; or

(b) for another prescription—within 14 days after the end of the month in which the controlled drug is dispensed.

Maximum penalty—40 penalty units.

(4) If a dispenser is asked to dispense more of a controlled drug for a person than appears to be reasonably necessary, or more frequently than appears to be reasonably necessary, the dispenser must immediately give the chief executive a written notice about—

(a) the circumstances in which the dispenser has been asked to dispense the controlled drug; and

(b) the quantity of the drug dispensed or when it has been dispensed for the person.

(5) Subsection (2)(a) applies to a repeat prescription only if the last repeat of the prescription is dispensed.

85 Labelling dispensed and supplied medicines

(1) A person who sells a controlled drug as a dispensed medicine or supplies a controlled drug on a written instruction (a ***supplied medicine***), must securely attach to the dispensed or supplied medicine's container a label as required by this section with the following warnings printed on it—

(a) 'Keep out of reach of children';

(b) if the prescriber is a veterinary surgeon—'For animal treatment only'.

Maximum penalty—40 penalty units.

(2) The warnings must be printed in red on a background of contrasting colour and in bold-faced sans serif capital letters with a face depth of at least 1.5mm.

(3) The label must also have written on it—

(a) for a dispensed or supplied medicine for human use—the name of the person for whose use it is intended; or

(b) if the dispensed medicine is for an animal—the name of the animal's owner; and

(c) the name and address of—

(i) the person selling the dispensed or supplied medicine; or

(ii) the business from which the dispensed or supplied medicine is sold; and

(d) a description of the name of the dispensed medicine under subsection (4) or (5); and

(e) a description of the strength of, and the quantity or volume of, the dispensed or supplied medicine; and

(f) directions about the use of the dispensed or supplied medicine; and

(g) the date the dispensed or supplied medicine is dispensed; and

(h) the dispenser's initials; and

(i) if the medicine is for internal human therapeutic use and is a substance in appendix K of the standard—the warning statements given for the medicine in appendix F, part 1 of the standard; and

Editor's note—

appendix K (Drugs required to be labelled with a sedation warning) of the standard

(j) if the medicine's expiry date is not visible—the medicine's expiry date.

(3A) However, the warnings mentioned in subsection (1) or (3)(i) need not be printed or written on the label if the warning—

(a) appears on the dispensed or supplied medicine's container; and

(b) is clearly visible after the label is attached to the container.

(4) The dispensed medicine must be described by—

(a) its approved name; or

Editor's note—

For the definition *approved name* see part 1 of the standard.

(b) the name the prescriber entered in the prescription or, if a different brand of the medicine is dispensed, the name, if any, of the brand dispensed; or

(c) its trade name; or

(d) the approved name of each controlled drug in the medicine; or

(e) the name of each controlled drug in the medicine as entered in the prescription.

(5) Despite subsection (4), a doctor may state in a prescription that the contents of a dispensed medicine must be described in another way that is not a false description.

85A Sale of controlled drug after expiry date

A person must not sell a controlled drug after the expiry date for the drug stated on the container for the drug or a label attached to the container.

Maximum penalty—60 penalty units.

86 Record of transactions involving controlled drugs to be kept by pharmacist

(1) The pharmacist in charge of a dispensary must keep a record of transactions about controlled drugs (a ***controlled drugs record***) as required by this section—

(a) as written entries in a book; or

(b) in an electronic form; or

(c) in another certified way.

Maximum penalty—40 penalty units.

(2) If the controlled drugs record is in a book, the book must be bound.

(3) Each page or part of the record must—

(a) be sequentially numbered; and

(b) relate to 1 class of controlled drug; and

(c) have a heading describing the class of controlled drug and the measurement unit in which quantities of the drug involved in a transaction are recorded.

(4) Despite subsection (3)(b) and (c), entries made in the controlled drugs record about controlled drugs returned to the pharmacist for destruction may be made on a single page in, or in a single part of, the record.

(5) If the pharmacist starts a new controlled drugs record, the pharmacist must check the dispensary stock of controlled drugs and record in the record—

(a) the stock held when the record is started; and

(b) a reference to the most recent entry about each class of controlled drug in the previous record.

Maximum penalty—40 penalty units.

(6) If a person who administers, dispenses or supplies a controlled drug at a dispensary makes an entry on a page or part of the controlled drugs record on which there is no other

entry, the person must record as the first entry on the page or part—

(a) the quantity or volume of the class of controlled drug, described in the page or part heading, that is in stock when the page or part is started; and

(b) a reference to the most recent entry about the class of controlled drug.

Maximum penalty—40 penalty units.

(7) If a controlled drugs record is in an electronic form, the pharmacist must ensure the entries in the record are stored in a computer system that has enough capacity and backup capability for the purpose.

Maximum penalty—40 penalty units.

87 Entries to be made in controlled drugs record

(1) A pharmacist, or a person who is authorised to dispense or supply a controlled drug under the personal supervision of a pharmacist, must personally enter in the controlled drugs record, the details of each transaction for a controlled drug that is performed by the pharmacist or person.

Maximum penalty—40 penalty units.

(2) The pharmacist or person must make the entry—

(a) for a transaction for the administration or supply of a controlled drug on a written instruction under a drug therapy protocol—not later than 7 days after the end of the month in which the final administration or supply of the drug on the instruction is carried out; or

(b) otherwise—

(i) on the day of the transaction; and

(ii) if there is more than 1 transaction on a day—in the order in which the transactions happen.

Maximum penalty—40 penalty units.

(3) The pharmacist or person must include the following details in the entry—

(a) for a controlled drug that is obtained—the date it is obtained, the name and address of the person who sold it, and the seller's invoice number;

(b) the date, name and address of the person to, or for whom, the controlled drug is dispensed or sold;

(c) if no one else was involved in the transaction—a description of the nature of the transaction;

(d) the quantity or volume of the controlled drug dispensed, obtained, sold or used by the person in a compounded preparation, or otherwise involved in the transaction;

(e) if the controlled drug is sold on a purchase order or dispensed on a prescription—the distinguishing number given by the person to the order or prescription;

(f) the name of the person who made the order or prescription;

(g) the balance of the drug in stock at the dispensary after the transaction.

Maximum penalty—40 penalty units.

(4) The person who makes the entry must—

(a) for a controlled drugs record kept in a book—initial each line of the entry; or

(b) for a controlled drugs record kept in another form—include the person's initials on each line of the entry.

Maximum penalty—40 penalty units.

(5) A person must not cancel, change, delete or obliterate an entry in a controlled drugs record.

Maximum penalty—40 penalty units.

(6) However, the person who made the entry in a controlled drugs record may correct the entry as follows—

(a) for a controlled drugs record kept in a book—by a signed and dated marginal note or footnote that gives the date of the correction and the correct details;

(b) for a controlled drugs record kept in another form—by a note, that does not prevent the original or existing entry being read, of—

(i) the person's name; and

(ii) the correct details; and

(iii) the date of the correction.

88 Stock to be checked

(1) If a pharmacist takes over the management of a dispensary for more than 7 days, whether as the owner or an employee, the pharmacist must immediately—

(a) find out the quantity or volume of each class of controlled drug in stock at the dispensary; and

(b) enter the quantity or volume of each class of controlled drug in stock in the appropriate page or part of the controlled drugs record and—

(i) for a controlled drugs record kept in a book—sign and date each entry; and

(ii) for a controlled drugs record kept in another form—show the pharmacist's name and the date of the entry.

Maximum penalty—40 penalty units.

(2) If the pharmacist finds a discrepancy between the quantity or volume of a class of controlled drug in stock and the balance shown in the controlled drugs record for the drug, the pharmacist must immediately give written notice of the discrepancy to the chief executive.

Maximum penalty—40 penalty units.

Part 5 Obtaining and selling controlled drugs on purchase order

89 Authorised persons to obtain controlled drugs on purchase order

(1) An authorised person must not obtain a controlled drug other than on a purchase order complying with this section.

Maximum penalty—60 penalty units.

(2) The purchase order for a controlled drug must have on its front—

(a) the date it is written; and

(b) the name and address of the person placing the order; and

(c) the description and quantity or volume of the controlled drug to be supplied; and

(d) a number that allows the purchase order to be distinguished from other purchase orders used by the person ordering the controlled drug.

(3) A purchase order placed by a dentist, doctor, pharmacist or veterinary surgeon must be signed by the dentist, doctor, pharmacist or veterinary surgeon placing the order.

(4) A purchase order for controlled drugs placed by or for an entity, or to be used at a place, mentioned in appendix 3, part 1, column 1 of this regulation must be signed by—

(a) the person appearing opposite the entity or place in column 2; or

(b) any one of the persons appearing opposite the entity or place in column 2.

90 Sale of controlled drugs to authorised persons

(1) A person must not sell a controlled drug to an authorised person (other than a ship's master) unless the drug is sold—

(a) on a purchase order complying with this part; and

(b) if the person placing the order has an approval to obtain the drug—on production of the approval.

Maximum penalty—60 penalty units.

(2) A person must not sell a controlled drug to a ship's master unless—

(a) the person has an approval to sell the controlled drug to the ship's master; and

(b) the person receives from the ship's master a purchase order for the controlled drug, that is signed by—

(i) if the ship's master is authorised to obtain the drug under section 69(2)—a doctor; or

(ii) otherwise—the ship's master.

Maximum penalty—60 penalty units.

91 Delivery of controlled drugs

(1) A person who sells a controlled drug (the ***seller***), or an adult employee of the seller, may personally deliver a controlled drug to an authorised person (the ***buyer***), or an adult employee of the buyer, at the seller's or buyer's premises.

(2) The seller must obtain the buyer's purchase order before or on delivery of the controlled drug.

Maximum penalty—40 penalty units.

(3) When the seller delivers a controlled drug to the buyer at the buyer's premises, the seller must obtain from the person to whom the drug is delivered a dated and signed acknowledgement of receipt of the drug, written on or attached to the order.

Maximum penalty—40 penalty units.

(4) The seller must not deliver a controlled drug to the buyer unless—

(a) the drug is in a securely closed package addressed to the buyer and the package does not contain goods other than controlled drugs; and

(b) the package contains a packing slip or similar document with 'Controlled drugs—check carefully' printed on it in bold-faced sans serif capital letters with a face depth of at least 12.5mm; and

(c) the packing slip is placed so it is visible as soon as the package is opened.

Maximum penalty—40 penalty units.

92 Sending controlled drugs by carrier etc.

(1) A person who sells a controlled drug (the ***seller***) must not send the drug to an authorised person (the ***buyer***) unless—

(a) the drug is in a securely closed package that complies with this section and is addressed to the buyer; and

(b) the seller sends the package to the buyer by security post or a carrier or transport service under this section.

Maximum penalty—40 penalty units.

(2) The seller may send the package by security post or a carrier or transport service only if Australia Post or the carrier or transport service gives the seller a signed or officially receipted document acknowledging receipt of the package for delivery to the buyer.

(2A) Australia Post or the carrier or transport service may deliver the package to the buyer only if Australia Post or the carrier or transport service receives a signed or officially receipted document from the buyer acknowledging the buyer's receipt of the package.

(3) If the seller does not receive a purchase order for a controlled drug before the drug is delivered, the buyer must send the order for the drug to the seller within 24 hours after delivery.

(4) If the seller does not receive the purchase order for the controlled drug within 7 days after delivery, the seller must immediately give the chief executive a written report of the circumstances of the transaction.

(6) The package—

(a) must not contain goods other than controlled drugs; and

(b) must contain a packing slip or similar document with 'Controlled drugs—check carefully' printed on it in bold-faced sans serif capital letters with a face depth of at least 12.5mm.

(7) The packing slip must be placed so it is visible as soon as the package is opened.

93 Dealing with purchase orders

(1) If a pharmacist, or person who is authorised to dispense a controlled drug under a pharmacist's personal supervision, sells a controlled drug on a purchase order, the pharmacist or person must—

(a) write on the front of the order—

(i) the date the drug is sold; and

(ii) the name and address of the dispensary at or from which the drug is sold; and

(b) sign the order; and

(c) send the order to the chief executive—

(i) in paper form—within 14 days after selling the drug; or

(ii) in an approved electronic form by electronic means—within 14 days after the end of the month in which the drug is sold; and

(d) if the pharmacist or authorised person sends the order under paragraph (c)(ii)—keep the order in paper form.

Maximum penalty—40 penalty units.

(2) If a person, other than a pharmacist or an authorised person mentioned in subsection (1), sells a controlled drug on a purchase order, the person must—

(a) write on the front of the order the date the drug is sold; and

(b) sign the order; and

(c) keep the order in paper form; and

(d) if the order is from a dentist, doctor or veterinary surgeon—send to the chief executive—

(i) a copy of the order in paper form—within 14 days after selling the drug; or

(ii) an approved electronic form of the order by electronic means—within 14 days after the end of the month in which the drug is sold.

Maximum penalty—40 penalty units.

(3) A duplicate of an order under the National Health Act is taken to be a purchase order for subsection (1) or (2).

Part 6 Possession and use of controlled drugs

94 Unlawful possession of controlled drugs

A person must not possess a controlled drug that the person did not lawfully obtain.

Maximum penalty—80 penalty units.

95 Possession by user

(1) A person who lawfully obtains a controlled drug may possess the drug for the time reasonably necessary for the person to use the drug for the purpose and in the way the authorised person directs.

(2) The person must—

(a) keep the controlled drug in the person's possession until it is used; and

(b) use the controlled drug, or allow it to be used, only for the purpose for which it was obtained.

Maximum penalty—60 penalty units.

96 Issue of controlled drugs within institutions

The person in charge of the central storage point for controlled drugs at an institution must ensure a controlled drug is not issued to a ward, operating theatre or department of the institution unless the person is reasonably satisfied—

(a) the issue is necessary; and

(b) previous issues of controlled drugs to the ward, operating theatre or department have been accounted for.

Maximum penalty—60 penalty units.

97 Oral instruction must be put in writing

(1) If, under this chapter, a dentist, doctor, nurse practitioner or physician's assistant gives an authorised person an oral instruction to administer or supply a controlled drug, the dentist, doctor, nurse practitioner or physician's assistant must put the instruction into writing within 24 hours after giving the instruction.

Maximum penalty—40 penalty units.

(2) If an indigenous health worker, isolated practice area paramedic, registered nurse or midwife acts on the oral instruction of a dentist, doctor, nurse practitioner or physician's assistant and the dentist, doctor, nurse practitioner or physician's assistant does not put the instruction in writing within 24 hours after giving the instruction, the indigenous health worker, paramedic, registered nurse or midwife must report the instruction to—

(a) for an instruction given at a hospital—the hospital's director of nursing; or

(b) for an instruction given at a detention centre, nursing home or prison—the director of nursing or person in charge of the detention centre, nursing home or prison; or

(c) in any other case—the person in charge of the place.

Maximum penalty—40 penalty units.

(3) If a dentist, doctor, nurse practitioner or physician's assistant contravenes subsection (1)—

(a) for an instruction given at a hospital—the hospital's director of nursing must, within 48 hours of becoming aware of the contravention, report the circumstances to the hospital's medical superintendent or the chief executive; or

(b) for an instruction given at a detention centre, nursing home or prison—the director of nursing or person in charge of the detention centre, nursing home or prison must, within 48 hours of becoming aware of the contravention, report the circumstances to the chief executive; or

(c) for another case—the person given the instruction must, within 48 hours of becoming aware of the contravention, report the circumstances to the chief executive.

Maximum penalty—40 penalty units.

Part 7 Records of controlled drugs

Division 1 Definitions

98 Definitions for pt 7

In this part—

central storer means the person in charge of controlled drugs at an institution if controlled drugs are kept at a central storage point until the person issues the drugs to a unit of the institution where the drugs are kept until they are administered to patients of the institution.

main issue book see section 99(1).

single storage book see section 106(1).

single storer means the person in charge of controlled drugs at an institution if controlled drugs at the institution are kept at a single storage point until the drugs are administered to patients of the institution.

transfer voucher see section 104(2).

unit means a ward, operating theatre or department of an institution.

unit storer means the person in charge of controlled drugs at a unit of an institution.

ward drugs book see section 101(1).

Division 2 Records at institutions with central storage point for controlled drugs

99 Central storer to keep main issue book for controlled drugs

(1) The central storer at an institution must keep a record, in a book (the ***main issue book***) or in another certified way, for recording transactions about obtaining controlled drugs into, and issuing controlled drugs from, the central storage point.

Maximum penalty—40 penalty units.

(2) The central storer must ensure—

(a) the main issue book is bound; and

(b) each page of the main issue book—

(i) is sequentially numbered; and

(ii) relates only to 1 class of controlled drug; and

(iii) has a heading describing the class of controlled drug and the measurement unit in which quantities of the drug involved in a transaction are recorded.

Maximum penalty—40 penalty units.

(3) Despite subsection (2)(b)(ii), entries made in the main issue book about controlled drugs returned to the central storer for destruction may be made on a single page in the book.

100 Details to be recorded when controlled drugs obtained by central storer

(1) For each controlled drug that a central storer obtains, the storer must record on the relevant page of the main issue book—

(a) the description and quantity or volume of the controlled drug; and

(b) the date the controlled drug is obtained; and

(c) the name and address of the person from whom the controlled drug is obtained; and

(d) if the controlled drug was obtained for a particular person—the person's name and address; and

(e) the quantity or volume of the controlled drug held at the central storage point; and

(f) the quantity or volume of the controlled drug supplied to a unit storer.

Maximum penalty—40 penalty units.

(2) The central storer must sign the entry.

Maximum penalty—40 penalty units.

101 Unit storer to keep ward drugs book for controlled drugs

(1) A unit storer must keep a record of transactions, in a book (the ***ward drugs book***) or in another certified way, about—

(a) obtaining controlled drugs into the unit from the central storage point; and

(b) administering controlled drugs to persons in the unit.

Maximum penalty—40 penalty units.

(2) The unit storer must ensure—

(a) the ward drugs book is bound; and

(b) each page of the ward drugs book—

(i) is sequentially numbered; and

(ii) relates only to 1 class of controlled drug; and

(iii) has a heading describing the class of controlled drug and the measurement unit in which quantities of the drug involved in a transaction are recorded.

Maximum penalty—40 penalty units.

102 Details to be recorded when controlled drugs obtained at unit

(1) For each controlled drug that a unit storer obtains from the central storer, the unit storer must record on the relevant page of the ward drugs book—

(a) the description and quantity or volume of the controlled drug; and

(b) the date the controlled drug is obtained.

Maximum penalty—40 penalty units.

(2) The central storer must sign the entry if the central storer is reasonably satisfied the entry is correct.

Maximum penalty—40 penalty units.

103 Details to be recorded when controlled drugs administered in unit

(1) When a controlled drug is administered in a unit, the unit storer must record on the relevant page of the ward drugs book—

(a) the description and quantity or volume of the controlled drug; and

(b) the date and time the controlled drug is administered; and

(c) the name of the person to whom the controlled drug is administered; and

(d) the quantity or volume of the controlled drug remaining.

Maximum penalty—40 penalty units.

(2) The person who obtains the controlled drug to administer it to someone else must sign the entry if the person is reasonably satisfied the entry is correct.

Maximum penalty—40 penalty units.

104 Transfer vouchers may be used for controlled drugs in certain cases

(1) This section applies if, because of the size of an institution or for another reason, it is not practicable for—

(a) a unit storer to sign the main issue book; or

(b) the central storer to sign the ward drugs book.

(2) The central storer may record issuing the controlled drug, and the unit storer may record obtaining the drug, on a document stating the things that must be recorded in a main issue book and ward drugs book (a ***transfer voucher***).

(3) The person issuing, and the person receiving, the controlled drug must sign the transfer voucher.

Maximum penalty—40 penalty units.

(4) The central storer must keep the transfer voucher at the central storage point for 2 years after it is made.

Maximum penalty—40 penalty units.

105 Main issue book and ward drugs book as 1 book

Sections 101 to 103 do not apply to unit storers at an institution if—

(a) the institution's central storer keeps 1 book that contains the information that must be recorded in the main issue book and each ward drugs book of the institution; and

(b) entries in the book are signed by the person who must sign the entries in the main issue book or ward drugs book.

Division 3 Records at institutions with only 1 storage point

106 Single storer to keep single storage book for controlled drugs

(1) A single storer of controlled drugs must keep a record of transactions, in a book (the ***single storage book***) or another certified way, about obtaining controlled drugs into, and administering controlled drugs from, the storage point.

Maximum penalty—40 penalty units.

(2) The single storer must ensure—

(a) the single storage book is bound; and

(b) each page of the single storage book relates only to 1 class of controlled drug.

(3) Despite subsection (2)(b), entries made in the single storage book about controlled drugs returned to the single storer for destruction may be made on a single page in the book.

107 Details to be recorded when controlled drugs obtained

(1) For each controlled drug that a single storer obtains, the storer must record on the relevant page of the single storage book—

(a) the description and quantity or volume of the controlled drug; and

(b) the date the controlled drug is obtained; and

(c) the name and address of the person from whom the controlled drug is obtained; and

(d) if the controlled drug was obtained for a particular person—the person's name and address.

Maximum penalty—40 penalty units.

(2) The single storer must sign the entry.

Maximum penalty—40 penalty units.

108 Details to be recorded when controlled drugs administered

(1) When a controlled drug is administered from the single storage point of an institution, the single storer must record on the relevant page of the single storage book—

(a) the description and quantity or volume of the controlled drug; and

(b) the name of the person to whom the controlled drug is administered; and

(c) the date and time the controlled drug is administered; and

(d) the quantity or volume of the controlled drug remaining.

Maximum penalty—40 penalty units.

(2) The person who obtains the controlled drug to administer it to someone else must sign the entry if the person is reasonably satisfied the entry is correct.

Maximum penalty—40 penalty units.

Division 4 Other provisions about records at institutions

109 Records of controlled drugs supplied to be kept

(1) The director of nursing of a hospital, or the registered nurse in charge of the hospital, must keep a record, as required by this section, of all controlled drugs supplied by a nurse at the hospital under section 67(3) or 68.

(2) The records must be made by making written entries in a bound book with consecutively numbered pages, or in another certified way.

(3) The entries must be made in the order in which the transactions in the controlled drugs happen.

(4) An entry in the record book about a controlled drug must include—

(a) the name and address of the person for whose use the controlled drug is supplied; and

(b) the time and date the controlled drug is supplied; and

(c) the description and quantity or volume of the controlled drug supplied; and

(d) the directions for use of the controlled drug; and

(e) the name and address of the doctor who gave the oral or written instruction to supply the controlled drug; and

(f) the initials of the nurse supplying the controlled drug.

(5) A person must not change, obliterate or cancel an entry in a record book kept under this section.

Maximum penalty—40 penalty units.

(6) However, the person who made the entry may correct the entry by a signed and dated marginal note or footnote giving the date of the correction and the correct particulars.

110 Responsibility for checking accuracy of records at institutions

(1) The responsible person for an institution must ensure—

(a) records are kept of all transactions in controlled drugs at the institution; and

(b) at reasonable intervals—

(i) the stock of controlled drugs is checked to ensure the records about the controlled drugs on hand are accurate; and

(ii) all records of transactions for controlled drugs are inspected.

Maximum penalty—40 penalty units.

(2) The person who checks the stock of controlled drugs and inspects the records (the ***checker***) must—

(a) write the date and results of the inspection on the record; and

(b) immediately report any of the following to the institution's medical superintendent or, if there is no medical superintendent, the chief executive—

(i) a contravention of this regulation;

(ii) an apparently excessive use of a controlled drug;

(iii) any discrepancy between the controlled drug in stock and the drugs the records indicate should be in stock; and

(c) if the checker knows, or reasonably suspects, a controlled drug has been lost, misappropriated or stolen, immediately give the chief executive written notice about the loss, misappropriation or theft.

Maximum penalty—40 penalty units.

(3) The checker for an institution must be the responsible person for the institution or a doctor, pharmacist, registered nurse or hospital pharmaceutical assistant nominated in writing by the responsible person.

(4) In this section—

reasonable interval means an interval of not more than 1 month that is reasonably necessary to carry out the check and inspection under subsection (1)(b).

responsible person, for an institution, means—

(a) the pharmacist in charge of the dispensary at the institution; or

(b) if there is no pharmacist in charge—the director of nursing for the institution; or

(c) if paragraphs (a) and (b) do not apply—

(i) for a nursing home—the registered nurse in charge at the nursing home; or

(ii) in any other case—the person in charge of the institution.

Division 5 Responsibility for keeping and checking records at places other than institutions

111 Records—dentists, doctors, nurse practitioners, veterinary surgeons

(1) A dentist, doctor, nurse practitioner or veterinary surgeon (a ***practitioner***) who obtains a controlled drug must keep a record book.

Maximum penalty—40 penalty units.

(2) The practitioner must—

(a) use a separate record book or a separate part of the record book for each class of controlled drug; and

(b) enter in the book, full details of each transaction involving a controlled drug administered, dispensed, obtained, supplied or used by the practitioner; and

(c) make the entry as soon as practicable after the controlled drug is administered, dispensed, obtained, supplied or used by the practitioner, but no later than the day after it is administered, dispensed, obtained, supplied or used.

Maximum penalty—40 penalty units.

(3) The practitioner must ensure the entry includes the following—

(a) the date of the transaction;

(b) the name and address of the person—

(i) from whom the controlled drug is obtained; or

(ii) for whom the controlled drug is dispensed, obtained or supplied or on whom it is administered or used;

(c) the quantity or volume of the controlled drug administered, dispensed, obtained, supplied or used in the transaction;

(d) the balance of the controlled drug in the practitioner's possession after the transaction;

(e) the practitioner's initials.

Maximum penalty—40 penalty units.

112 Records—ambulance officers, indigenous health workers, midwives and rural and isolated practice endorsed nurses

(1) An ambulance officer, indigenous health worker, midwife or rural and isolated practice endorsed nurse who obtains a controlled drug must keep a record book.

Maximum penalty—40 penalty units.

(2) The ambulance officer, indigenous health worker, midwife or rural and isolated practice endorsed nurse must—

(a) use a separate record book or a separate part of the record book for each class of controlled drug; and

(b) enter in the book—

(i) for an ambulance officer—full details of each transaction involving a controlled drug administered, obtained or used by the officer; or

(ii) for an indigenous health worker—full details of each transaction involving a controlled drug administered, obtained or used by the worker; or

(iii) for a midwife—full details of each transaction involving a controlled drug administered, obtained, supplied or used by the midwife; or

(iv) for a nurse—full details of each transaction involving a controlled drug administered, obtained, supplied or used by the nurse; and

(c) make the entry as soon as possible after the controlled drug is administered, obtained, supplied or used by the officer, worker, midwife or nurse, but no later than the day after it is administered, obtained, supplied or used.

Maximum penalty—40 penalty units.

(3) The ambulance officer, indigenous health worker, midwife or rural and isolated practice endorsed nurse must ensure the entry includes the following—

(a) the date and time of the transaction;

(b) the name and address of the person—

(i) from whom the controlled drug is obtained; and

(ii) for whom the controlled drug is supplied or on whom it is administered or used;

(c) the quantity or volume of the controlled drug administered, obtained, supplied or used in the transaction;

(d) the balance of the controlled drug in the officer's, worker's, midwife's or nurse's possession after the transaction;

(e) if the controlled drug is administered to a person—the name of the doctor authorising the drug's administration;

(f) the officer's, worker's, midwife's or nurse's signature.

Maximum penalty—40 penalty units.

113 Record keeping for certain nursing practices and Queensland Ambulance Service stations

(1) This section applies if—

(a) 2 or more rural and isolated practice endorsed nurses operate a practice in an isolated practice area; or

(b) 2 or more isolated practice area paramedics operate a practice in an isolated practice area (paramedics).

(2) The person in charge of the practice must ensure records are kept of all transactions in controlled drugs involving the practice.

Maximum penalty—40 penalty units.

(3) The person must, at least once a week—

(a) check the stock of controlled drugs in hand to ensure records about the controlled drugs in hand are accurate; and

(b) inspect all records of transactions in controlled drugs; and

(c) write the date and the results of the inspection on the record.

Maximum penalty—40 penalty units.

(4) The person must immediately report to the chief executive—

(a) a contravention of this regulation; or

(b) an apparently excessive use of a controlled drug; or

(c) any inconsistency between the controlled drugs in stock and the controlled drugs that the records indicate should be in stock; or

(d) if the person knows, or reasonably suspects, a controlled drug has been lost, misappropriated or stolen, the person's knowledge, or reasonable suspicion, of the loss, misappropriation or theft.

Maximum penalty—40 penalty units.

114 Records—other approved persons

(1) A person approved under this regulation to administer, possess, obtain, sell or use a controlled drug must keep the records stated in the approval.

Maximum penalty—40 penalty units.

(2) This section does not apply to records that must be kept under another provision of this chapter.

115 Exemption of user from keeping records

(1) This part does not apply to a person for a controlled drug if—

(a) the controlled drug—

(i) was lawfully prescribed for the person or the person's animal; or

(ii) was lawfully supplied under a written instruction; and

(b) the person uses the controlled drug for the dental, medical or veterinary purpose for which it is prescribed or for which the written instruction was written.

(2) This section does not apply to records that must be kept under another provision of this chapter.

116 Record to be made on day of transaction

If, under a provision in this part, a person must enter a transaction in a document, the person must make the entry on the day of the transaction, unless the provision otherwise provides.

Maximum penalty—40 penalty units.

116A Discrepancy to be immediately reported to chief executive

(1) This section applies to a person who, under this division, is required to keep a record book, keep records or ensure records are kept, about transactions in controlled drugs and who—

(a) finds a discrepancy between the quantity or volume of a class of controlled drug kept by the person and the balance shown in the person's records for the drug; or

(b) knows, or reasonably suspects, a controlled drug has been lost, misappropriated or stolen.

(2) The person must immediately give the chief executive a written notice about the discrepancy, loss, misappropriation or theft.

Maximum penalty—40 penalty units.

(3) If a person is punishable under this section, and also under section 113(4)(c), the person may be prosecuted and convicted under either section 113(4) or this section but not both.

117 Records not to be changed but may be corrected

(1) A person must not cancel, change or obliterate an entry made in a book or other record kept under this part.

Maximum penalty—40 penalty units.

(2) However, the person who made the entry may correct the entry by a signed and dated marginal note or footnote giving the correct details.

Part 8 Storage of controlled drugs

118 Storage of controlled drugs at institutions

(1) The owner of an institution must ensure a controlled drug kept at the institution is kept—

(a) in a receptacle that complies with appendix 6 of this regulation; or

(b) in another place (a ***secure place***) an inspector who inspects the place is reasonably satisfied is at least as secure as a receptacle mentioned in paragraph (a).

Maximum penalty—60 penalty units.

(2) A person authorised to possess a controlled drug at an institution must—

(a) ensure the drug is stored in the receptacle or secure place; and

(b) always keep the receptacle or place locked (other than when a controlled drug is being put into or taken out of the receptacle or place); and

(c) ensure the key or combination to, or other way used to personally access, the receptacle or secure place can not be used by a person who is not authorised to possess a controlled drug at the institution.

Maximum penalty—60 penalty units.

(3) However, the person may keep morphine or opium, if the morphine or opium is in a compounded preparation containing 0.1% or less of morphine calculated as anhydrous morphine—

(a) in a part of the institution to which the public does not have access; or

(b) in a cupboard or drawer that is not accessible to the public.

119 Storage of controlled drugs generally

(1) An authorised person in possession of a controlled drug in a place (other than an institution) must keep the drug—

(a) in a receptacle that complies with appendix 6 of this regulation; or

(b) in another place (a ***secure place***) an inspector who inspects the place is reasonably satisfied is at least as secure as a receptacle mentioned in paragraph (a).

Maximum penalty—60 penalty units.

(2) The authorised person must—

(a) always keep the receptacle or secure place locked (other than when a controlled drug is being put into or taken out of the receptacle or place); and

(b) ensure the key or combination to, or other way used to personally access, the receptacle or secure place can not be used by a person who is not authorised to possess a controlled drug at the place.

Maximum penalty—60 penalty units.

(3) However, the authorised person may keep morphine or opium, if the morphine or opium is in a compounded preparation containing 0.1% or less of morphine calculated as anhydrous morphine—

(a) in a part of the person's premises to which the public does not have access; or

(b) in a cupboard or drawer that is not accessible to the public.

(4) Also, an ambulance officer, doctor, rural and isolated practice endorsed nurse or veterinary surgeon may possess a controlled drug at a place other than the place where the person practises his or her profession.

(5) The ambulance officer, doctor, rural and isolated practice endorsed nurse or veterinary surgeon must keep the drug in a secure place under his or her personal control.

Maximum penalty—60 penalty units.

(6) However, this section does not apply to a person who is in possession of a controlled drug under a prescription for the drug for the person's own use or in caring for another person for whom the drug is prescribed.

Part 9 Treatment with and dependence on controlled drugs

120 Notice required if lengthy treatment with controlled drug

(1) This section applies if a doctor or nurse practitioner—

(a) administers, dispenses, prescribes or supplies, or intends to administer, dispense, prescribe or supply, a controlled drug in the treatment of a patient for more than 2 months; or

(b) reasonably suspects a patient has been treated with a controlled drug by another doctor or nurse practitioner for more than 2 months and the doctor or nurse practitioner intends to administer, dispense, prescribe or supply a controlled drug in the treatment of the patient.

(2) The doctor or nurse practitioner must immediately give the chief executive a written report in the approved form about the circumstances of the patient's treatment.

Maximum penalty—40 penalty units.

(3) The chief executive may ask the doctor or nurse practitioner to give the chief executive additional information about the treatment of the patient within a stated reasonable time.

(4) The doctor or nurse practitioner must comply with the request, unless the doctor or nurse practitioner has a reasonable excuse for not complying with it.

Maximum penalty—40 penalty units.

121 Controlled drugs not to be obtained unless information disclosed

(1) This section applies to a person who—

(a) consults a dentist, doctor, nurse practitioner, physician's assistant or surgical podiatrist (the ***earlier practitioner***); and

(b) obtains a controlled drug or restricted drug of dependency, or a prescription for a controlled drug or restricted drug of dependency, from the earlier practitioner; and

(c) consults another dentist, doctor, nurse practitioner, physician's assistant or surgical podiatrist (the ***other practitioner***) within 2 months after consulting the earlier practitioner.

(2) The person must not obtain a controlled drug, or a prescription for a controlled drug, from the other practitioner unless the person gives the other practitioner details (including quantities) of all controlled drugs or restricted drugs of dependency, and prescriptions for controlled drugs or restricted drugs of dependency, obtained from an earlier practitioner within 2 months before the person consults the other practitioner.

Maximum penalty—80 penalty units.

122 Approval needed for treating certain drug dependent persons with controlled drugs

(1) If a relevant practitioner reasonably believes a person is a drug dependent person, the relevant practitioner must not, without an approval—

(a) dispense or prescribe a controlled drug for the person; or

(b) administer or supply a controlled drug to or for the person; or

(c) give an oral or written instruction to supply a controlled drug to or for the person.

Maximum penalty—60 penalty units.

(2) If a relevant practitioner reasonably believes that it is necessary for the relevant practitioner to treat a drug dependent person, or the relevant practitioner proposes to treat a class of drug dependent persons, the relevant practitioner must give the chief executive a report in the approved form about—

(a) if the relevant practitioner reasonably believes that it is necessary to treat a drug dependent person—the circumstances of the person's treatment; or

(b) if the relevant practitioner proposes to treat a class of drug dependent persons—the class of drug dependent persons the relevant practitioner proposes to treat and the proposed treatment of the persons.

Maximum penalty—40 penalty units.

(3) The chief executive may ask the relevant practitioner to give the chief executive stated additional information about the treatment of the drug dependent person or class of persons within a stated reasonable time.

(4) The relevant practitioner must comply with the request, unless the relevant practitioner has a reasonable excuse for not complying with it.

Maximum penalty—40 penalty units.

(5) If the chief executive is reasonably satisfied that, for the welfare of the drug dependent person or class of drug dependent person, it is necessary for the relevant practitioner to treat the person or persons with a controlled drug, the chief executive may give the relevant practitioner written approval to administer, dispense, prescribe, supply or give an oral or

written instruction to supply a stated quantity or volume of the controlled drug.

(6) Also, if the chief executive is reasonably satisfied that, for the welfare of the drug dependent person or class of drug dependent persons, it is necessary for the chief executive to give the relevant practitioner an oral approval to administer, dispense, prescribe, supply or give an oral or written instruction to supply a stated quantity or volume of the controlled drug to or for the person or persons, the chief executive may give the oral approval.

(7) However, if the chief executive gives the relevant practitioner an oral approval, the chief executive must give the relevant practitioner written confirmation of the approval as soon as possible after giving the oral approval.

(8) A relevant practitioner to whom a written or oral approval has been given under subsection (5) or (6) must not administer, dispense, prescribe, supply, or give an oral or written instruction to supply a controlled drug to the person or persons other than under the approval.

Maximum penalty—60 penalty units.

(9) An approval given under this section has effect for the period stated in the approval.

(10) This section does not apply to a relevant practitioner treating a drug dependent person as an inpatient in a hospital.

(11) In this section—

relevant practitioner means a doctor, nurse practitioner or surgical podiatrist.

122A Approval needed to establish or operate a controlled drugs administration facility

A person must not, without an operating approval, establish or operate a controlled drugs administration facility.

Maximum penalty—20 penalty units.

123 Self-administration of controlled drugs by authorised persons prohibited

(1) A person who may possess a controlled drug under part 2 or 3 must not use the drug by self-administering it.

Maximum penalty—80 penalty units.

(2) Subsection (1) does not apply to a controlled drug the person possesses for use for a medical or dental purpose if—

(a) a dentist, doctor or nurse practitioner (other than the person) prescribed the drug for, or supplied the drug to, the person; and

(b) the dentist, doctor or nurse practitioner is reasonably satisfied the person has—

(i) a dental or medical condition for which the drug is an appropriate treatment; and

(ii) a genuine need to use the drug to treat the condition.

Part 10 General

124 Controlled drugs for animals not to be dispensed etc. for human therapeutic use

A person must not, without an approval, dispense, prescribe, sell or use, for human therapeutic use, a controlled drug labelled, manufactured, packed or prepared for use for animal treatment.

Maximum penalty—80 penalty units.

125 Controlled drugs for animals not to be administered to humans

A person must not, without an approval, administer to himself, herself or someone else, a controlled drug labelled, manufactured, packed or prepared for use for animal treatment.

Maximum penalty—80 penalty units.

126 False, misleading or incomplete entries

A person must not make an entry in a book or record required to be kept under this chapter that the person knows is a false, misleading or incomplete entry.

Maximum penalty—60 penalty units.

127 Improper use of prescriptions for controlled drugs

(1) A person must not use a prescription, or document purporting to be a prescription, for a controlled drug to obtain the drug if the prescription or other document is written by someone other than a person—

(a) who may prescribe the drug; and

(b) whose name, professional qualifications and address are legibly written on the prescription.

Maximum penalty—80 penalty units.

(2) A person must not obtain a controlled drug by using a prescription that the person knows falsely states the name or current residential address of the person for whom the drug is prescribed.

Maximum penalty—80 penalty units.

(3) A person must not obtain a controlled drug by using a prescription that has on it an alteration, obliteration or other writing made by someone other than the prescriber who wrote the prescription.

Maximum penalty—80 penalty units.

(4) A person must not change, obliterate or otherwise write on a prescription, unless the person is the prescriber who wrote the prescription.

Maximum penalty—80 penalty units

(5) Subsections (3) and (4) do not apply to something written on a prescription under this chapter by a dispenser.

128 False statements—controlled drugs

(1) A person must not make a statement the person knows is false to obtain a controlled drug from a person endorsed under this regulation to administer, dispense or sell the drug.

Maximum penalty—80 penalty units.

(2) A person must not make a statement the person knows is false to obtain a prescription for a controlled drug from a prescriber.

Maximum penalty—80 penalty units.

(3) A person must not make a statement the person knows is false about a prescription or purchase order for a controlled drug.

Maximum penalty—80 penalty units.

(4) A person must not state a name or residential address the person knows is false to—

(a) a person who may administer, dispense, prescribe or sell a controlled drug; or

(b) an employee or agent of a person mentioned in paragraph (a) in the performance of the employment or agency.

Maximum penalty—80 penalty units.

129 Production of documents about controlled drugs previously in authorised person's possession

(1) An inspector may require an authorised person to produce, for inspection by the inspector, any documents in the authorised person's possession relating to controlled drugs, or a particular controlled drug, that has been in the person's possession—

(a) at any time within the 2 years before the request; or

(b) at a stated time of not more than 2 years before the request.

(2) The authorised person must comply with the requirement, unless the authorised person has a reasonable excuse for not complying with it.

Maximum penalty—20 penalty units.

(3) The inspector may take extracts from, or make copies of, any documents produced by the authorised person.

(4) The inspector may require the authorised person to give the inspector reasonable help to exercise the inspector's power under subsection (3).

(5) The authorised person must comply with the requirement to give reasonable help, unless the person has a reasonable excuse for not complying with it.

Maximum penalty—20 penalty units.

130 Unsafe disposal or use of controlled drugs

A person must not discharge, dispose of or use a controlled drug in a way that—

(a) endangers the life or safety of a person or domestic animal; or

(b) exposes food, drink or a condiment or another drug or a poison to the risk of contamination by the controlled drug; or

(c) allows access to the controlled drug to someone not endorsed to possess it.

Maximum penalty—80 penalty units.

131 Advertising controlled drugs

(1) A person must not advertise, or cause someone else to advertise, a substance that is or contains a controlled drug, whether or not the controlled drug is named in the advertisement.

Maximum penalty—80 penalty units.

(2) However, subsection (1) does not apply to—

(a) an advertisement in a professional or trade journal; or

(b) a price list, advertisement or promotional material intended for circulation only to the wholesale drug trade or the dental, medical, pharmaceutical or veterinary professions; or

(c) a price list that complies with the document called 'Price Information Code of Practice', published by the Therapeutic Goods Administration, as in force from time to time.

Editor's note—

A copy of the Price Information Code of Practice may be obtained from the Therapeutic Goods Administration's website at <www.tga.gov.au>.

131A Automatic machines—Act, s 106

For section 106(2) of the Act, the sale or supply of a controlled drug by means of an automatic machine or similar mechanical device is prohibited.

132 Safe keeping of controlled drugs

A person must not carry, handle or store a controlled drug in a way that may allow the drug to mix with, or contaminate, food, drink or a condiment or a drug or poison for human or animal use even if the container in which the controlled drug is carried, handled or stored breaks or leaks.

Maximum penalty—60 penalty units.

133 Keeping records

A person who, under this chapter, must keep a record or other document about controlled drugs must—

(a) ensure it is kept in good condition, as far as practicable; and

(b) keep it for 2 years after the last entry that is made in it.

Maximum penalty—40 penalty units.

Chapter 3 Restricted drugs

Part 1 Licences

Division 1 Preliminary

134 Application of pt 1

This part applies to the following types of licences—

(a) restricted drug manufacturer licences;

(b) restricted drug wholesaler licences.

135 Licence to state business premises and other particulars

(1) A licence under this chapter applies only to the place stated in the licence as the licensee's business premises.

(2) The chief executive must not state more than 1 place in the licence as the licensee's business premises.

(3) For a restricted drug manufacturer licence, the chief executive must also state in the licence—

(a) the restricted drug or drugs the licensee may manufacture under the licence; and

(b) the title of the position that is to have responsibility for supervising the manufacture of the restricted drug or drugs.

(4) For a restricted drug wholesaler licence, the chief executive may state in the licence the restricted drug or drugs the licensee may sell under the licence.

Division 2 Restricted drug manufacturer licence

136 Restrictions on grant of restricted drug manufacturer licences

The chief executive may grant a restricted drug manufacturer licence to a person only if the chief executive is reasonably satisfied—

(a) the person—

(i) intends to carry on business as a restricted drug manufacturer; and

(ii) is a suitable person to manufacture and sell restricted drugs; and

(b) an individual who holds the position responsible for supervising the manufacture of the restricted drug or

drugs has the qualifications and experience necessary to effectively supervise the manufacture; and

(c) the premises to be used for manufacturing the restricted drug or drugs are suitable for the purpose.

137 Restricted drug manufacturer licence

A restricted drug manufacturer—

(a) may manufacture only the restricted drugs stated in the manufacturer's licence; and

(b) is taken to hold the following licences—

(i) a restricted drug wholesaler licence;

(ii) a poison manufacturer licence;

(ii) a poison wholesaler licence.

138 General conditions that apply to restricted drug manufacturer licence

A restricted drug manufacturer—

(a) must not manufacture, have, keep or sell a restricted drug at a place other than the manufacturer's business premises; and

(b) must ensure each restricted drug manufactured under the manufacturer's licence is manufactured under the personal supervision of the individual who holds the position named in the licence; and

(c) must ensure a restricted drug at the manufacturer's business premises is not handled by a person other than the manufacturer or a competent adult employee of the manufacturer.

Maximum penalty—60 penalty units.

139 Offence to manufacture restricted drug without licence

A person must not manufacture a restricted drug unless the person—

(a) holds a restricted drug manufacturer licence for the drug; or

(b) is a State analyst, or a trainee State analyst under the supervision of a State analyst, who manufactures the restricted drug for the analyst's, or trainee's, official duties; or

(c) holds an endorsement under section 18(1) to manufacture the restricted drug.

Maximum penalty—60 penalty units.

Division 3 Restricted drug wholesaler licence

140 Restrictions on grant of restricted drug wholesaler licence

The chief executive may grant a restricted drug wholesaler licence to a person only if the chief executive is reasonably satisfied—

(a) the person intends to carry on business as a restricted drug wholesaler; and

(b) the person is a suitable person to sell restricted drugs; and

(c) the premises to be used for wholesaling the restricted drugs are suitable for the purpose.

141 Restricted drug wholesaler licence

(1) A restricted drug wholesaler may sell a restricted drug or an S2, S3 or S7 poison (whether or not for resale) to—

(a) an authorised person; or

(b) someone in another State who may obtain the drug under the law of the other State.

(2) Also, a restricted drug wholesaler may sell a restricted drug or an S2, S3 or S7 poison by wholesale to a person in another country who may lawfully obtain the drug in the country.

(3) Subsection (2) does not apply to a restricted drug that is a prohibited export under the *Customs Act 1901* (Cwlth).

142 General conditions that apply to restricted drug wholesaler licence

(1) A restricted drug wholesaler—

(a) must not have, keep or sell a restricted drug at a place other than the wholesaler's business premises; and

(b) must ensure a restricted drug at the wholesaler's business premises is not handled by a person other than the wholesaler or a competent adult employee of the wholesaler; and

(c) must not sell a restricted drug to anyone other than someone to whom the wholesaler may sell the drug under this regulation.

Maximum penalty—60 penalty units.

(2) Subsection (1) does not prevent a restricted drug wholesaler giving a restricted drug to the wholesaler's representative to display or give, as samples, to a dentist, doctor or veterinary surgeon.

(3) Subject to subsection (4), a restricted drug wholesaler must, in carrying on business under the restricted drug wholesaler's licence, comply with the Australian Code of Good Wholesaling Practice for Therapeutic Goods for Human Use.

Maximum penalty—60 penalty units.

Editor's note—

The code is available from the Therapeutic Goods Administration's website at <www.tga.gov.au>.

(4) Subsection (3) does not apply to a restricted drug wholesaler to the extent the wholesaler carries on business under the wholesaler's licence in a way that does not require the wholesaler to store, handle or transport a restricted drug.

143 Offence to wholesale restricted drug without licence

A person must not sell a restricted drug by wholesale unless the person holds a restricted drug manufacturer licence or restricted drug wholesaler licence for the drug.

Maximum penalty—60 penalty units.

Division 4 General

144 Records of transactions to be kept by licensee

(1) A licensee must, when selling a restricted drug to a person, give the person an invoice for the sale of the drug.

Maximum penalty—40 penalty units.

(2) The licensee must ensure the invoice—

(a) has a unique number; and

(b) states—

(i) the date of the sale; and

(ii) the name and address of the person to whom the restricted drug is sold; and

(c) describes the restricted drug and the quantity or volume of the drug sold.

Maximum penalty—40 penalty units.

(3) The licensee must keep an accurate record of the particulars contained in the invoice and the invoice number for each transaction.

Maximum penalty—40 penalty units.

(4) The licensee must also keep—

(a) an accurate record of each restricted drug given to the licensee's wholesale representative; and

(b) a copy of each return given to the licensee by the representative.

Maximum penalty—40 penalty units.

(4A) The licensee may keep a record to be kept under subsection (3) or (4) in the way the licensee considers appropriate, including, for example, in an electronic form.

(5) If the licensee has more than 1 licence and the licensee's records are kept on a computer at the licensee's central or main office, the licensee must keep records for each licence at the relevant business premises.

Maximum penalty—40 penalty units.

144A Certain losses etc. to be immediately reported to chief executive

If a licensee knows, or reasonably suspects that any of the following has been lost, misappropriated or stolen, the licensee must immediately give the chief executive a written notice about the loss, misappropriation or theft—

(a) a restricted drug that is an anabolic steroidal agent;

(b) a regulated restricted drug;

(c) S4 pseudoephedrine.

Maximum penalty—40 penalty units.

145 Persons to whom a licensee may give samples

A licensee must not give a sample of a restricted drug to a person other than—

(a) a dentist, doctor or veterinary surgeon; or

(b) the licensee's wholesale representative.

Maximum penalty—60 penalty units.

Part 2 Endorsements

Division 1 Preliminary

146 Endorsement needed for restricted drugs

(1) A person must not have in the person's possession a restricted drug unless the person is, under this regulation, endorsed to possess the drug.

Maximum penalty—60 penalty units.

(2) A person must not obtain a restricted drug unless the person is, under this regulation, endorsed to obtain the drug.

Maximum penalty—60 penalty units.

(3) A person must not dispense, issue, prescribe, purport to prescribe or sell a restricted drug unless the person is, under this regulation, endorsed to dispense, issue, prescribe or sell the drug.

Maximum penalty—60 penalty units.

(4) A person must not administer a restricted drug to someone else unless the person is, under this regulation, endorsed to administer the drug to the other person.

Maximum penalty—60 penalty units.

(5) Subsection (6) applies to a person who may, under an endorsement, administer, dispense, issue, obtain, possess, prescribe or sell a restricted drug, or write a written instruction, or give an oral instruction, for a restricted drug.

(6) The person must not destroy a restricted drug unless the person is endorsed to destroy the drug.

Maximum penalty—60 penalty units.

(7) A person must not write a written instruction or give an oral instruction for a restricted drug unless the person is endorsed to write the written instruction or give the oral instruction.

Maximum penalty—60 penalty points.

(8) Subsection (9) applies to a person who may only administer, destroy, dispense, issue, obtain, possess, prescribe or sell a restricted drug, or write a written instruction or give an oral instruction for a restricted drug, at a stated place or under stated conditions.

(9) The person must not administer, destroy, dispense, issue, obtain, possess, prescribe or sell the drug or write a written instruction or give an oral instruction for the drug at another place or in contravention of the conditions.

Maximum penalty—60 penalty units.

Division 2 Wholesale representatives

147 Wholesale representative licence

(1) The chief executive may grant a wholesale representative licence to a person only if the chief executive is satisfied the person—

(a) is employed by a licensee or an interstate licensee in a capacity requiring the person to possess restricted drugs for displaying or giving, as samples, to dentists, doctors, pharmacists or veterinary surgeons; and

(b) is a suitable person to be allowed to possess restricted drugs.

(2) In this section—

interstate licensee means a person who holds a licence, under a law of another State, equivalent to a restricted drug manufacturer licence or restricted drug wholesaler licence.

148 Wholesale representative may obtain restricted drugs

A wholesale representative is authorised to obtain a restricted drug from a restricted drug wholesaler and possess it for displaying or giving, as samples, to dentists, doctors, pharmacists or veterinary surgeons.

149 Storage etc. of samples

(1) When a wholesale representative is not, under section 148, displaying or giving restricted drugs to a person, the representative must keep the restricted drugs the representative possesses for the representative's employer locked in a secure place out of public view.

Maximum penalty—60 penalty units.

(2) If the representative gives, under section 148, a restricted drug to a dentist, doctor, pharmacist or veterinary surgeon (a ***practitioner***), the representative must—

(a) before giving the drug to the practitioner—

(i) personally give the practitioner an invoice that complies with subsection (4) for the drug; and

(ii) personally receive from the practitioner a copy of the invoice signed by the practitioner; and

(b) send a copy of the signed invoice to the representative's employer within 7 days after giving the drug to the practitioner.

Maximum penalty—40 penalty units.

(3) If the representative returns a restricted drug to the representative's employer, the representative must complete an invoice that complies with subsection (4) for the drug and

send a copy to the employer within 7 days after returning the drug.

Maximum penalty—40 penalty units.

(4) The invoice must—

(a) have a unique number; and

(b) state—

(i) the day the drug is given or returned; and

(ii) if the drug is given to a dentist, doctor, pharmacist or veterinary surgeon—the name and address of the person to whom the drug is given; and

(c) describe the drug and the amount of the drug given or returned.

(5) The representative must also keep a record of each restricted drug the representative—

(a) gives to a dentist, doctor, pharmacist or veterinary surgeon; or

(b) returns to the representative's employer.

Maximum penalty—40 penalty units.

150 Returns of transactions

(1) A wholesale representative must give the representative's employer a return of transactions in restricted drugs, that complies with subsection (2), at least every 7 days.

Maximum penalty—40 penalty units.

(2) The return must—

(a) state—

(i) the period of the return; and

(ii) the quantity or volume of each class of restricted drug in the representative's possession at the start and at the end of the period; and

(b) include the quantity of each class of restricted drugs—

(i) received by the representative; and

(ii) given as a sample, or returned by, the representative; and

(c) include the invoice number for the restricted drugs given as samples or returned.

(3) The wholesale representative must keep a copy of the return.

Maximum penalty—40 penalty units.

151 Loss or theft of samples to be reported

A wholesale representative must immediately report the loss or theft of a restricted drug to the representative's employer and the nearest police establishment.

Maximum penalty—60 penalty units.

152 Production of documents about restricted drugs previously in wholesale representative's possession

(1) An inspector may require a wholesale representative to produce for inspection by the inspector any documents in the representative's possession relating to restricted drugs, or a particular restricted drug, that has been in the person's possession—

(a) at any time within the year before the request; or

(b) at a stated time of not more than 1 year before the request.

(2) The wholesale representative must comply with the requirement, unless the wholesale representative has a reasonable excuse for not complying with it.

Maximum penalty—20 penalty units.

(3) The inspector may take extracts from, or make copies of, any documents produced by the wholesale representative.

(4) The inspector may require the wholesale representative to give the inspector reasonable help to exercise the inspector's power under subsection (3).

(5) The wholesale representative must comply with the requirement to give reasonable help, unless the person has a reasonable excuse for not complying with it.

Maximum penalty—20 penalty units.

153 Giving samples

(1) A wholesale representative is authorised, for the representative's employer, to give a sample of a restricted drug to a dentist, doctor, pharmacist or veterinary surgeon at a place other than the employer's business premises.

(2) The representative must not give a sample of a restricted drug to someone who is not a dentist, doctor, pharmacist or veterinary surgeon.

Maximum penalty—40 penalty units.

Division 3 Particular endorsements

155 Anaesthetic assistants and enrolled nurses

(1) Subsection (2) applies to the following persons—

(a) an anaesthetic assistant holding a qualification acceptable to the Australian and New Zealand College of Anaesthetists;

(b) an enrolled nurse.

(2) The anaesthetic assistant or enrolled nurse is authorised to possess, under the written instruction of a doctor administering anaesthesia, a restricted drug at a hospital when preparing for, and during, anaesthetic procedures.

(3) Subsection (4) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of

which will qualify the trainee to practise as an anaesthetic assistant.

(4) To the extent necessary to undergo the course of training, the trainee is authorised to possess a restricted drug, only if the trainee possesses the drug—

(a) at a hospital, when preparing for, or during, an anaesthetic procedure; and

(b) under the written instruction of a doctor administering anaesthesia; and

(c) under the direction and personal supervision of an anaesthetic assistant mentioned in subsection (1)(a).

157 Bases and outposts of Royal Flying Doctor Service

(1) The person in charge of a base of the Royal Flying Doctor Service of Australia is authorised to—

(a) obtain a restricted drug that a doctor employed by the service considers necessary; or

(b) possess a restricted drug obtained under paragraph (a).

(2) The person in charge of an outpost of the Royal Flying Doctor Service of Australia is authorised to—

(a) possess a restricted drug that a doctor employed by the service considers necessary; or

(b) administer or supply a restricted drug at the outpost under a doctor's oral or written instruction.

158 Carriers

To the extent necessary to transport and deliver a restricted drug, the following persons are authorised to possess a restricted drug—

(a) a person engaged to transport and deliver the restricted drug;

(b) an adult acting for a person engaged to transport and deliver the restricted drug.

158A Dental hygienists

(1) To the extent necessary to perform a dental hygienist's functions as a dental hygienist, a dental hygienist who has successfully completed a relevant course of training is authorised to administer the following restricted drugs—

(a) lignocaine;

(b) prilocaine;

(c) felypressin when in preparations containing prilocaine;

(d) mepivacaine;

(e) articaine.

(2) Subsection (3) applies to a person (a ***trainee***) who is undergoing a relevant course of training.

(3) To the extent necessary to undergo the relevant course of training, the trainee is authorised to administer the restricted drugs mentioned in subsection (1)(a) to (e).

(4) In this section—

relevant course of training means a course of training—

(a) for performing a dental hygienist's function involving the administration of a restricted drug mentioned in subsection (1)(a) to (e); and

(b) that is approved by the chief executive.

158B Dental therapists

(1) To the extent necessary to perform a dental therapist's functions as a dental therapist, a dental therapist is authorised to administer the following restricted drugs—

(a) demeclocycline and triamcinolone in combination for topical endodontic use;

(b) lignocaine;

(c) mercury (metallic) for human therapeutic use;

(d) prilocaine;

(e) felypressin when in preparations containing prilocaine;

(f) mepivacaine;

(g) articaine.

(2) Subsection (3) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise as a dental therapist.

(3) To the extent necessary to undergo the course of training, the trainee is authorised to administer the restricted drugs mentioned in subsection (1)(a) to (g).

158C Oral health therapists

(1) To the extent necessary to perform an oral health therapist's functions as an oral health therapist, an oral health therapist is authorised to administer the following restricted drugs—

(a) lignocaine;

(b) prilocaine;

(c) felypressin when in preparations containing prilocaine;

(d) mepivacaine;

(e) demeclocycline and triamcinolone in combination for topical endodontic use;

(f) mercury (metallic) for human therapeutic use;

(g) articaine.

(2) Subsection (3) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise as an oral health therapist.

(3) To the extent necessary to undergo the course of training, the trainee is authorised to administer the restricted drugs mentioned in subsection (1)(a) to (g).

159 Dentists

To the extent necessary to practise dentistry, a dentist is authorised to—

(a) obtain a restricted drug; or

(b) possess a restricted drug at the place where the dentist practises dentistry; or

(c) if the dentist is reasonably satisfied a person the dentist is treating needs a restricted drug for a therapeutic use as part of the person's dental treatment—

(i) administer the drug to the person while treating the person; or

(ii) supply the drug for the person's dental treatment; or

(d) prescribe a restricted drug for a person's dental treatment; or

(e) give someone who may administer or supply a restricted drug an oral or written instruction to administer or supply the drug.

160 Detention centres

(1) The manager of a detention centre is authorised to—

(a) obtain a restricted drug for use at the detention centre on a purchase order complying with part 5; or

(b) possess a restricted drug at the detention centre; or

(c) issue a restricted drug to an authorised person who may administer or supply it for the treatment of a child detained at the detention centre.

(2) A detention centre's director of nursing or medical superintendent, or the pharmacist in charge of a detention centre dispensary, is authorised to—

(a) obtain a restricted drug for use at the detention centre on a purchase order complying with part 5; or

(b) possess a restricted drug at the detention centre; or

(c) issue a restricted drug to an authorised person who may administer or supply it for the treatment of a child detained at the detention centre.

161 Doctors

(1) To the extent necessary to practise medicine, a doctor is authorised to—

(a) obtain a restricted drug; or

(b) possess a restricted drug at a place occupied by the doctor; or

(c) if the doctor is reasonably satisfied a person the doctor is treating needs a restricted drug for a therapeutic use as part of the person's medical treatment—

(i) administer the drug to the person; or

(ii) dispense or prescribe the drug to or for the person; or

(iii) supply the drug to or for the person; or

(iv) obtain the drug for the person; or

(d) give someone who may administer or supply a restricted drug an oral or written instruction to administer or supply the drug.

(2) A doctor is authorised to obtain, possess or use a restricted drug, other than a regulated restricted drug, for a genuine research or teaching purpose.

162 Enrolled nurses

(1) To the extent necessary to practise nursing, an enrolled nurse is authorised to—

(a) possess a restricted drug at the place where the person practises nursing; or

(b) administer a restricted drug, other than an anaesthetic—

(i) on the oral or written instruction of a dentist, doctor, nurse practitioner or physician's assistant; and

(ii) under the supervision of a dentist, doctor, midwife or registered nurse; or

(c) administer a restricted drug to a person for whom it has been dispensed and under the supervision of a dentist, doctor, midwife or registered nurse; or

(d) administer a restricted drug on the written instruction of a surgical podiatrist.

(2) Subsection (1) does not apply if the registration of the enrolled nurse under the Health Practitioner Regulation National Law is subject to a condition that the enrolled nurse is not qualified to administer restricted drugs.

(3) Subsection (4) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise as an enrolled nurse.

(4) To the extent necessary to undergo the course of training, the trainee is authorised to—

(a) possess a restricted drug under the direction of a registered nurse at the place where the registered nurse practises nursing; or

(b) administer a restricted drug, other than an anaesthetic—

(i) on the oral or written instruction of a dentist, doctor, nurse practitioner or physician's assistant; and

(ii) under the personal supervision of a dentist, doctor, midwife or registered nurse; or

(c) administer a restricted drug to a person for whom it has been dispensed and under the personal supervision of a dentist, doctor, midwife or registered nurse.

163 Environmental health officers

To the extent necessary for conducting an immunisation program, an environmental health officer employed by a local government in the program is authorised to possess a restricted drug that is a vaccine for human use.

163AA First aid providers

(1) This section applies to a person who holds both of the following current qualifications granted by a registered training organisation—

(a) a certificate for the provision of first aid;

(b) a certificate in the use of methoxyflurane.

(2) The person is authorised to—

(a) possess methoxyflurane; or

(b) administer methoxyflurane on the oral instruction of a doctor; or

(c) administer methoxyflurane on the written instruction, other than on a standing order, of a doctor.

(3) In this section—

registered training organisation see *Vocational Education, Training and Employment Act 2000*, section 14.

163A Hospital pharmaceutical assistants

To the extent necessary to perform the person's pharmaceutical imprest duties in a hospital, a hospital

pharmaceutical assistant acting under the supervision of a pharmacist, is authorised to—

(a) possess a restricted drug at the hospital; or

(b) issue a restricted drug to an authorised person for treatment of the hospital's patients.

164 Hospitals

(1) The persons authorised to do an authorised thing at a hospital are—

(a) the medical superintendent of the hospital; and

(b) a doctor nominated by the medical superintendent; and

(c) if there is a pharmacist in charge of the hospital's dispensary—

(i) the pharmacist in charge; and

(ii) a pharmacist nominated in writing by the pharmacist in charge.

(2) Subsection (3) applies if none of the persons mentioned in subsection (1) are present at the hospital.

(3) The director of nursing of the hospital is authorised to do an authorised thing.

(4) If subsection (2) applies and the director of nursing is not present at the hospital, the registered nurse in charge of the hospital is authorised to do an authorised thing.

(5) An employee of a hospital who is an adult (an ***adult employee***) may, to the extent necessary to carry out the employee's duties at the hospital, and only under a medical gas protocol—

(a) possess a restricted medical gas; or

(b) issue a restricted medical gas for treatment of the hospital's patients.

(6) In this section—

do an authorised thing, at a hospital, means—

(a) obtain a restricted drug for use at the hospital; or

(b) possess a restricted drug at the hospital; or

(c) issue a restricted drug for treatment of the hospital's patients.

medical gas protocol means a certified document published by the department stating—

(a) the qualifications an adult employee must have to possess or issue a restricted medical gas; and

(b) the circumstances in which, and the conditions under which, an adult employee may possess or issue a restricted medical gas.

restricted medical gas means a gas that is a restricted drug ordinarily used for a medical purpose in a hospital.

164A Indigenous health workers

An indigenous health worker, while practising in an Aboriginal or Torres Strait Islander community in an isolated practice area in a specified health service district, is authorised—

(a) to obtain and possess a restricted drug; or

(b) to administer or supply a restricted drug, under a drug therapy protocol, on the oral or written instruction of a doctor, nurse practitioner or physician's assistant.

165 Inspectors

To the extent necessary to perform an inspector's official duties, an inspector is authorised to—

(a) obtain a restricted drug; or

(b) possess a restricted drug; or

(c) in an emergency or disaster situation—destroy a restricted drug.

166 Manufacturer or wholesaler of restricted drugs

(1) A restricted drug manufacturer is authorised to—

(a) obtain a restricted drug (an ***ingredient drug***) for manufacturing a different restricted drug stated in the manufacturer's licence; or

(b) possess an ingredient drug at the manufacturer's business premises.

(2) A restricted drug wholesaler is authorised to—

(a) obtain a restricted drug; or

(b) possess a restricted drug at the wholesaler's business premises.

(3) An adult employee of a restricted drug manufacturer or wholesaler is authorised to possess a restricted drug at the manufacturer's or wholesaler's business premises if—

(a) the drug is packed in the way required under chapter 1, part 4; and

(b) the employee is acting within the scope of the employment; and

(c) the possession is reasonably necessary for the employee to deliver the drug to an authorised person under a lawful transaction between the employer and the authorised person.

(4) A restricted drug manufacturer is authorised to—

(a) obtain a controlled drug for manufacturing a restricted drug stated in the manufacturer's licence; or

(b) possess a controlled drug obtained under paragraph (a) at the manufacturer's business premises.

167 Midwives

(1) To the extent necessary to practise midwifery, a midwife is authorised to—

(a) obtain a restricted drug; and

(b) possess a restricted drug at the place where the person practises midwifery; and

(c) administer a restricted drug to the person for whom it has been dispensed under the instructions stated by the dispenser; and

(d) administer or supply a restricted drug—

(i) on the oral or written instruction of a doctor, nurse practitioner or physician's assistant; or

(ii) under a drug therapy protocol.

(2) Despite subsection (1), to the extent necessary to practise midwifery, a midwife is authorised to—

(a) possess a nitrous oxide mixture at any place; or

(b) administer a nitrous oxide mixture to a woman as an analgesic during childbirth.

(3) In this section—

childbirth means the process of labour and delivery beginning with uterine contractions and ending with the expulsion of the placenta and membranes from the woman giving birth.

nitrous oxide mixture means a substance containing a mixture of nitrous oxide and oxygen in which the concentration of nitrous oxide is not more than 70%.

167A Eligible midwives

(1) To the extent necessary to practise midwifery, an endorsed eligible midwife is authorised to prescribe a restricted drug.

(2) In this section—

endorsed eligible midwife means a midwife whose registration is endorsed under the Health Practitioner Regulation National Law (Queensland), section 94 as being qualified to prescribe scheduled medicines required for midwifery practice.

168 Mine sites etc.

(1) This section applies to a person in charge on the site of any of the following—

(a) a mine;

(b) a petroleum well;

(c) a petroleum field production facility;

(d) a petroleum pipeline transport facility.

(2) A person to whom this section applies is authorised to—

(a) obtain and possess a substance containing a mixture of equal volumes of nitrous oxide and oxygen (a ***mixture***); or

(b) give a mixture to anyone who may possess and use it under subsection (3).

(3) A person is authorised to possess the mixture and use it to maintain analgesia in someone who needs treatment at a place mentioned in subsection (1) if the person—

(a) has a current first aid certificate granted by an entity authorised under the *Ambulance Service Act 1991* to teach first aid; and

(b) has received satisfactory training in the use of the mixture; and

(c) has the role of performing necessary first aid duties at a place mentioned in subsection (1).

169 Nursing homes

(1) This section applies to the following persons—

(a) a nursing home's director of nursing or medical superintendent;

(b) the registered nurse in charge of a nursing home;

(c) the pharmacist in charge of a nursing home's dispensary.

(2) A person to whom this section applies is authorised to—

(a) obtain a restricted drug for use at the nursing home on a purchase order complying with part 5; or

(b) possess a restricted drug at the nursing home; or

(c) issue a restricted drug to an authorised person who may administer or supply it for the treatment of a resident of the nursing home.

170 Optometrists

(1) To the extent necessary to practise optometry, an optometrist who has successfully completed a certified course of training is authorised to—

(a) obtain a substance containing—

(i) 1% or less of cyclopentolate; or

(ii) 0.4% or less of oxybuprocaine; or

(iii) 2% or less of pilocarpine; or

(iv) 0.5% or less of proxymetacaine; or

(v) 1% or less of tropicamide; or

(vi) 4% or less of lignocaine; or

(b) administer a substance obtained under paragraph (a); or

(c) possess a substance obtained under paragraph (a) at the place where the optometrist practises optometry.

(2) To the extent necessary to practise optometry, an optometrist who has the prescribed qualifications is authorised to—

(a) obtain a registered restricted drug; or

(b) possess a registered restricted drug at the place where the optometrist practises optometry; or

(c) if the optometrist is reasonably satisfied a person needs a registered restricted drug for a therapeutic use as part of the person's ocular care or treatment, do any of the following under an ocular therapeutics protocol—

(i) administer or supply the drug to the person;

(ii) prescribe the drug for the person.

(3) In this section—

prescribed qualifications means the qualifications required under an ocular therapeutics protocol to administer, supply or prescribe a restricted drug.

registered restricted drug means a restricted drug included in, or contained in a product included in, the Australian Register of Therapeutic Goods under the *Therapeutic Goods Act 1989* (Cwlth), section 9A.

170A Orthopists

(1) To the extent necessary to practise orthoptics, an orthoptist who has the relevant qualifications is authorised to—

(a) obtain a restricted drug; and

(b) possess a restricted drug; and

(c) administer a restricted drug under a drug therapy protocol.

(2) In this section—

relevant qualifications means the qualifications required under a drug therapy protocol to administer a restricted drug.

171 Pharmacists

(1) To the extent necessary to practise pharmacy, a pharmacist is authorised to—

(a) obtain a restricted drug; or

(b) dispense a restricted drug; or

(c) sell a restricted drug (other than by wholesale) on a purchase order; or

(d) possess a restricted drug at a dispensary or institution; or

(e) for a pharmacist practising pharmacy at a public sector hospital—supply a restricted drug, on the oral or written instruction of a doctor, nurse practitioner or physician's assistant, to a person being discharged from the hospital or an outpatient of the hospital; or

(f) destroy, or otherwise dispose of, a restricted drug in a way that poses no risk, or only a negligible risk, of a person gaining access to the drug.

(2) A trainee pharmacist is authorised to do, under a pharmacist's direction and personal supervision, anything a pharmacist is authorised to do under subsection (1).

(3) During a declared public health emergency in relation to an infectious medical condition, a pharmacist is authorised to administer or supply oseltamivir or zanamivir under a drug therapy protocol.

(4) A pharmacist is authorised to obtain, possess or use a restricted drug, other than a regulated restricted drug, for a genuine research or teaching purpose.

171A Physician's assistants

To the extent necessary to perform duties under a practice plan developed for a physician's assistant, the physician's assistant acting under the supervision of his or her supervising medical officer is authorised to—

(a) possess a restricted drug at the place where the physician's assistant practices; or

(b) administer, prescribe or supply a restricted drug; or

(c) give someone who may administer or supply a restricted drug an oral or written instruction to administer or supply the drug.

172 Podiatrists

To the extent necessary to practise podiatry, a podiatrist is authorised to—

(a) obtain the following restricted drugs, other than when combined with adrenalin or another vasoconstrictor drug—

(i) bupivacaine of a strength of 0.5% or less;

(ii) levobupivacaine of a strength of 0.5% or less;

(iii) lignocaine of a strength of 2% or less;

(iv) prilocaine of a strength of 2% or less; or

(b) administer a restricted drug mentioned in paragraph (a), other than when used together with adrenalin or another vasoconstrictor drug; or

(c) possess a restricted drug obtained under paragraph (a) at the place where the podiatrist practises podiatry.

172A Surgical podiatrists

To the extent necessary to practise podiatry, a surgical podiatrist is authorised to—

(a) obtain—

(i) dexamethasone, for local injection only; or

(ii) ropivacaine of a strength of 1% or less; or

(b) administer a restricted drug mentioned in paragraph (a); or

(c) possess a restricted drug mentioned in paragraph (a) at the place where the podiatrist practises podiatry; or

(d) prescribe a restricted drug mentioned in appendix 2B, part 1, column 1, on the conditions mentioned opposite the drug in columns 2 and 3; or

(e) give someone who may administer a restricted drug mentioned in appendix 2B, part 1, column 1, a written instruction to administer the drug on the conditions mentioned opposite the drug in columns 2 and 3.

173 Prisons

(1) The general manager of a prison is authorised to—

(a) obtain a restricted drug for use at the prison on a purchase order complying with part 5; or

(b) possess a restricted drug at the prison; or

(c) issue a restricted drug to an authorised person who may administer or supply it for the treatment of a prisoner at the prison.

(2) A prison's director of nursing or medical superintendent, or the pharmacist in charge of a prison's dispensary, is authorised to—

(a) obtain a restricted drug for use at the prison on a purchase order complying with part 5; or

(b) possess a restricted drug at the prison; or

(c) issue a restricted drug to an authorised person who may administer or supply it for the treatment of a prisoner at the prison.

174 Queensland Ambulance Service

(1) To the extent necessary for performing ambulance duties for the Queensland Ambulance Service, an ambulance officer mentioned in appendix 2A, part 2, column 2 is authorised to

obtain, possess or administer, under a clinical practice protocol approved by the Queensland Ambulance Service, a restricted drug set out opposite in appendix 2A, part 2, column 1.

(2) However, an ambulance officer who is a paramedic 3 (ECP) may administer a restricted drug mentioned in appendix 2A, part 3 only if the officer—

(a) is working in an ECP area; and

(b) is acting on a doctor's oral or written instruction to administer the drug to a person.

(2A) To the extent necessary to perform ambulance duties for the Queensland Ambulance Service, an isolated practice area paramedic at an isolated practice area (paramedics) is authorised to—

(a) obtain a restricted drug; or

(b) possess a restricted drug at a place in the isolated practice area (paramedics); or

(c) administer or supply a restricted drug to a person—

(i) on the oral or written instruction of a doctor, nurse practitioner or physician's assistant; or

(ii) under a drug therapy protocol.

(3) An ambulance officer who is undergoing a certified course of training upon the successful completion of which the officer would be authorised to obtain, possess or administer a restricted drug mentioned in appendix 2A, part 2, column 1, is authorised to administer the restricted drug to a person under the supervision of someone who—

(a) has completed the training; and

(b) is—

(i) acting under a clinical practice protocol approved by the Queensland Ambulance Service; and

(ii) working in an ECP area and acting on a doctor's oral or written instruction if required by subsection (2).

(4) During a declared public health emergency in relation to an infectious medical condition, an ambulance officer who is a paramedic 1, 2, 3, 3 (ECP) or 4 is authorised to obtain, possess, administer or supply the following under a drug therapy protocol—

(a) oseltamivir or zanamivir;

(b) a vaccine for the infectious medical condition.

174A Queensland Ambulance Service—first responders

(1) To the extent necessary for performing ambulance duties for the Queensland Ambulance Service as a first responder, a first responder is authorised to possess or administer methoxyflurane under a clinical practice protocol approved by the Queensland Ambulance Service.

(2) In this section—

first responder means a person who—

(a) is appointed as an honorary ambulance officer under the *Ambulance Service Act 1991*, section 14; and

(b) is classified as a QAS First Responder by the Queensland Ambulance Service.

174B St John Ambulance Australia—Queensland

(1) The State Medical Officer of St John Ambulance Australia—Queensland, or the State Medical Officer's delegate, is authorised to—

(a) obtain methoxyflurane for use by a St John Ambulance member; or

(b) possess methoxyflurane for use by a St John Ambulance member; or

(c) issue methoxyflurane to a St John Ambulance member.

(2) To the extent necessary for performing ambulance duties for St John Ambulance Australia—Queensland, a St John Ambulance member is authorised to possess or administer methoxyflurane under a clinical practice guideline approved by St John Ambulance Australia—Queensland.

(3) In this section—

St John Ambulance member means a person who—

(a) is a registered member of St John Ambulance Australia—Queensland; and

(b) holds both of the following current qualifications—

(i) Certificate II in Emergency Medical Service First Response;

(ii) Course in Analgesic Administration (Methoxyflurane).

175 Registered nurses

(1) To the extent necessary to practise nursing, a registered nurse is authorised to—

(a) possess a restricted drug at a place where he or she practises nursing; or

(b) administer a restricted drug—

(i) on the oral or written instruction of a dentist, doctor, nurse practitioner or physician's assistant; or

(ii) on the written instruction of a surgical podiatrist; or

(iii) to the person for whom it has been dispensed under the instructions stated by the dispenser.

(2) To the extent necessary to practise nursing in a rural hospital or an isolated practice area, a rural and isolated practice endorsed nurse is authorised to—

(a) obtain a restricted drug; or

(b) supply a restricted drug to a person—

(i) on the oral or written instruction of a doctor, nurse practitioner or physician's assistant; or

(ii) under a drug therapy protocol; or

(c) administer a restricted drug to a person under a drug therapy protocol.

(2A) To the extent necessary to practise nursing at a hospital within an isolated practice area, a registered nurse is authorised to supply a restricted drug, on the oral or written instruction of a doctor, nurse practitioner or physician's assistant, to a person being discharged from the hospital or to an outpatient of the hospital.

(3) To the extent necessary to practise nursing under an immunisation program, an immunisation program nurse is authorised to—

(a) obtain a vaccine or other restricted drug; or

(b) administer a vaccine or other restricted drug under a drug therapy protocol.

(4) To the extent necessary to practise nursing under a sexual health program, a sexual health program nurse is authorised to administer or supply a restricted drug under a drug therapy protocol.

(4A) During a declared public health emergency in relation to an infectious medical condition, a registered nurse is authorised to administer or supply oseltamivir or zanamivir under a drug therapy protocol.

(5) To the extent necessary to practise nursing, a nurse practitioner is authorised to—

(a) obtain a restricted drug; or

(b) under a drug therapy protocol—

(i) administer or supply a restricted drug; or

(ii) give a nurse, midwife or indigenous health worker an oral or written instruction to administer a restricted drug; or

(iii) give a rural and isolated practice endorsed nurse an oral or written instruction to administer or supply a restricted drug; or

(iv) for subsection (2A), give a registered nurse an oral or written instruction to supply a restricted drug; or

(v) give a pharmacist an oral or written instruction to supply a restricted drug; or

(vi) give an isolated practice area paramedic an oral or written instruction to administer or supply a restricted drug; or

(vii) prescribe a restricted drug.

176 Certain registered nurses at rural hospitals

(1) To the extent necessary to practise nursing at a rural hospital, the following persons are authorised to supply a restricted drug, on the oral or written instruction of a dentist, doctor, nurse practitioner or physician's assistant, to a person being discharged from the hospital or an outpatient of the hospital—

(a) the hospital's director of nursing;

(b) a registered nurse nominated by the hospital's director of nursing.

(2) However, subsection (1) applies only if—

(a) the hospital does not employ a pharmacist; or

(b) if the hospital employs a pharmacist—the pharmacist is absent from the hospital at the time the restricted drug is supplied.

178 Ship's master

(1) The master of a ship in the State is authorised to obtain a restricted drug for use on the ship, or possess a restricted drug on the ship, to the extent necessary to comply with the *Navigation Act 1912* (Cwlth) or the *Transport Operations (Marine Safety) Act 1994*.

(2) Otherwise, the master of a ship in the State is authorised to obtain, possess or administer a restricted drug, only if——

(a) for obtaining a restricted drug—

(i) the purchase order for the drug is signed by a doctor; and

(ii) the drug is obtained for use on the ship; or

(b) for possessing a restricted drug—the drug is possessed for use on the ship; or

(c) for administering a restricted drug—the drug is administered on the ship—

(i) for the treatment of a person in an emergency; and

(ii) on a doctor's oral or written instruction.

179 State analysts

(1) To the extent necessary to perform a State analyst's official duties, a State analyst is authorised to—

(a) obtain or manufacture a restricted drug; or

(b) possess a restricted drug at the place where the analyst is performing official duties; or

(c) use a restricted drug for official purposes or destroy it.

(2) A trainee State analyst under the personal supervision of a State analyst is authorised to—

(a) obtain or manufacture a restricted drug; or

(b) possess a restricted drug at the place where the trainee is performing official duties; or

(c) use a restricted drug for official purposes or destroy it.

179AAA State forensic and scientific service facilities

(1) To the extent necessary to perform the person's official duties, the person in charge of a forensic and scientific facility operated by the State is authorised to—

(a) possess a restricted drug; or

(b) destroy a restricted drug.

(2) The person in charge may delegate the authority to an appropriately qualified officer of the department.

(3) In this section—

appropriately qualified, for an officer of the department, includes having the qualifications, experience or standing appropriate to the exercise of the authority.

179AA Trainees in certain occupations

(1) This section applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to carry out a relevant occupation.

(2) To the extent necessary to undergo the course of training, the trainee is authorised to—

(a) possess a restricted drug under the direction of an authorised person carrying out the relevant occupation; or

(b) administer a restricted drug under the personal supervision of an authorised person carrying out the relevant occupation.

(3) However, a trainee may only possess or administer a restricted drug under subsection (2), if—

(a) the authorised person is authorised under this regulation to possess or administer the drug; and

(b) the trainee possesses or administers the drug under the conditions (if any) that would apply to the possession or administration of the drug by the authorised person.

(4) In this section—

relevant occupation means an occupation as a dentist, doctor, indigenous health worker, midwife, optometrist, podiatrist, registered nurse or veterinary surgeon.

179A Universities

(1) To the extent necessary for use in research or teaching at a university, the vice-chancellor of the university is authorised to—

(a) obtain a restricted drug; or

(b) possess a restricted drug at the university; or

(c) give a restricted drug to a member of the faculty or staff of the university.

(2) The vice-chancellor may delegate the authority to the bursar or another appropriately qualified officer of the university.

(3) In this section—

appropriately qualified, for an officer of a university, includes having the qualifications, experience or standing appropriate to the exercise of the power.

179B Veterinary nurses

(1) To the extent necessary to practise veterinary nursing, a veterinary nurse who has successfully completed a certified course of training relating to the use of restricted drugs with animals is authorised to—

(a) possess a restricted drug at the place where the person practises veterinary nursing; or

(b) administer a restricted drug to an animal—

(i) under the supervision of a veterinary surgeon; or

(ii) if the restricted drug is a dispensed medicine, under the directions on the label attached to the dispensed medicine's container.

(2) Subsection (3) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise as a veterinary nurse.

(3) To the extent necessary to undergo the course of training, the trainee is authorised to—

(a) possess a restricted drug under the direction of a veterinary nurse mentioned in subsection (1) at the place where the veterinary nurse practises veterinary nursing; and

(b) administer a restricted drug to an animal—

(i) under the personal supervision of a veterinary surgeon; or

(ii) if the restricted drug is a dispensed medicine, under the directions on the label attached to the dispensed medicine's container.

180 Veterinary surgeons

(1) To the extent necessary to practise veterinary medicine, a veterinary surgeon is authorised to—

(a) obtain a restricted drug; or

(b) possess a restricted drug at a place occupied by the veterinary surgeon; or

(c) if the veterinary surgeon is reasonably satisfied that an animal the veterinary surgeon is treating needs a restricted drug for a therapeutic use as part of the animal's veterinary treatment—

(i) administer the drug to the animal; or

(ii) dispense or prescribe the drug for the animal; or

(iii) obtain the drug for the animal; or

(iv) sell a restricted drug to a person for the person's animal.

(2) A veterinary surgeon is authorised to obtain, possess or use a restricted drug, other than a regulated restricted drug, for a genuine research or teaching purpose.

181 Watch house keepers etc.

To the extent necessary for ensuring a person held at a watch house or police establishment receives a restricted drug lawfully prescribed or supplied for the person as a dispensed medicine, the watch house keeper, or a person performing the duties of watch house keeper at a police establishment, is authorised to—

(a) possess the restricted drug at the watch house or police establishment; or

(b) supply the restricted drug to the person for whom it was dispensed or supplied under the directions stated on the label attached to the medicine's container.

Division 4 General

183 When endorsement is not needed

(1) A person does not need an endorsement under this regulation merely to deliver a restricted drug to a person for whom it has been dispensed, or the person's agent.

(2) Also, a person (a ***carer***) does not need an endorsement under this regulation to help another person (an ***assisted person***) to take a restricted drug that has been supplied for the assisted person as a dispensed medicine, if—

(a) the assisted person asks for the carer's help to take the dispensed medicine; and

(b) the carer helps the assisted person to take the dispensed medicine under the directions on the label attached to the dispensed medicine's container.

(3) Further, a person does not need an endorsement to administer, dispense, issue, manufacture, obtain, possess, prescribe, supply or use a restricted drug for a clinical trial approved by—

(a) the Therapeutic Goods Administration; or

(b) a human research ethics committee registered by the Australian Health Ethics Committee established under the *National Health and Medical Research Council Act 1992* (Cwlth).

Part 3 Regulated restricted drugs

185 Dinoprost and dinoprostone

A person must not dispense, prescribe, sell or use dinoprost or dinoprostone for human therapeutic use unless the person—

(a) dispenses, prescribes, sells or uses dinoprost or dinoprostone for human therapeutic use under an approval; or

(b) is a specialist health practitioner in the specialty of obstetrics and gynaecology; or

(c) is a registrar in obstetrics and gynaecology working directly under the supervision of a specialist health practitioner in the specialty of obstetrics and gynaecology.

Maximum penalty—80 penalty units.

186 Acitretin, etretinate, isotretinoin and tretinoin

(1) A person must not dispense, obtain, prescribe, sell or use acitretin or etretinate for human therapeutic use or isotretinoin or tretinoin for human oral therapeutic use unless the person—

(a) dispenses, obtains, prescribes, sells or uses the acitretin, etretinate, isotretinoin or tretinoin under an approval; or

(b) is a specialist health practitioner in the specialty of dermatology or a specialist physician; or

(c) is either—

(i) a registrar in dermatology working directly under the supervision of a specialist health practitioner in the specialty of dermatology; or

(ii) a registrar training to be a specialist physician working directly under the supervision of a specialist physician.

Maximum penalty—80 penalty units.

(2) The chief executive may grant a person an approval to dispense, obtain, prescribe, sell or use acitretin, etretinate, isotretinoin or tretinoin only if the chief executive is reasonably satisfied the person is a suitable person to hold the approval and the person—

(a) will obtain or use acitretin, etretinate, isotretinoin or tretinoin for genuine research purposes or a clinical trial approved by—

(i) the Therapeutic Goods Administration; or

(ii) a human research ethics committee registered by the Australian Health Ethics Committee established under the *National Health and Medical Research Council Act 1992* (Cwlth); or

(b) is a doctor who will dispense, prescribe, sell or use acitretin, etretinate, isotretinoin or tretinoin under the supervision of a specialist health practitioner in the

specialty of dermatology or a specialist physician to or for a patient who—

(i) has recently been assessed by a specialist health practitioner in the specialty of dermatology or a specialist physician as having a therapeutic need for acitretin, etretinate, isotretinoin or tretinoin; and

(ii) lives at a remote place where the patient can not access the services of the specialist health practitioner or specialist physician in person.

(3) Despite subsection (1)—

(a) a person for whose therapeutic use acitretin, etretinate or tretinoin is dispensed, prescribed or sold under subsection (1) may obtain or use acitretin, etretinate or tretinoin; or

(b) a person for whose oral therapeutic use isotretinoin is dispensed, prescribed or sold under subsection (1) may obtain or use isotretinoin.

186A Bexarotene

A person must not dispense, prescribe, sell or use bexarotene for human therapeutic use unless the person—

(a) dispenses, prescribes, sells or uses the bexarotene for human therapeutic use under an approval; or

(b) is a specialist health practitioner in the specialty of haematology or medical oncology; or

(c) is a registrar in the specialty of haematology or medical oncology working directly under the supervision of a specialist health practitioner in the specialty of haematology or medical oncology.

Maximum penalty—80 penalty units.

186B Thalidomide

(1) A person must not dispense, prescribe, sell or use thalidomide for human therapeutic use unless the person—

(a) dispenses, prescribes, sells or uses the thalidomide for human therapeutic use under an approval; or

(b) is a specialist health practitioner in a prescribed specialty or a specialist physician; or

(c) is either—

(i) a registrar in a prescribed specialty working directly under the supervision of a specialist health practitioner in the prescribed specialty; or

(ii) a registrar training to be a specialist physician working directly under the supervision of a specialist physician.

Maximum penalty—80 penalty units.

(2) In this section—

prescribed specialty means the specialty of haematology, dermatology, infectious diseases or medical oncology.

187 Clomiphene, cyclofenil, luteinising hormone and urofollitrophin

(1) A person must not dispense, prescribe, sell or use a section 187 drug for human therapeutic use unless the person—

(a) dispenses, prescribes, sells or uses the section 187 drug under an approval; or

(b) is a specialist health practitioner in the specialty of obstetrics and gynaecology or a specialist physician; or

(c) is either—

(i) a registrar in the specialty of obstetrics and gynaecology working directly under the supervision of a specialist health practitioner in the specialty of obstetrics and gynaecology; or

(ii) a registrar training to be a specialist physician working directly under the supervision of a specialist physician.

Maximum penalty—80 penalty units.

(2) In this section—

section 187 drug means any of the following regulated restricted drugs—

(a) clomiphene, cyclofenil or another substance specifically prepared to stimulate ovulation;

(b) luteinising hormone;

(c) urofollitrophin (human follicle stimulating hormone).

188 Clozapine

A person must not dispense, prescribe, sell or use clozapine for human therapeutic use unless the person—

(a) dispenses, prescribes, sells or uses the clozapine for human therapeutic use under an approval; or

(b) is a specialist health practitioner in the specialty of psychiatry; or

(c) is a registrar in psychiatry working directly under the supervision of a specialist health practitioner in the specialty of psychiatry.

Maximum penalty—80 penalty units.

188A Bosentan

A person must not dispense, prescribe, sell or use bosentan for human therapeutic use unless the person—

(a) dispenses, prescribes, sells or uses the bosentan for human therapeutic use under an approval; or

(b) is a specialist health practitioner in the specialty of cardiology, rheumatology or respiratory and sleep medicine; or

(c) is a registrar in cardiology, rheumatology or respiratory and sleep medicine working directly under the supervision of a specialist health practitioner in the specialty of cardiology, rheumatology or respiratory and sleep medicine.

Maximum penalty—80 penalty units.

188B Teriparatide

A person must not dispense, prescribe, sell or use teriparatide for human therapeutic use unless the person—

(a) dispenses, prescribes, sells or uses the teriparatide for human therapeutic use under an approval; or

(b) is a specialist health practitioner in the specialty of endocrinology, geriatric medicine or rheumatology or a specialist physician; or

(c) is either—

(i) a registrar in endocrinology, geriatric medicine or rheumatology working directly under the supervision of a specialist health practitioner in the specialty of endocrinology, geriatric medicine or rheumatology; or

(ii) a registrar training to be a specialist physician working directly under the supervision of a specialist physician; or

(d) is a doctor who dispenses, prescribes, sells or uses teriparatide under the supervision of a specialist health practitioner in the specialty of endocrinology, geriatric medicine or rheumatology or a specialist physician to or for a patient who—

(i) has recently been assessed by a specialist in endocrinology, geriatrics, internal medicine or

rheumatology as having a therapeutic need for teriparatide; and

(ii) lives at a remote place where the patient can not access the services of the specialist health practitioner or specialist physician in person.

Maximum penalty—80 penalty units.

189 Exemptions for some acts involving certain regulated restricted drugs

(1) This part does not prevent—

(a) a person dispensing a section 189 drug on a lawful prescription written by someone who may prescribe the drug; or

(b) a restricted drug manufacturer or wholesaler selling a section 189 drug; or

(c) a person under medical treatment who is lawfully supplied with a section 189 drug using the drug in the way directed.

(2) Also, this part does not prevent either of the following from being carried out under the supervision of a relevant specialist or registrar under this part—

(a) a doctor or nurse practitioner administering, or giving an oral or written instruction to administer, a section 189 drug to a person who is an inpatient in a hospital (the ***inpatient***);

(b) a nurse administering a section 189 drug to an inpatient in a hospital under an oral or written instruction mentioned in paragraph (a).

(3) Subsection (2) applies only if the inpatient was receiving treatment with the section 189 drug immediately before becoming an inpatient in the hospital.

(4) In this section—

section 189 drug means any of the following regulated restricted drugs—

(a) acitretin;

(b) etretinate;

(c) isotretinoin;

(d) thalidomide;

(e) dinoprost;

(f) dinoprostone;

(g) urofollitrophin (human follicle stimulating hormone);

(h) luteinising hormone;

(i) clomiphene, cyclofenil or another substance specifically prepared to stimulate ovulation;

(j) clozapine;

(k) tretinoin;

(l) bosentan;

(m) bexarotene;

(n) teriparatide.

Part 4 Prescribing and dispensing restricted drugs

Division 1 Prescribing restricted drugs

190 Prescribing restricted drugs

(1) A prescriber must not prescribe a restricted drug unless the prescription is made in a way that complies with this section.

Maximum penalty—60 penalty units.

(2) The following particulars must appear on the front of a paper prescription or in an electronic prescription—

(a) the prescriber's name, professional qualifications and address;

(b) the date it is made;

(c) if the restricted drug is for human use—the name and address of the person for whose use it is prescribed;

(d) if the restricted drug is for an animal—the name and address of the animal's owner;

(e) the description of the restricted drug or the name of the preparation and the quantity or volume (in figures) of the drug or preparation;

(f) adequate directions about the use of the restricted drug;

(g) the dose to be taken or administered;

(h) if a prescriber, other than a veterinary surgeon, prescribes a dose that is more than the official dose—

(i) for a paper prescription—a direction, to dispense the higher dose, that is underlined and initialled by the doctor, nurse practitioner or physician's assistant; or

(ii) for an electronic prescription—an indication that the prescription is for a dose that is more than the official dose;

Editor's note—

Under section 5 of the Act—

official dose, when used with reference to any drug or other article, means the maximum dose (if any) stated in the British pharmacopoeia.

(i) if a prescriber intends that the restricted drug be dispensed more than once—a direction stating the number of times (after the first) the drug may be dispensed;

(j) if the restricted drug is a regulated restricted drug—'Approved';

(k) if the prescriber is a veterinary surgeon—'For animal treatment only';

(l) if the prescriber is a dentist—'For dental treatment only';

(m) if the prescriber is an optometrist—'For ocular treatment only';

(n) if the prescriber is a surgical podiatrist—'For treatment of foot conditions only'.

(3) All particulars on a paper prescription (other than the prescriber's name, professional qualifications and address) must be handwritten.

(4) However, a paper prescription may be generated—

(a) by a computer if the way the prescription is generated complies with appendix 4 of this regulation; or

(b) in another certified way.

(5) The prescriber must sign a paper prescription or electronically sign an electronic prescription.

(5A) Despite subsection (5), the prescriber may use another certified way to indicate the prescriber's approval of the particulars in the prescription, if the prescription—

(a) is generated by a computer; and

(b) is to be dispensed at a pharmacy operated by the State.

(6) If the prescriber amends a prescription—

(a) for a paper prescription—the prescriber must initial and date the amendment; or

(b) for an electronic prescription—the prescriber must make the amendment in a certified way.

191 Restrictions on making prescriptions

(1) A prescriber must not make an entry in a prescription in code unless the code is certified.

Maximum penalty—20 penalty units.

(2) A veterinary surgeon must not make a repeat prescription for a restricted drug authorising a dispenser to sell the drug under the prescription more than twice.

Maximum penalty—40 penalty units.

(3) A dentist must not make a prescription for more than the official dose.

Maximum penalty—40 penalty units.

192 Oral prescription

(1) A prescriber may give a dispenser an oral prescription for a restricted drug the prescriber is endorsed to prescribe.

(2) Within 24 hours after giving the oral prescription, the prescriber must ensure a paper prescription for the drug is sent by facsimile transmission to the dispenser.

Maximum penalty—20 penalty units.

(3) Within 7 days after giving the oral prescription, the prescriber must send a paper prescription by post or by hand or send an electronic prescription for the drug to the dispenser.

Maximum penalty—40 penalty units.

(4) If the dispenser does not receive a paper or electronic prescription for the drug from the prescriber within 14 days after being given the oral prescription, the dispenser must immediately give a written report about the circumstances to the chief executive.

Maximum penalty—20 penalty units.

192AA Faxed prescription

(1) A prescriber may give a dispenser a faxed prescription for a restricted drug the prescriber is endorsed to prescribe.

(2) Within 24 hours after giving the faxed prescription, the prescriber must telephone the dispenser and confirm the details of the faxed prescription.

Maximum penalty—20 penalty units.

(3) Within 7 days after giving the faxed prescription, the prescriber must send a paper prescription by post or by hand or send an electronic prescription for the drug to the dispenser.

Maximum penalty—40 penalty units.

(4) If the dispenser does not receive a paper or electronic prescription for the drug from the prescriber within 14 days after being given the faxed prescription, the dispenser must immediately give a written report about the circumstances to the chief executive.

Maximum penalty—20 penalty units.

(5) In this section—

faxed prescription means a paper prescription, that complies with this division, sent by facsimile transmission.

Division 2 Dispensing restricted drugs

192A Quality standard for dispensing restricted drugs

A pharmacist must not dispense a restricted drug unless the pharmacist—

(a) has prepared or adopted a quality standard for dispensing restricted drugs; and

(b) in dispensing the restricted drug, complies with the quality standard.

Maximum penalty—60 penalty units.

193 General conditions of dispensing

(1) A dispenser must not dispense a restricted drug unless—

(a) the drug is dispensed on a prescription that complies with division 1; and

(b) if the prescription is an electronic prescription, the prescription is sent by the prescriber and received by the dispenser by electronic means approved by the chief executive; and

(c) the drug dispensed—

(i) conforms with the prescription; or

(ii) is dispensed under section 195.

Maximum penalty—60 penalty units.

(2) Also, a dispenser must not dispense a restricted drug on a prescription if—

(a) the dispenser knows, or ought reasonably to know, the prescription was obtained because of false information given to the prescriber; or

(b) it is wholly or partly defaced, illegible or obliterated; or

(c) it appears to the dispenser to have been changed by someone other than the prescriber; or

(d) it includes an indication that it has been dispensed or is not to be dispensed; or

(e) it appears to the dispenser to be false in any particular; or

(f) it appears to have been prescribed more than 1 year before the date it is presented to the dispenser; or

(g) if 'Approved' must appear on it under section 190 because it is a regulated restricted drug—'Approved' does not appear on it.

Maximum penalty—60 penalty units.

(2A) Also, a dispenser must not dispense a restricted drug on a computer-generated paper prescription that has been changed unless the dispenser first contacts the prescriber to check the change is correct.

Maximum penalty—60 penalty units.

(3) Further, a dispenser must not dispense a restricted drug—

(a) more than the number of times stated by a valid repeat direction; or

(b) before the time stated on the prescription that must elapse between each dispensing of the drug.

Maximum penalty—60 penalty units.

(4) If a dispenser reasonably believes a prescription is false in any particular, the dispenser must—

(a) keep the prescription for the time reasonably necessary to enable the dispenser to find out if it is genuine; and

(b) make reasonable inquiries to establish the name and address of the person who gave it to the dispenser.

(5) Subsection (6) applies to a dispenser in relation to a prescription if—

(a) the dispenser is reasonably satisfied the prescription does not comply with division 1; or

(b) under subsection (2), the dispenser does not dispense a restricted drug on the prescription; or

(c) after checking under subsection (2A), the dispenser is reasonably satisfied a change to the prescription is incorrect.

(6) The dispenser must—

(a) cancel the prescription by legibly and permanently indicating on a paper prescription, or entering in an electronic prescription, the following information—

(i) the prescription is not to be dispensed;

(ii) the date;

(iii) the name or initials of the dispenser;

(iv) the name and address of the dispensary; and

(b) send the prescription to the chief executive within 14 days after cancelling it under paragraph (a).

Maximum penalty—40 penalty units.

193A Authorised prescriber

(1) A dispenser must not dispense a restricted drug on a prescription unless—

(a) the dispenser reasonably believes the prescription was made by a person (an ***authorised prescriber***) who, under this regulation, is endorsed to prescribe the drug; and

(b) if the drug is a specified restricted drug—the address of the authorised prescriber on the prescription is in Queensland.

Maximum penalty—60 penalty units.

(2) In this section—

specified restricted drug means the following restricted drugs—

(a) a regulated restricted drug;

(b) anabolic steroidal agents;

(c) ephedrine;

(d) pseudoephedrine.

194 Emergency sale of restricted drugs by pharmacist

(1) Despite section 193(1)(a), a pharmacist may sell a restricted drug to a person without prescription if the pharmacist reasonably believes—

(a) an emergency exists; and

(b) the person seeking the drug is under medical treatment requiring the use of the drug; and

(c) it is essential to continue the treatment for the person's wellbeing.

(2) The pharmacist—

(a) must not sell more than—

(i) for a restricted drug that is a prepacked liquid, cream, ointment or aerosol—the minimum standard pack; or

(ii) for another restricted drug—3 days supply of the drug; and

(b) must sell the drug in a container that has on it a securely attached label with the following written on it—

(i) 'Keep out of reach of children' in red on a background of contrasting colour and in bold-faced sans serif capital letters with a face depth of at least 1.5mm;

(ii) 'Emergency supply' in a colour contrasting with the background colour and in bold-faced sans serif capital letters with a face depth of at least 1.5mm;

(iii) the name of the person for whose treatment it is intended;

(iv) the name and address of the pharmacy;

(v) the date of sale;

(vi) a description of the contents in the form of the approved name of the preparation, the trade name of the preparation, or the approved name of each drug or poison present in the preparation.

Maximum penalty—40 penalty units.

(3) The pharmacist in charge of a dispensary at which restricted drugs are sold under this section must keep a record book (the

emergency supply book) about the sale of the drugs at the dispensary.

Maximum penalty—40 penalty units.

(4) The pharmacist must, when selling a restricted drug under this section, record in the emergency supply book—

(a) the name and address of the person to whom the drug was sold; and

(b) the date the drug is sold; and

(c) the description and quantity or volume of the drug sold; and

(d) the directions given for the use of the drug; and

(e) the name of the doctor or nurse practitioner who last prescribed the drug.

Maximum penalty—40 penalty units.

195 Dispensing generic drugs

(1) This section applies if a restricted drug is specified in a prescription by a brand name (the ***specified drug***) and the drug is also available under another brand name or without a brand name (both the ***generic drug***).

(2) A dispenser may dispense the generic drug in place of the specified drug if the drug is dispensed at a public sector hospital.

(3) Also, a dispenser may dispense the generic drug in place of the specified drug at a place other than a public sector hospital if—

(a) the specified drug and the generic drug are both drugs to which a pharmaceutical benefit applies under the National Health Act; and

(b) the prescriber did not indicate on the prescription that only the specified drug was to be dispensed; and

(c) either—

(i) both of the following apply—

(A) the schedule of pharmaceutical benefits, issued by the Commonwealth department within which the National Health Act is administered, states the specified drug and the generic drug are equivalent;

(B) a determination is in force for the generic drug under the National Health Act, section 85(6); or

(ii) if the dispenser is a pharmacist, the pharmacist has, using a relevant process under the pharmacist's quality standard for dispensing restricted drugs, confirmed the specified drug and the generic drug are equivalent; and

(d) it is lawful to dispense the generic drug on prescription; and

(e) the person to whom it is dispensed asks for, or agrees to, the dispensing of the generic drug in place of the specified drug.

(4) If a generic drug is dispensed, the dispenser must enter, in the prescription—

(a) the brand name of the generic drug; or

(b) if the generic drug does not have a brand name, the name of the manufacturer of the drug.

Maximum penalty—20 penalty units.

197 Dealing with prescriptions

(1) A dispenser must, when dispensing a restricted drug on a paper prescription, legibly and permanently indicate the following information on the prescription—

(a) the prescription has been dispensed;

(b) the date;

(c) the name or initials of the dispenser;

(d) the name and address of the dispensary;

(e) for a repeat prescription—the repeat number;

(f) for the last repeat of a repeat prescription, other than a duplicate of a prescription issued under the National Health Act or Veterans Entitlements Act—the prescription is not to be dispensed.

Maximum penalty—40 penalty units.

(2) A dispenser must, when dispensing a restricted drug on an electronic prescription, enter the following information in the prescription—

(a) the prescription has been dispensed;

(b) the date;

(c) the name or initials of the dispenser;

(d) the name and address of the dispensary;

(e) for a repeat prescription—the repeat number.

Maximum penalty—40 penalty units.

(3) Subsection (4) applies if a dispenser is asked to dispense a section 197 restricted drug for a person—

(a) more frequently than appears to be reasonably necessary; or

(b) in a greater quantity or volume than appears to be reasonably necessary.

(4) The dispenser must immediately give the chief executive a written notice about—

(a) the circumstances in which the dispenser has been asked to dispense the section 197 restricted drug; and

(b) the quantity or volume of the section 197 restricted drug dispensed; and

(c) when it has been dispensed for the person.

Maximum penalty—40 penalty units.

(5) In this section—

section 197 restricted drug means—

(a) restricted drug of dependency; or

(b) an anabolic steroidal agent that is a restricted drug.

198 Labelling dispensed medicines

(1) A person who sells a restricted drug as a dispensed medicine must securely attach to the medicine's container a label, as required by this section, with the following warnings printed on it—

(a) 'Keep out of reach of children';

(b) if the prescriber is a veterinary surgeon—'For animal treatment only'.

Maximum penalty—40 penalty units.

(2) The warnings must be printed in red on a background of contrasting colour and in bold-faced sans serif capital letters with a face depth of at least 1.5mm.

(3) The label must also have written on it—

(a) if the dispensed medicine is for human use—the name of the person for whose use it is intended; and

(b) if the dispensed medicine is for an animal—the name of the animal's owner; and

(c) the name and address of—

(i) the person selling the dispensed or supplied medicine; or

(ii) the business from which the dispensed or supplied medicine is sold; and

(d) a description of the name of the dispensed medicine under subsection (4) or (5); and

(e) a description of the strength of, and the quantity or volume of, the dispensed medicine; and

(f) directions about the use of the medicine; and

(g) the date the medicine is sold; and

(h) the seller's initials; and

(i) if the medicine is for internal human therapeutic use and is a substance in appendix K of the standard—

(i) 'This medication may cause drowsiness. If affected do not drive a vehicle or operate machinery. Avoid alcohol.'; or

(ii) 'This medication may cause drowsiness and may increase the effects of alcohol. If affected do not drive a motor vehicle or operate machinery.'; and

Editor's note—

appendix K (Drugs required to be labelled with a sedation warning) of the standard

(j) if the medicine's expiry date is not visible—the medicine's expiry date; and

(k) if the medicine is acetretin, adapalene, bexarotene, bosentan, etretinate, isotretinoin for oral use, leflunomide, levocabastine, misoprostol, tretinoin for oral use or thalidomide—the warning statements given for the drugs in appendix F, part 1 of the standard.

(4) The dispensed medicine must be described by—

(a) its approved name; or

Editor's note—

For the definition *approved name* see part 1 of the standard.

(b) the name the prescriber entered in the prescription or, if a different brand of the medicine is dispensed, the name, if any, of the brand dispensed; or

(c) its trade name; or

(d) the approved name of each restricted drug in the medicine; or

(e) the name of each restricted drug in the medicine as entered in the prescription.

(5) Despite subsection (4), a doctor may state in a prescription that the contents of a dispensed medicine must be described in another way that is not a false description.

(6) However, the warnings mentioned in subsection (1) and the words mentioned in subsection (3)(i)(i) or (ii) need not be printed or written on the label if the warning—

(a) appears on the dispensed or supplied medicine's container; and

(b) is clearly visible after the label is attached to the container.

198A Sale of restricted drug after expiry date

A person must not sell a restricted drug after the expiry date for the drug stated on the container for the drug or a label attached to the container.

Maximum penalty—60 penalty units.

199 Records of restricted drugs dispensed to be kept

(1) The pharmacist in charge of a dispensary must keep records, as required by this section, of all restricted drugs dispensed at the dispensary.

Maximum penalty—40 penalty units.

(2) The pharmacist may keep the records in the way the pharmacist considers appropriate, including, for example, in an electronic form.

(3) Each entry made in the records must include—

(a) the name and address of the person for whose use a restricted drug is dispensed; and

(b) the date the drug is dispensed; and

(c) the description and quantity or volume of the drug dispensed; and

(d) the directions for use as entered in the prescription; and

(e) the name and address of the prescriber; and

(f) a distinguishing number given to the prescription by the pharmacist; and

(g) the initials of the dispenser.

(4) If the drug is dispensed on a repeat prescription and the dispenser has previously recorded the particulars mentioned in subsection (3) for the prescription, the dispenser need only record—

(a) that the prescription is a repeat prescription; and

(b) the date the drug is dispensed and the initials of the dispenser.

(5) A person must not change, delete, obliterate or cancel an entry in a record kept under this section.

Maximum penalty—40 penalty units.

(6) However, the person who made the entry may correct the entry—

(a) if it is in a book—by a signed and dated marginal note or footnote giving the date of the correction and the correct particulars; or

(b) for a record kept in another form—by a note, that does not prevent the original or existing entry being read, of—

(i) the person's name; and

(ii) the correct details; and

(iii) the date of the correction.

Part 5 Obtaining and selling restricted drugs on purchase order

200 Authorised persons to obtain restricted drugs on purchase order

(1) An authorised person must not obtain a restricted drug other than on a purchase order complying with this section.

Maximum penalty—60 penalty units.

(2) The purchase order must have on its front—

(a) the date it is written; and

(b) the name and address of the person placing the order; and

(c) the description and quantity or volume of the drug to be supplied; and

(d) a number that allows the purchase order to be distinguished from other purchase orders used by the person ordering the restricted drug.

(3) A purchase order placed by a dentist, doctor, optometrist, pharmacist, podiatrist or veterinary surgeon—

(a) must be signed by the dentist, doctor, optometrist, pharmacist, podiatrist or veterinary surgeon placing the order; and

(b) if it is placed—

(i) by an optometrist—have 'Section 170' written on it; or

(ii) by a podiatrist—have 'Section 172' written on it; or

(iii) by a surgical podiatrist—have 'section 172A' written on it.

(4) A purchase order for restricted drugs placed by or for an entity, or to be used at a place, mentioned in appendix 3, part 2, column 1 of this regulation must be signed by—

(a) the person appearing opposite the entity or place in column 2; or

(b) any 1 of the persons appearing opposite the entity or place in column 2.

201 Sale of restricted drugs to authorised persons

(1) A person must not sell a restricted drug to an authorised person (other than a ship's master) unless the drug is sold—

(a) on a purchase order complying with this part; or

(b) if the person placing the order has an approval to obtain the drug—on production of the approval.

Maximum penalty—60 penalty units.

(2) A person must not sell a restricted drug to a ship's master unless—

(a) the person has an approval to sell the restricted drug to the ship's master; and

(b) the person receives from the ship's master a purchase order for the restricted drug, that is signed by—

(i) if the ship's master is authorised to obtain the drug under section 178(2)—a doctor; or

(ii) otherwise—the ship's master.

Maximum penalty—60 penalty units.

201A Interstate orders of specified restricted drugs

(1) A person, other than a restricted drug wholesaler, must not sell a specified restricted drug to an authorised person unless the address of the authorised person on the purchase order for the drug is in Queensland.

Maximum penalty—60 penalty units.

(2) Subsection (1) does not apply if the authorised person is a ship's master.

(3) In this section—

specified restricted drug means any of the following—

(a) a regulated restricted drug;

(b) anabolic steroidal agents;

(c) ephedrine;

(d) pseudoephedrine.

202 Delivery of restricted drugs

(1) A person who sells a restricted drug (the ***seller***), or an adult employee of the seller, may—

(a) personally deliver a restricted drug to an authorised person or an adult employee of the authorised person (the ***buyer***) at the seller's or buyer's premises; or

(b) send a restricted drug to the buyer by post or a carrier or transport service.

(2) The seller must not deliver or send a restricted drug to the buyer unless the drug is in a securely closed package addressed to the buyer.

Maximum penalty—40 penalty units.

203 Dealing with purchase orders

(1) If a pharmacist, or a person who is authorised to dispense a regulated restricted drug under a pharmacist's personal supervision, sells a regulated restricted drug on a purchase order, the pharmacist or person must write on the front of the order—

(a) the date the drug is sold; and

(b) the name and address of the dispensary at or from which the drug is sold.

Maximum penalty—40 penalty units.

(2) If a pharmacist, or a person authorised to dispense a restricted drug under the personal supervision of the pharmacist, sells a restricted drug (other than a regulated restricted drug) on a purchase order, the pharmacist or person must—

(a) write on the front of the order—

(i) the date the drug is sold; and

(ii) the name and address of the dispensary at or from which the drug is sold; and

(b) sign the order and keep it for 2 years after the date the drug was sold.

Maximum penalty—40 penalty units.

(3) If a person (other than a person mentioned in subsection (2)) sells a restricted drug on a purchase order, the person must—

(a) write the date of the sale on the front of the order and sign the order; and

(b) keep the order for 2 years after the date of the sale.

Maximum penalty—40 penalty units.

(4) If the order is for the sale of a restricted drug to a ship's master, the person selling the drug, whether under subsection (1), (2) or (3), must also write on the duplicate of the order the information required under the relevant subsection.

Maximum penalty—40 penalty units.

(5) A duplicate of an order written under the National Health Act is taken to be a purchase order for subsection (1), (2) or (3).

Part 6 Possession and use of restricted drugs

204 Unlawful possession of restricted drugs

A person must not possess a restricted drug that the person did not lawfully obtain.

Maximum penalty—60 penalty units.

205 Possession by user

(1) A person who lawfully obtains a restricted drug may possess the drug for the time reasonably necessary for the person to use the drug for the purpose and in the way the authorised person directs.

(2) The person must—

(a) keep the restricted drug in the person's possession until it is used; and

(b) use the restricted drug, or allow it to be used, only for the purpose for which it was obtained.

Maximum penalty—40 penalty units.

Part 7 Records of restricted drugs

207 Records of restricted drugs supplied to be kept

(1) The director of nursing of a hospital, or the registered nurse in charge of a hospital, must keep records, as required by this section, of all restricted drugs supplied by a nurse at the hospital under section 175(2A) or 176.

Maximum penalty—40 penalty units.

(1A) Each of the following nurses must keep records, as required by this section, of all restricted drugs supplied by the nurse under section 175—

(a) a rural and isolated practice endorsed nurse;

(b) a registered nurse practising nursing under a sexual health program;

(c) a nurse practitioner.

Maximum penalty—40 penalty units.

(1B) An isolated practice area paramedic must keep records, as required by this section, of all restricted drugs supplied by the paramedic under section 174(2A).

Maximum penalty—40 penalty units.

(2) The records must be kept in one of the following ways—

(a) written entries in a bound book with consecutively numbered pages, made in the order in which the transactions happen;

(b) entries stored in the computer system that has enough capacity and backup capability for the purpose;

(c) another certified way.

(3) An entry in the record book about a restricted drug must include—

(a) the name and address of the person for whose use the restricted drug is supplied; and

(b) the date the restricted drug is supplied; and

(c) the description and quantity or volume of the restricted drug supplied; and

(d) the directions for use stated in the instruction on which, or the drug therapy protocol under which, the restricted drug is supplied; and

(e) for an instruction, the name of the person who gave the instruction; and

(f) the initials of the nurse supplying the restricted drug.

(4) A person must not cancel, change or obliterate an entry in a record book kept under this section.

Maximum penalty—40 penalty units.

(5) However, the person who made the entry may correct the entry—

(a) if it is in a book—by a signed and dated marginal note or footnote giving the date of the correction and the correct particulars; or

(b) if it is a computer record—only if a note is made on the record of the change, the date of the change and the name of the person who made the change.

208 Records—other approved persons

(1) A person approved under this regulation to administer, obtain, possess, sell or use a restricted drug must keep the records stated in the approval.

Maximum penalty—20 penalty units.

(2) This section does not apply to records that must be kept under another provision of this chapter.

209 Exemption of user from keeping records

(1) This part does not apply to a person for a restricted drug if—

(a) the restricted drug was lawfully prescribed for the person or the person's animal; and

(b) the person uses the restricted drug for the dental, medical, ocular or veterinary purpose for which it is prescribed.

(2) This section does not apply to records that must be kept under another provision of this chapter.

210 Records not to be changed but may be corrected

(1) A person must not cancel, change or obliterate an entry in a record kept under section 208.

Maximum penalty—20 penalty units.

(2) However, the person who made the entry may correct the entry by a signed and dated marginal note or footnote giving the correct details.

Part 8 Storage of restricted drugs

211 Storage of restricted drugs generally

(1) An authorised person in possession of a restricted drug at a place must keep the drug in a cupboard, dispensary, drawer, storeroom or other part of the place to which the public does not have access.

Maximum penalty—40 penalty units.

(2) Also, an ambulance officer, doctor, rural and isolated practice endorsed nurse, midwife, nurse practitioner or veterinary surgeon may possess a restricted drug at a place other than the place where the person practises his or her profession.

(3) The ambulance officer, doctor, rural and isolated practice endorsed nurse, midwife, nurse practitioner or veterinary surgeon must keep the drug in a secure place under his or her personal control.

Maximum penalty—40 penalty units.

(4) This section does not apply to a wholesale representative.

Part 9 Treatment with and dependence on restricted drugs of dependency

212 Restricted drugs of dependency not to be obtained unless information disclosed to dentist, doctor, nurse practitioner or surgical podiatrist

(1) This section applies to a person who—

(a) consults a dentist, doctor, nurse practitioner or surgical podiatrist (the ***earlier practitioner***); and

(b) obtains a restricted drug of dependency or controlled drug, or a prescription for a restricted drug of dependency or controlled drug, from the earlier practitioner; and

(c) consults another dentist, doctor, nurse practitioner or surgical podiatrist (the ***other practitioner***) within 2 months after consulting the earlier practitioner.

(2) A person must not obtain a restricted drug of dependency, or a prescription for a restricted drug of dependency, from the other practitioner unless the person gives the other practitioner details (including quantities) of all restricted drugs of dependency or controlled drugs, and prescriptions for restricted drugs of dependency or controlled drugs, the person has obtained from the earlier practitioner within 2 months before the day the person consults the other practitioner.

Maximum penalty—60 penalty units.

213 Approval needed for treating certain drug dependent persons with restricted drugs of dependency

(1) A relevant practitioner must not, without an approval—

(a) dispense or prescribe a restricted drug of dependency for a person the relevant practitioner reasonably believes is a drug dependent person; or

(b) administer or supply a restricted drug of dependency to or for a drug dependent person.

Maximum penalty—60 penalty units.

(2) If a relevant practitioner reasonably believes it is necessary for the relevant practitioner to treat a drug dependent person, or the relevant practitioner proposes to treat a class of drug dependent persons, with a restricted drug of dependency, the relevant practitioner must give the chief executive a report in the approved form about—

(a) if the relevant practitioner reasonably believes it is necessary to treat a drug dependent person—the circumstances of the person's treatment; or

(b) if the relevant practitioner proposes to treat a class of drug dependent persons—the class of drug dependent persons the relevant practitioner proposes to treat and the proposed treatment of the persons.

(3) The chief executive may ask the relevant practitioner to give the chief executive stated additional information about the treatment of the drug dependent person, or class of drug dependent persons, within a stated reasonable time.

(4) The relevant practitioner must comply with the request, unless the relevant practitioner has a reasonable excuse for not complying with it.

Maximum penalty—20 penalty units.

(5) If the chief executive is reasonably satisfied that, for the welfare of the drug dependent person, or class of drug dependent persons, it is necessary for the relevant practitioner to treat the person, or class of persons, with a restricted drug of dependency, the chief executive may give the relevant practitioner a written approval to administer, dispense, prescribe, supply or use a stated quantity or volume of the restricted drug.

(6) Also, if the chief executive is reasonably satisfied that, for the welfare of the drug dependent person, or class of drug dependent persons, it is necessary for the chief executive to

give the relevant practitioner an oral approval to administer, dispense, prescribe, supply or use a stated quantity or volume of the restricted drug of dependency to or for the person or persons, the chief executive may give the oral approval.

(7) However, if the chief executive gives the relevant practitioner an oral approval, the chief executive must give the relevant practitioner written confirmation of the approval as soon as possible after giving the oral approval.

(8) A relevant practitioner to whom an approval has been given about a restricted drug of dependency for a drug dependent person, or class of drug dependent persons, must not administer, dispense, prescribe or supply a restricted drug of dependency to, or use a restricted drug of dependency on, the person or persons other than under the approval.

Maximum penalty for subsection (8)—60 penalty units.

(9) This section does not apply to a relevant practitioner treating a drug dependent person as an inpatient in a hospital.

(10) In this section—

relevant practitioner means a doctor, nurse practitioner or surgical podiatrist.

213A Approval needed for treatment by dentist of drug dependent person with restricted drugs of dependency

(1) A dentist must not, without an approval—

(a) dispense or prescribe a restricted drug of dependency for a person the dentist reasonably believes is a drug dependent person; or

(b) administer or supply a restricted drug of dependency to or for a drug dependent person.

Maximum penalty—60 penalty units.

(2) If a dentist reasonably believes it is necessary for the dentist to treat a drug dependent person with a restricted drug of dependency the dentist must give the chief executive a report

in the approved form about the circumstances of the person's treatment.

(3) The chief executive may ask the dentist to give the chief executive stated additional information about the treatment of the drug dependent person within a stated reasonable time.

(4) The dentist must comply with the request, unless the dentist has a reasonable excuse for not complying with it.

Maximum penalty—20 penalty units.

(5) If the chief executive is reasonably satisfied that, for the welfare of the drug dependent person, it is necessary for the dentist to treat the person with a restricted drug of dependency, the chief executive may give the dentist a written approval to administer, dispense, prescribe, supply or use a stated quantity or volume of the restricted drug.

(6) Also, if the chief executive is reasonably satisfied that, for the welfare of the drug dependent person, it is necessary for the chief executive to give the dentist an oral approval to administer, dispense, prescribe, supply or use a stated quantity or volume of the restricted drug of dependency to or for the person the chief executive may give the oral approval.

(7) However, if the chief executive gives the dentist an oral approval, the chief executive must give the dentist written confirmation of the approval as soon as possible after giving the oral approval.

(8) A dentist to whom an approval has been given about a restricted drug of dependency for a drug dependent person must not administer, dispense, prescribe or supply a restricted drug of dependency to, or use a restricted drug of dependency on, the person other than under the approval.

Maximum penalty for subsection (8)—60 penalty units.

Part 10 General

214 Restricted drugs for animals not to be dispensed etc. for human therapeutic use

A person must not, without an approval, dispense, prescribe, sell or use, for human therapeutic use, a restricted drug labelled, manufactured, packed or prepared for use for animal treatment.

Maximum penalty—60 penalty units.

215 Restricted drugs for animals not to be administered to humans

A person must not, without an approval, administer to himself, herself or someone else a restricted drug manufactured, prepared, packed or labelled for use for animal treatment.

Maximum penalty—60 penalty units.

216 False, misleading or incomplete entries

A person must not make an entry in a book or record required to be kept under this chapter that the person knows is a false, misleading or incomplete entry.

Maximum penalty—60 penalty units.

217 Improper use of prescriptions for restricted drugs

(1) A person must not use a prescription, or a document purporting to be a prescription, for a restricted drug to obtain the drug if the prescription or other document is written by someone other than a person—

(a) who may prescribe the drug; and

(b) whose name, professional qualifications and address are legibly written on the prescription.

Maximum penalty—60 penalty units.

(2) A person must not obtain a restricted drug by using a prescription that the person knows falsely states the name or current residential address of the person for whom the drug is prescribed.

Maximum penalty—60 penalty units.

(3) A person must not obtain a restricted drug by using a prescription that has on it an alteration, obliteration or other writing made by someone other than the prescriber who wrote the prescription.

Maximum penalty—60 penalty units.

(4) A person must not change, obliterate or otherwise write on a prescription, unless the person is the prescriber who wrote the prescription.

Maximum penalty—60 penalty units.

(5) Subsections (3) and (4) do not apply to something written on a prescription under this chapter by a dispenser.

218 False statements—restricted drugs

(1) A person must not make a statement the person knows is false to obtain a restricted drug from a person endorsed under this regulation to administer, dispense or sell the drug.

Maximum penalty—60 penalty units.

(2) A person must not make a statement the person knows is false to obtain a prescription for a restricted drug from a prescriber.

Maximum penalty—60 penalty units.

(3) A person must not make a statement the person knows is false about a prescription or purchase order for a restricted drug.

Maximum penalty—60 penalty units.

(4) A person must not state a name or residential address the person knows is false to—

(a) a person who may administer, dispense, prescribe or sell a restricted drug; or

(b) an employee or agent of a person mentioned in paragraph (a) in the performance of the employment or agency.

Maximum penalty—60 penalty units.

219 Unsafe disposal or use of restricted drugs

A person must not discharge, dispose of or use a restricted drug in a way that—

(a) endangers the life or safety of a person or domestic animal; or

(b) exposes food, drink or a condiment or another drug or a poison to the risk of contamination by the drug; or

(c) gives access to the restricted drug to someone not endorsed to possess it.

Maximum penalty—60 penalty units.

220 Advertising of restricted drugs

(1) A person must not advertise, or cause someone else to advertise, a substance that is or contains a restricted drug, whether or not the restricted drug is named in the advertisement.

Maximum penalty—60 penalty units.

(2) However, subsection (1) does not apply to—

(a) an advertisement in a professional or trade journal; or

(b) a price list, advertisement or promotional material intended for circulation only to the wholesale drug trade or the dental, medical, pharmaceutical or veterinary professions; or

(c) a price list that complies with the document called 'Price Information Code of Practice', published by the Therapeutic Goods Administration, as in force from time to time.

Editor's note—

A copy of the Price Information Code of Practice may be obtained from the Therapeutic Goods Administration's website at <www.tga.gov.au>.

220A Automatic machines—Act, s 106

For section 106(2) of the Act, the sale or supply of a restricted drug by means of an automatic machine or similar mechanical device is prohibited.

221 Safe keeping of restricted drugs

A person must not carry, handle or store a restricted drug in a way that may allow the drug to mix with, or contaminate, food, drink or a condiment or a drug or poison for human or animal use even if the container in which the drug is carried, handled or stored breaks or leaks.

Maximum penalty—40 penalty units.

222 Keeping records

A person who must, under this chapter, keep a record or other document about restricted drugs must—

(a) ensure it is kept in good condition, as far as practicable; and

(b) keep it for 2 years after the last entry that is made in it.

Maximum penalty—40 penalty units.

Chapter 4 Poisons

Part 1 Licences

Division 1 General

223 Application of pt 1

This part applies to the following types of licences—

(a) poison manufacturer licences;

(b) poison wholesaler licences;

(c) general poison licences;

(d) licences to sell S7 poisons for other than human therapeutic use.

224 Licence to state business premises and other particulars

(1) A licence under this chapter applies only to the place stated in the licence as the licensee's business premises.

(2) The chief executive must not state more than 1 place in the licence as the licensee's business premises.

(3) For a poison manufacturer licence, the chief executive must also state in the licence the title of the position that is to have responsibility for supervising the manufacture of the poison or poisons at the premises.

Division 2 Poison manufacturer licence

225 Restrictions on grant of poison manufacturer licence

The chief executive may grant a poison manufacturer licence to a person only if the chief executive is reasonably satisfied—

(a) the person—

(i) intends to carry on business as a poison manufacturer; and

(ii) is a suitable person to manufacture and sell poisons; and

(b) an individual who holds the position responsible for supervising the manufacture of the poison or poisons has the qualifications and experience necessary to effectively supervise the manufacture; and

(c) the premises to be used for manufacturing the poison or poisons are suitable for the purpose.

226 Poison manufacturer licence

A poison manufacturer—

(a) may manufacture an S2, S3 or S7 poison; and

(b) is taken to hold a poison wholesaler licence for the poison.

227 Offence to manufacture S2, S3 or S7 poisons without licence

A person must not manufacture an S2, S3 or S7 poison unless the person—

(a) holds a poison manufacturer licence for the poison; or

(b) is a State analyst, or a trainee State analyst under the supervision of a State analyst, who manufactures the poison for the analyst's, or trainee's, official duties; or

(c) holds an endorsement under section 18(1) to manufacture the poison.

Maximum penalty—60 penalty units.

Division 3 Poison wholesaler licence

228 Restrictions on grant of poison wholesaler licence

The chief executive may grant a poison wholesaler licence to a person only if the chief executive is reasonably satisfied—

(a) the person intends to carry on business as a poison wholesaler; and

(b) the person is a suitable person to sell poisons; and

(c) the premises to be used for wholesaling the poisons are suitable for the purpose.

229 Poison wholesaler licence

(1) A poison wholesaler may sell an S2, S3 or S7 poison by wholesale to—

(a) an authorised person; or

(b) someone in another State who may obtain the poison under the law of the other State.

(2) Also, a poison wholesaler may sell an S2, S3 or S7 poison by wholesale to a person in another country who may lawfully obtain the poison in the other country.

(3) Subsection (2) does not apply to a poison that is a prohibited export under the *Customs Act 1901* (Cwlth).

230 Offence to wholesale poisons without licence

(1) A person must not sell an S2, S3 or S7 poison by wholesale unless the person holds a poison manufacturer or poison wholesaler licence for the poison.

Maximum penalty—40 penalty units.

(2) However, subsection (1) does not apply if the person sells the S2, S3 or S7 poison under—

(a) a restricted drug manufacturer licence; or

(b) a restricted drug wholesaler licence.

Division 4 General poison licence

231 Restrictions on grant of general poison licence

The chief executive may grant a general poison licence to a person only if the chief executive is reasonably satisfied the person—

(a) is a suitable person to sell S2 poisons; and

(b) intends to sell the poisons at a place more than 25km by road from a pharmacy.

232 General licence

The holder of a general poison licence may sell S2 poisons.

Division 5 Licence to sell S7 poisons for other than human therapeutic use

233 Restriction on grant of licence to sell S7 poisons other than for human therapeutic use

The chief executive may grant a licence to sell S7 poisons other than for human therapeutic use to a person only if the

chief executive is reasonably satisfied the person is a suitable person to sell the poisons.

234 Licence to sell S7 poisons other than for human therapeutic use

The holder of a licence to sell S7 poisons other than for human therapeutic use may sell an S7 poison.

Division 6 General restrictions on sale of poisons

235 Wholesale and retail sales by manufacturers and wholesalers

(1) A poison manufacturer or wholesaler must not sell an S2, S3 or S7 poison by wholesale to someone who may not sell the poison by retail.

Maximum penalty—40 penalty units.

(2) Subsection (1) does not apply to a poison wholesaler—

(a) selling an S2 poison to an optometrist, physiotherapist or podiatrist; or

(b) selling an S2 or S3 poison to—

(i) a dentist, doctor, pharmacist or veterinary surgeon; or

(ii) the director of nursing of an institution; or

(iii) a rural and isolated practice endorsed nurse; or

(iv) a person whom the wholesaler is reasonably satisfied has an obligation to comply with the *Navigation Act 1912* (Cwlth) or the *Transport Operations (Marine Safety) Act 1994* in the supply of first aid requisites for life rafts; or

(v) the vice-chancellor of a university; or

(vi) a licensee of a child care service; or

(vii) an adult carer in a child care service; or

(viii) a person who may administer an S2 or S3 poison under an approval; or

(c) selling an S7 poison by retail—

(i) to a person mentioned in paragraph (b); or

(ii) if a primary producer reasonably satisfies the wholesaler the poison is to be used on the person's property, to a primary producer; or

(iii) if it is cyanide sold in quantities of 50kg or more, to a corporation holding a mining lease under the *Mineral Resources Act 1989*; or

(iv) to a person who uses the poison in a technical process connected with the person's business, industry or trade; or

(d) selling S3 salbutamol or S3 terbutaline to a person mentioned in section 256B for use for first aid.

(3) A poison manufacturer or wholesaler must not sell an S2, S3 or S7 poison to a person under subsection (2) unless the person gives the manufacturer or wholesaler a signed purchase order for the poison before the sale.

Maximum penalty for subsection (3)—40 penalty units.

236 Other restrictions on sale of poisons

(1) A licensee must not—

(a) possess or sell a poison the person is licensed to sell at a place other than the person's business premises; or

(b) allow someone other than a competent adult employee of the person to sell a poison under the licence.

Maximum penalty—40 penalty units.

(2) However, a licensee may sell a poison in a street or from place to place if the licensee has an approval to sell in a street or from place to place.

237 Records of certain transactions by poison manufacturers and wholesalers

(1) When a poison manufacturer or wholesaler sells an S2, S3 or S7 poison to a person, the manufacturer or wholesaler must give the person an invoice for the poison sold.

Maximum penalty—20 penalty units.

(2) The manufacturer or wholesaler must ensure the invoice has a unique number and states—

(a) the date of the sale; and

(b) the name and address of the person to whom the poison is sold; and

(c) the name of the poison and the quantity or volume of it sold.

Maximum penalty—20 penalty units.

(3) The manufacturer or wholesaler must keep a record of the details contained in an invoice for 2 years after the date of the invoice.

Maximum penalty—20 penalty units.

(4) If the manufacturer or wholesaler has more than 1 licence and the manufacturer's or wholesaler's records are kept on a computer at the manufacturer's or wholesaler's central or main office, records for each licence must be kept at the relevant business premises.

Maximum penalty—20 penalty units.

Part 2 Permits for cyanide and strychnine

Division 1 Cyanide

238 Obtaining, possession or use of cyanide

(1) A person must not obtain, possess or use cyanide unless the person—

(a) is endorsed, under this regulation, to obtain, possess or use cyanide; or

(b) holds a cyanide permit for the cyanide.

Maximum penalty—80 penalty units.

(2) A person who possesses cyanide under a cyanide permit must not possess more cyanide than the maximum quantity stated in the permit.

Maximum penalty—80 penalty units.

(3) Subsection (1)(b) does not apply to possession of cyanide by a person under section 239(5)(b).

238A Restriction on sale of cyanide

(1) A person must not—

(a) sell cyanide to a person unless the person gives the seller a cyanide permit that is in force; or

(b) sell to a purchaser more cyanide, in total, than is stated in the permit.

Maximum penalty—60 penalty units.

(2) However, subsection (1)(a) does not apply to a person who is endorsed, under this regulation, to sell cyanide to the following—

(a) a person who is endorsed, under this regulation, to obtain, possess or use cyanide;

(b) another person who is endorsed, under this regulation, to sell cyanide.

(3) The seller must—

(a) write on the front of the permit—

(i) the date the cyanide is sold; and

(ii) the quantity of cyanide sold; and

(iii) the seller's name and address; and

(iv) if the full amount of the cyanide stated in the permit has been sold—the word 'Cancelled'; and

(b) sign the permit; and

(c) return the permit to the permit holder.

Maximum penalty—40 penalty units.

(4) Despite subsection (3)(a)(iv), the cancellation of the permit only relates to the permit holder's endorsement to obtain cyanide.

239 Requirements for cyanide obtained outside the State

(1) This section applies to a person who obtains cyanide from someone in another State.

(2) Subsection (3) applies if the person has a cyanide permit for the cyanide before obtaining the cyanide.

(3) The person must—

(a) as soon as possible after obtaining the cyanide, attach to the cyanide permit a document evidencing acquisition of the cyanide; and

(b) ensure the document remains attached to the cyanide permit while the cyanide permit is in force.

Maximum penalty—40 penalty units.

(4) Subsections (5) and (6) apply if the person—

(a) does not have a cyanide permit for the cyanide before obtaining the cyanide; and

(b) has an interstate permit from the other State for the cyanide.

(5) The person—

(a) must apply for a cyanide permit for the cyanide as soon as possible after the cyanide comes into the person's possession in the State; and

(b) may only possess the cyanide without a cyanide permit for the time reasonably necessary to obtain a cyanide permit.

Maximum penalty—40 penalty units.

(6) Also, the person must—

(a) as soon as possible after receiving a cyanide permit, attach to it—

(i) the interstate permit for the cyanide; and

(ii) a document evidencing acquisition of the cyanide; and

(b) ensure the interstate permit and the document remain attached to the cyanide permit while the cyanide permit is in force.

Maximum penalty—40 penalty units.

(7) In this section—

interstate permit means a permit or other document issued under a law of another State, equivalent to a cyanide permit.

240 Permit conditions

(1) The holder of a cyanide permit must keep the permit with the person while the person possesses cyanide.

Maximum penalty—20 penalty units.

(2) Also, the holder of a cyanide permit—

(a) must keep the cyanide locked in a secure place; and

(b) must ensure the key to the place is always in the holder's possession or the possession of a responsible adult authorised by the holder; and

(c) must not—

(i) leave cyanide in a place to which other people have access; or

(ii) use cyanide for a purpose not stated in the permit; or

(iii) store cyanide at a place not stated in the permit; or

(iv) possess cyanide after the permit expires.

Maximum penalty—40 penalty units.

Division 2 Strychnine

240A Obtaining, possession or use of strychnine

(1) A person must not obtain, possess or use strychnine unless the person—

(a) is endorsed, under this regulation, to obtain, possess or use strychnine; or

(b) holds a strychnine permit for the strychnine.

Maximum penalty—80 penalty units.

(1A) However, a responsible adult authorised by a person who holds a strychnine permit (the ***permit holder***) may possess or use strychnine under the permit but only—

(a) in accordance with the conditions of the permit; and

(b) under the supervision of the permit holder.

(1B) Without limiting subsection (1A)(a), the responsible adult must possess or use the strychnine in accordance with the conditions stated in section 242(2).

(2) A person who possesses strychnine under a strychnine permit must not possess more strychnine than the maximum quantity stated in the permit.

Maximum penalty—80 penalty units.

(3) Subsection (1)(b) does not apply to possession of strychnine by a person under section 241(5)(b).

240B Restriction on sale of strychnine

(1) A person must not—

(a) sell strychnine to a person unless the person gives the seller a strychnine permit that is in force; or

(b) sell to a purchaser more strychnine, in total, than is stated in the permit.

Maximum penalty—60 penalty units.

(2) However, subsection (1)(a) does not apply to a person who is endorsed, under this regulation, to sell strychnine to the following—

(a) a person who is endorsed, under this regulation, to obtain, possess or use strychnine;

(b) another person who is endorsed, under this regulation, to sell strychnine.

(3) The seller must—

(a) write on the front of the permit—

(i) the date the strychnine is sold; and

(ii) the quantity of strychnine sold; and

(iii) the seller's name and address; and

(iv) if the full amount of the strychnine stated in the permit has been sold—the word 'Cancelled'; and

(b) sign the permit; and

(c) return the permit to the permit holder.

Maximum penalty—40 penalty units.

(4) Despite subsection (3)(a)(iv), the cancellation of the permit only relates to the permit holder's endorsement to obtain strychnine.

241 Requirements for strychnine obtained outside the State

(1) This section applies to a person who obtains strychnine from someone in another State.

(2) Subsection (3) applies if the person has a strychnine permit for the strychnine before obtaining the strychnine.

(3) The person must—

(a) as soon as possible after obtaining the strychnine, attach to the strychnine permit a document evidencing acquisition of the strychnine; and

(b) ensure the document remains attached to the strychnine permit while the strychnine permit is in force.

Maximum penalty—40 penalty units.

(4) Subsections (5) and (6) apply if the person—

(a) does not have a strychnine permit for the strychnine before obtaining the strychnine; and

(b) has an interstate permit from the other State for the strychnine.

(5) The person—

(a) must apply for a strychnine permit as soon as possible after the strychnine comes into the person's possession in the State; and

(b) may only possess the strychnine without a strychnine permit for the time reasonably necessary to obtain a strychnine permit.

Maximum penalty—40 penalty units.

(6) Also, the person must—

(a) as soon as possible after receiving a strychnine permit, attach to it—

(i) the interstate permit for the strychnine; and

(ii) a document evidencing acquisition of the strychnine; and

(b) ensure the interstate permit and the document remain attached to the strychnine permit while the strychnine permit is in force.

Maximum penalty—40 penalty units.

(7) In this section—

interstate permit means a permit or other document issued under a law of another State, equivalent to a strychnine permit.

242 Permit conditions

(1) A person who is the holder of a strychnine permit, or a responsible adult authorised under section 240A(1A) (each a ***person in possession***), must keep either the permit or a copy of the permit with the person while the person possesses strychnine under the permit.

Maximum penalty—20 penalty units.

(2) Also, the person in possession—

(a) must keep the strychnine locked in a secure place; and

(b) must ensure the key to the place is always in the person's possession or the possession of a responsible adult authorised by the holder; and

(c) must not—

(i) leave strychnine in a place to which other people have access; or

(ii) use strychnine for a purpose not stated in the permit; or

(iii) store strychnine at a place not stated in the permit; or

(iv) possess strychnine after the permit expires.

Maximum penalty—40 penalty units.

Part 3 Endorsements

Division 1 Preliminary

243 Endorsement needed for S2, S3 or S7 poison

(1) A person must not dispense, prescribe, purport to prescribe or sell an S2, S3 or S7 poison unless the person is, under this regulation, endorsed to dispense, prescribe or sell the poison.

Maximum penalty—40 penalty units.

(2) A person must not administer an S2 or S3 poison to someone else unless the person is, under this regulation, endorsed to administer the poison.

Maximum penalty—40 penalty units.

(3) A person who may, under an endorsement, administer, dispense, issue, prescribe or sell an S2, S3 or S7 poison, or write a written instruction or give an oral instruction for an S2, S3 or S7 poison, must not destroy an S2, S3 or S7 poison unless the person is endorsed to destroy the poison.

Maximum penalty—40 penalty units.

(4) A person must not write a written instruction for an S2, S3 or S7 poison unless the person is, under this regulation, endorsed to write the written instruction.

Maximum penalty—40 penalty points.

(5) Subsection (6) applies to a person who may only administer, dispense, issue, prescribe or sell a poison, or write a written instruction or give an oral instruction for a poison, at a stated place or under stated conditions.

(6) The person must not administer, dispense, issue, prescribe or sell the poison or write a written instruction or give an oral instruction for the poison at another place or in contravention of the conditions.

Maximum penalty—40 penalty units.

Division 2 Particular endorsements

246 Outposts of Royal Flying Doctor Service

The person in charge of an outpost of the Royal Flying Doctor Service of Australia may administer or supply an S2 or S3 poison at the outpost under an oral or written instruction of a doctor or a nurse practitioner.

248 Dental hygienists

To the extent necessary to perform a dental hygienist's functions as a dental hygienist, a dental hygienist is authorised to administer the following S2 and S3 poisons—

(a) fluorides in preparations for topical human therapeutic use;

(b) lignocaine when in preparations for topical human therapeutic use (other than eye drops) that contain not more than 10% lignocaine;

(c) silver salts;

(d) adrenalin of a strength of not more than 0.1%, if administered by a pre-loaded device for the management of anaphylaxis.

Example for paragraph (d)—

an EpiPen.

248A Dental therapists

(1) To the extent necessary to perform a dental therapist's functions as a dental therapist, a dental therapist is authorised to administer the following S2 and S3 poisons—

(a) ether;

(b) fluorides;

(c) lignocaine when in preparations for topical human therapeutic use (other than eye drops) that contain not more than 10% lignocaine;

(d) phenol;

(e) ferric sulphate;

(f) adrenalin of a strength of not more than 0.1%, if administered by a pre-loaded device for the management of anaphylaxis.

Example for paragraph (f)—

an EpiPen.

(2) Subsection (3) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise as a dental therapist.

(3) To the extent necessary to undergo the course of training, the trainee is authorised to administer the S2 and S3 poisons mentioned in subsection (1).

248B Oral health therapists

(1) To the extent necessary to perform an oral health therapist's functions as an oral health therapist, an oral health therapist is authorised to administer the following S2 and S3 poisons—

(a) lignocaine when in preparations for topical human therapeutic use (other than eye drops) that contain not more than 10% lignocaine;

(b) silver salts;

(c) ether;

(d) fluorides;

(e) phenol;

(f) ferric sulphate;

(g) adrenalin of a strength of not more than 0.1%, if administered by a pre-loaded device for the management of anaphylaxis.

Example for paragraph (g)—

an EpiPen.

(2) Subsection (3) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise as an oral health therapist.

(3) To the extent necessary to undergo the course of training, the trainee is authorised to administer the S2 and S3 poisons mentioned in subsection (1).

249 Dentists

To the extent necessary to practise dentistry, a dentist is authorised to administer, prescribe or supply an S2 or S3 poison.

250 Detention centres

(1) A detention centre manager is authorised to issue an S2 or S3 poison to an authorised person who may administer or supply it for the treatment of a child detained at the detention centre.

(2) A detention centre's director of nursing or medical superintendent, or the pharmacist in charge of a detention

centre dispensary, is authorised to issue an S2 or S3 poison to an authorised person who may administer or supply it for the treatment of a child detained at the detention centre.

251 Doctors

To the extent necessary to practise medicine, a doctor is authorised to—

(a) administer, dispense, prescribe or supply an S2, S3 or S7 poison; or

(b) give someone who may administer or supply an S2 or S3 poison an oral or written instruction to administer or supply the poison.

252 Enrolled nurses

(1) To the extent necessary to practise nursing, an enrolled nurse is authorised to administer an S2 or S3 poison under the supervision of a dentist, doctor, midwife or registered nurse.

(2) Subsection (3) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise as an enrolled nurse.

(3) To the extent necessary to undergo the course of training, the trainee is authorised to administer an S2 or S3 poison under the personal supervision of a dentist, doctor, midwife or registered nurse.

252A Hospital pharmaceutical assistants

To the extent necessary to perform the person's pharmaceutical imprest duties in a hospital, a hospital pharmaceutical assistant acting under the supervision of a pharmacist, is authorised to issue an S2 or S3 poison to an authorised person for treatment of the hospital's patients.

252B Indigenous health workers

An indigenous health worker, while practising in an Aboriginal or Torres Strait Islander community in an isolated practice area in a specified health service district, is authorised to administer or supply an S2 or S3 poison under a drug therapy protocol.

253 Inspectors

To the extent necessary to perform an inspector's official duties, an inspector is authorised to destroy a poison in an emergency or disaster situation.

254 Local governments

A local government is authorised to—

(a) sell under the Act an S7 poison for use for disinfection or weed or vermin destruction; or

(b) sell sodium fluoride in a form containing a concentration of not more than 2.2mg of sodium fluoride in each dosage unit.

255 Midwives

(1) To the extent necessary to practise midwifery, a midwife is authorised to administer an S2 or S3 poison.

(2) To the extent necessary to practise midwifery in a rural hospital or an isolated practice area, a midwife is authorised to supply an S2 or S3 poison to or for a person requiring treatment at the rural hospital or in the isolated practice area.

256 Optometrists

(1) To the extent necessary to practise optometry, an optometrist is authorised to administer an S2 poison.

(2) Subsection (3) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise optometry.

(3) To the extent necessary to undergo the course of training, the trainee is authorised to administer an S2 poison under the personal supervision of an optometrist.

256AA Orthopists

(1) To the extent necessary to practise orthoptics, an orthoptist who has the relevant qualifications is authorised to administer an S2 or S3 poison under a drug therapy protocol.

(2) In this section—

relevant qualifications means the qualifications required under a drug therapy protocol to administer an S2 or S3 poison.

256A Particular individuals who provide child care

(1) This section applies to an individual who is—

(a) a licensee of a child care service; or

(b) an adult carer in a child care service.

(2) The individual is authorised to administer an S2 or S3 poison to a child, with the written consent of a parent or guardian of the child, at a child care centre, home or other place where child care is being provided in the course of the service.

(3) In this section—

guardian, of a child, means any of the following persons—

(a) a person who is recognised in law as having all the duties, powers, responsibilities and authority relating to the child that, by law, parents have relating to their children;

Editor's note—

See the *Family Law Act 1975* (Cwlth), part VII (Children), division 2 (Parental responsibility).

(b) a person in whose favour a parenting order is in force under the *Family Law Act 1975* (Cwlth);

(c) a person who is entitled to the care and custody of the child under the *Adoption of Children Act 1964*.

Editor's note—

Adoption of Children Act 1964—see the *Acts Interpretation Act 1954*, section 14H and the *Adoption Act 2009*.

parent, of a child, includes—

(a) for any child—the spouse of a parent of the child; and

(b) for an Aboriginal child—a person who, under Aboriginal tradition, is regarded as a parent of the child; and

(c) for a Torres Strait Islander child—a person who, under Island custom, is regarded as a parent of the child; and

(d) a carer of the child under the *Child Protection Act 1999*.

256B Persons with certain asthma management training

(1) To the extent necessary to perform first aid at a workplace or community event, a person who has completed an asthma management course approved by the chief executive is authorised to administer S3 salbutamol or S3 terbutaline.

(2) In this section—

community event includes a sporting or recreational event.

257 Pharmacists

(1) To the extent necessary to practise pharmacy, a pharmacist is authorised to—

(a) dispense or sell, other than by wholesale, an S2, S3 or S7 poison at a dispensary; or

(b) destroy, or otherwise dispose of, an S2 or S3 poison in a way that poses no risk, or only a negligible risk, of a person gaining access to the poison.

(2) A trainee pharmacist may—

(a) sell an S2 or S7 poison at a dispensary under a pharmacist's direction; or

(b) sell an S3 poison at a dispensary under a pharmacist's direction and personal supervision; or

(c) dispense an S2 or S3 poison at a dispensary under a pharmacist's direction and personal supervision.

258 Pharmacy assistants

(1) A competent employee of a pharmacist is authorised to sell an S2 or S7 poison at a dispensary.

(2) For subsection (1), a competent employee must be an employee who is 16 years or more.

258A Physician's assistants

(1) To the extent necessary to perform duties under a practice plan developed for a physician's assistant, the physician's assistant acting under the supervision of his or her supervising medical officer is authorised to—

(a) administer, prescribe or supply an S2 or S3 poison; or

(b) give someone who may administer or supply an S2 or S3 poison an oral or written instruction to administer or supply the poison.

259 Physiotherapists

(1) To the extent necessary to practise physiotherapy, a physiotherapist is authorised to administer an S2 poison.

(2) Subsection (3) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise physiotherapy.

(3) To the extent necessary to undergo the course of training, the trainee is authorised to administer an S2 poison under the personal supervision of a physiotherapist.

260 Podiatrists

(1) To the extent necessary to practise podiatry, a podiatrist is authorised to administer—

(a) an S2 poison; or

(b) adrenalin of a strength of 0.1% or less, if administered by a pre-loaded device for the management of anaphylaxis.

Example for paragraph (b)—

an EpiPen

(2) Subsection (3) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise podiatry.

(3) To the extent necessary to undergo the course of training, the trainee is authorised to administer the following under the personal supervision of a podiatrist—

(a) an S2 poison;

(b) adrenalin of a strength of 0.1% or less, if administered by a pre-loaded device for the management of anaphylaxis.

260A Surgical podiatrists

To the extent necessary to practise podiatry, a surgical podiatrist is authorised to—

(a) administer—

(i) adrenalin when combined with lignocaine, bupivacaine or prilocaine; or

(ii) felypressin when combined with prilocaine; or

(b) prescribe a poison mentioned in appendix 2B, part 2, column 1, on the conditions mentioned opposite the poison in columns 2 and 3; or

(c) give someone who may administer a poison mentioned in appendix 2B, part 2, column 1, a written instruction to administer the poison on the conditions mentioned opposite the poison in columns 2 and 3.

261 Prisons

(1) The general manager of a prison is authorised to issue an S2 or S3 poison to an authorised person who may administer or supply it for the treatment of a prisoner at the prison.

(2) The director of nursing or medical superintendent of a prison, or the pharmacist in charge of a prison dispensary, is authorised to issue an S2 or S3 poison to an authorised person who may administer or supply it for the treatment of a prisoner at the prison.

262 Queensland Ambulance Service

(1) To the extent necessary to perform ambulance duties for the Queensland Ambulance Service, an ambulance officer is authorised to administer an S2 or S3 poison under a clinical practice protocol approved by the Queensland Ambulance Service.

(2) To the extent necessary for performing ambulance duties for the Queensland Ambulance Service, an isolated practice area paramedic at an isolated practice area (paramedics) is authorised to—

(a) obtain an S2 or S3 poison; or

(b) possess an S2 or S3 poison at a place in the isolated practice area (paramedics); or

(c) administer or supply an S2 or S3 poison under a drug therapy protocol.

262A St John Ambulance Australia—Queensland

(1) The State Medical Officer of St John Ambulance Australia—Queensland or the State Medical Officer's delegate is authorised to—

(a) obtain adrenalin for use by a St John Ambulance member; or

(b) issue adrenalin to a St John Ambulance member.

(2) To the extent necessary for performing ambulance duties for St John Ambulance Australia—Queensland, a St John Ambulance member is authorised to possess or administer adrenalin under a clinical practice guideline approved by St John Ambulance Australia—Queensland.

(3) In this section—

adrenalin means adrenalin of a strength of 0.1% or less, if administered by a pre-loaded device for the management of anaphylaxis.

St John Ambulance member means a person who—

(a) is a registered member of St John Ambulance Australia—Queensland; and

(b) holds both of the following current qualifications—

(i) Certificate II in Emergency Medical Service First Response;

(ii) Course in First Aid Management of Anaphylaxis.

263 Registered nurses

(1) To the extent necessary to practise nursing, a registered nurse is authorised to administer an S2 or S3 poison.

(2) To the extent necessary to practise nursing in a rural hospital or an isolated practice area, a rural and isolated practice endorsed nurse is authorised to supply an S2 or S3 poison to or for a person requiring treatment at the rural hospital or in the isolated practice area.

(3) To the extent necessary to practise nursing at a hospital within an isolated practice area, a registered nurse is authorised to supply an S2 or S3 poison, on the oral or written instruction of a doctor, nurse practitioner or physician's assistant, to a person being discharged from the hospital or to an outpatient of the hospital.

(4) To the extent necessary to practise nursing under a sexual health program, a sexual health program nurse is authorised to supply an S2 or S3 poison under a drug therapy protocol.

(5) To the extent necessary to practise nursing, a nurse practitioner is authorised to—

(a) supply an S2 or S3 poison; or

(b) under a drug therapy protocol—

(i) give a nurse, midwife or indigenous health worker an oral or written instruction to administer an S2 or S3 poison; or

(ii) give a registered nurse practising nursing at a hospital in an isolated practice area an oral or written instruction to supply an S2 or S3 poison to a person being discharged from the hospital or an outpatient of the hospital; or

(iii) give a pharmacist an oral or written instruction to supply an S2 or S3 poison; or

(iv) prescribe an S2 or S3 poison.

263A Certain registered nurses at rural hospitals

(1) To the extent necessary to practise nursing at a rural hospital, the following persons are authorised to supply an S2 or S3 poison, on the oral or written instruction of a doctor, nurse practitioner or physician's assistant, to a person being discharged from the hospital or an outpatient of the hospital—

(a) the hospital's director of nursing;

(b) a registered nurse nominated by the hospital's director of nursing.

(2) However, subsection (1) applies only if—

(a) the hospital does not employ a pharmacist; or

(b) if the hospital employs a pharmacist—the pharmacist is absent from the hospital at the time the poison is supplied.

264A Ship's master

Subject to section 270(2), the master of a ship in the State is authorised to administer an S2 or S3 poison on the ship for the treatment of a person in an emergency.

265 State analysts

(1) To the extent necessary to perform an analyst's official duties, a State analyst is authorised to—

(a) manufacture an S2, S3 or S7 poison; or

(b) use an S2, S3 or S7 poison or destroy it.

(2) A trainee State analyst, under the personal supervision of a State analyst, is authorised to—

(a) manufacture an S2, S3 or S7 poison; or

(b) use an S2, S3 or S7 poison or destroy it.

265AA Trainees in certain occupations

(1) This section applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to carry out a relevant occupation.

(2) To the extent necessary to undergo the course of training, the trainee is authorised to administer an S2 or S3 poison under the personal supervision of an authorised person carrying out the relevant occupation.

(3) However, the trainee may only administer a poison under subsection (2), if—

(a) the authorised person is authorised under this regulation to administer the poison; and

(b) the trainee administers the poison under the conditions (if any) that would apply to the administration of the poison by the authorised person.

(4) In this section—

relevant occupation means an occupation as a dentist, doctor, indigenous health worker, midwife, registered nurse or veterinary surgeon.

265A Universities

(1) To the extent necessary for use in research or teaching at a university, the vice-chancellor of the university is authorised to give an S2 or S3 poison to a member of the faculty or staff of the university.

(2) The vice-chancellor may delegate the authority to the bursar or another appropriately qualified officer of the university.

(3) In this section—

appropriately qualified, for an officer of a university, includes having the qualifications, experience or standing appropriate to the exercise of the power.

265B Veterinary nurses

(1) To the extent necessary to practise veterinary nursing, a veterinary nurse who has successfully completed a certified course of training relating to the use of S2 or S3 poisons with animals is authorised to administer an S2 or S3 poison to an animal—

(a) under the supervision of a veterinary surgeon; or

(b) if the S2 or S3 poison is a dispensed medicine, under the directions on the label attached to the poison's container.

(2) Subsection (3) applies to a person (a ***trainee***) who is undergoing a course of training, the successful completion of which will qualify the trainee to practise as a veterinary nurse.

(3) To the extent necessary to undergo the course of training, the trainee is authorised to administer an S2 or S3 poison to an animal—

(a) under the personal supervision of a veterinary surgeon; or

(b) if the S2 or S3 poison is a dispensed medicine, under the directions on the label attached to the dispensed medicine's container.

266 Veterinary surgeons

To the extent necessary to practise veterinary medicine, a veterinary surgeon is authorised to administer, dispense, prescribe or sell an S2, S3 or S7 poison.

267 Watch house keepers etc.

To the extent necessary for ensuring a person held at a watch house or police establishment receives an S2 or S3 poison lawfully prescribed or supplied for the person, the watch house keeper, or the person performing the duties of watch house keeper at a police establishment, is authorised to give the poison to the person for whom it was prescribed or

supplied under the directions stated on the label attached to the poison's container.

267A Wholesale representatives

A wholesale representative is authorised to display or give an S2 or S3 poison, as a sample, to a dentist, doctor, pharmacist or veterinary surgeon.

Division 3 General

268 Employees and other persons authorised

A competent adult acting for a person who is licensed under part 1 is authorised to sell an S2, S3 or S7 poison on the same conditions as apply to the licensed person.

270 When endorsement is not needed

(1) A person (a ***carer***) does not need an endorsement under this regulation to help another person (an ***assisted person***) take an S2 or S3 poison that has been supplied for the assisted person, if—

(a) the assisted person asks for the carer's help to take the poison; and

(b) for an S2 poison—the carer helps the assisted person take the poison under the directions for use of the poison; or

(c) for an S3 poison—the carer helps the assisted person take the poison under the directions on the label attached to the poison's container.

(2) A person does not need an endorsement under this regulation to administer an S2 or S3 poison if the S2 or S3 poison is administered to a person on the ship on which the poison is

kept under the *Navigation Act 1912* (Cwlth) or *Transport Operations (Marine Safety) Act 1994*.

(3) A person does not need an endorsement under this regulation to administer potassium iodide in a product registered under the *Therapeutic Goods Act 1989* (Cwlth), if the person administers the product—

(a) for the treatment of a person in an emergency; and

(b) under the directions on the label attached to the product's container.

(4) A person does not need an endorsement to administer, dispense, manufacture, obtain, possess, prescribe, supply or use a controlled drug for a clinical trial approved by—

(a) the Therapeutic Goods Administration; or

(b) a human research ethics committee registered by the Australian Health Ethics Committee established under the *National Health and Medical Research Council Act 1992* (Cwlth).

Part 4 Regulated poisons

270A Approval must not be granted for therapeutic use of S9 poisons

The chief executive must not grant an approval to a person to manufacture, obtain, possess or use an S9 poison for human therapeutic use.

271 Prohibition on dispensing etc. regulated poisons

(1) A person must not destroy, dispense, manufacture, obtain, possess, prescribe, sell or use a regulated poison unless the person—

(a) dispenses, manufactures, obtains, possesses, prescribes, sells or uses the regulated poison under an approval; or

(aa) is a poison manufacturer who manufactures the regulated poison under a poison manufacturer licence; or

(b) is a poisons manufacturer or wholesaler who obtains or possesses for sale, or sells, a regulated poison in appendix 7, items 1 to 7 of this regulation to a person who has an approval under subsection (1)(a) to obtain the poison; or

(c) is a pharmacist and obtains or possesses cyanide for sale to a person who has a cyanide permit; or

(d) is a pharmacist and obtains or possesses strychnine for sale to a person who has a strychnine permit; or

(e) obtains or uses cyanide under a cyanide permit or strychnine under a strychnine permit; or

(f) is an inspector who possesses the regulated poison in the course of the inspector's official duties; or

(g) is a State analyst, or a trainee State analyst under the supervision of a State analyst, who manufactures, possesses, uses or destroys the regulated poison while performing the analyst's, or trainee's, official duties; or

(h) is the person in charge of a forensic and scientific facility operated by the State, or a person nominated in writing by the person in charge, who possesses or destroys a regulated poison while performing the person's official duties.

Maximum penalty—80 penalty units.

(2) Subsection (1) does not apply to a person who uses a regulated poison mentioned in appendix 7, items 1 to 7 of this regulation, other than fluoroacetic acid or strychnine, that is registered by the Australian Pesticides and Veterinary Medicines Authority under the *Agricultural and Veterinary*

Chemicals Code Act 1994 (Cwlth) for use as a pesticide, for its registered purpose.

(3) Also, subsection (1) does not apply to a person who manufactures, obtains, possesses, sells or uses cannabis sativa under—

(a) a licence issued under the *Drugs Misuse Act 1986*, section 49; or

(b) a regulation under section 48(1) of that Act.

(4) Subsection (1) does not apply to a health service employee or a public service employee employed in the department, who obtains or possesses a regulated poison to—

(a) give the poison to a member of the police service; or

(b) arrange, in a way authorised by the chief executive, for destruction of the poison.

(5) Subsection (1) does not apply to—

(a) a drug control officer within the meaning of the *Police Powers and Responsibilities Act 2000*, section 726 who obtains or possesses a regulated poison to perform the functions of a drug control officer in the police service, while the officer is actually performing the functions; or

(b) a drug control officer within the meaning of the *Corrective Services Act 2006*, section 344B who obtains or possesses a regulated poison to perform the functions of a drug control officer in the department in which the *Corrective Services Act 2006* is administered, while the officer is actually performing the functions.

272 Fluoroacetic acid in baits

(1) An authorised person under the *Land Protection (Pest and Stock Route Management) Act 2002* may give prepared baits containing not more than 0.03% fluoroacetic acid to another person (the ***user***) to control declared pests under that Act.

(2) The user may possess and use the baits only under the written conditions given to the user by the authorised person.

(3) An adult employee of the user, or other adult authorised by the user as agent of the user, may also possess and use the baits under the written conditions.

(4) The user must—

(a) comply with the written conditions; and

(b) ensure the user's employees or authorised agents comply with the written conditions.

Maximum penalty for subsection (4)—80 penalty units.

Part 5 Dispensing or selling poisons

273A Quality standard for selling S2 or S3 poisons

A pharmacist must not sell an S2 or S3 poison unless the pharmacist—

(a) has prepared or adopted a quality standard for selling S2 or S3 poisons; and

(b) in selling the S2 or S3 poison, complies with the quality standard.

Maximum penalty—60 penalty units.

274 Dispensing or selling S2, S3 or S7 poisons

(1) A pharmacist must not dispense a poison on a prescription unless the poison dispensed—

(a) conforms with the prescription; or

(b) is dispensed under section 275.

Maximum penalty—40 penalty units.

(2) Also, a pharmacist must not sell an S2 or S3 poison to a ship's master unless the pharmacist receives a purchase order for the poison signed by the ship's master.

Maximum penalty—40 penalty units.

(3) Subsection (1) does not prevent a person delivering or handing a poison dispensed by a dispenser to a person for whose use the poison is prescribed or the person's agent.

275 Dispensing generic poisons

(1) This section applies if a poison is specified in a prescription by a brand name (the ***specified poison***) and the poison is also available under another brand name or without a brand name (both the ***generic poison***).

(2) A dispenser may dispense the generic poison in place of the specified poison if the poison is dispensed at a public sector hospital.

(3) Also, a dispenser may dispense the generic poison in place of the specified poison at a place other than a public sector hospital if—

(a) the specified poison and the generic poison are both poisons to which a pharmaceutical benefit applies under the National Health Act; and

(b) the prescriber did not indicate on the prescription that only the specified poison was to be dispensed; and

(c) either—

(i) both of the following apply—

(A) the schedule of pharmaceutical benefits, issued by the Commonwealth department within which the National Health Act is administered, states the specified poison and the generic poison are equivalent;

(B) a determination is in force for the generic poison under the National Health Act, section 85(6); or

(ii) if the dispenser is a pharmacist, the pharmacist has, using a relevant process under the pharmacist's quality standard for dispensing a poison, confirmed the specified drug and the generic drug are equivalent; and

(d) it is lawful to dispense the generic poison on prescription; and

(e) the person to whom it is dispensed asks for, or agrees to, the dispensing of the generic poison in place of the specified poison.

(4) If a generic poison is dispensed, the dispenser must enter, in the prescription—

(a) the brand name of the generic poison; or

(b) if the generic poison does not have a brand name, the name of the manufacturer of the poison.

Maximum penalty—20 penalty units.

276 Labelling dispensed medicines

(1) A person who sells a poison as a dispensed medicine must securely attach to the medicine's container a label, as required by this section, with the following warnings printed on it—

(a) 'Keep out of reach of children';

(b) if the prescriber is a veterinary surgeon—'For animal treatment only'.

Maximum penalty—20 penalty units.

(2) The warnings must be printed in red on a background of contrasting colour and in bold-faced sans serif capital letters with a face depth of at least 1.5mm.

(3) The label must also have written on it—

(a) if the dispensed medicine is for human use—the name of the person for whose use it is intended; and

(b) if the dispensed medicine is for an animal—the name of the animal's owner; and

(c) the name and address of the person selling the dispensed medicine; and

(d) a description of the name of the dispensed medicine under subsection (4) or (5); and

(e) a description of the strength of, and the quantity or volume of, the dispensed medicine; and

(f) directions about the use of the medicine; and

(g) the date the medicine is dispensed; and

(h) the dispenser's initials; and

(i) if the medicine is for internal human therapeutic use and is a substance specified in appendix K of the standard—

(i) 'This medication may cause drowsiness. If affected do not drive a vehicle or operate machinery. Avoid alcohol.'; or

(ii) 'This medication may cause drowsiness and may increase the effects of alcohol. If affected do not drive a motor vehicle or operate machinery.'; and

Editor's note—

appendix K (Drugs required to be labelled with a sedation warning) of the standard

(j) if the medicine's expiry date is not visible—the medicine's expiry date.

(4) The dispensed medicine must be described by—

(a) its approved name; or

Editor's note—

For the definition *approved name* see part 1 of the standard.

(b) the name the prescriber wrote on the prescription or, if a different brand of the medicine is dispensed, the name of the brand dispensed; or

(c) its trade name; or

(d) the approved name of each poison in the medicine; or

(e) the name of each poison in the medicine as written on the prescription.

(5) Despite subsection (4), a doctor may state in a prescription that the contents of a dispensed medicine must be described in a particular way that is not a false description.

276A Sale of S2 or S3 poison after expiry date

A person must not sell an S2 or S3 poison after the expiry date for the poison stated on the container for the poison or a label attached to the container.

Maximum penalty—60 penalty units.

277 Sale of S3 poisons

(1) A pharmacist or a person who is approved to dispense a poison under a pharmacist's direction and personal supervision, (the ***seller***) must not sell an S3 poison unless—

(a) for S3 pseudoephedrine—

(i) the seller is reasonably satisfied the purchaser has a therapeutic need for the S3 pseudoephedrine; and

(ii) if the seller does not know the identity of the purchaser—the purchaser gives the seller an acceptable form of identification; or

(b) for another S3 poison—the seller is reasonably satisfied—

(i) the purchaser has a therapeutic need for the poison; and

(ii) of the purchaser's identity.

Maximum penalty—40 penalty units.

(2) The seller must give the purchaser advice on the dosage, frequency of administration, general toxicity, adverse effects, contraindications and precautions to be observed in using the poison.

Maximum penalty—40 penalty units.

(3) The seller must securely attach to the container in which the poison is sold a label, as required by this section, with the following warnings printed on it—

(a) 'Keep out of the reach of children';

(b) if the poison is for use for an animal—'For animal treatment only'.

Maximum penalty—40 penalty units.

(4) The warnings must be printed in red bold-faced sans serif capital letters with a face depth of at least 1.5mm on a background of contrasting colour.

(5) The label must also have written on it—

(a) if the poison is for human use—the name of the person for whose treatment it is intended; and

(b) if the poison is for animal treatment—the name of the animal's owner; and

(c) if the seller is a pharmacist or a person approved to dispense a poison under a pharmacist's direction and personal supervision—the name and address of the dispensary at which the poison is dispensed; and

(d) directions about the use of the poison; and

(e) the date the poison was sold.

(6) The poison must be described by—

(a) its approved name; or

(b) its trade name; or

(c) the approved name of each poison in the preparation.

(7) Subsections (1)(b) and (2) to (6) do not apply to the sale of—

(a) S3 salbutamol or S3 terbutaline to a person mentioned in section 256B for use for first aid; or

(b) an S3 poison to a ship's master for use for first aid on the ship.

278 Restrictions on packs of organo-phosphorus compounds

(1) A person must not sell a liquid or emulsive preparation in a container containing less than 500mL of an S7 organo-phosphorus compound.

Maximum penalty—60 penalty units.

(2) A person must not sell, in dry or powder form, a container of a preparation containing less than 750gm of an S7 organo-phosphorus compound.

Maximum penalty—60 penalty units.

279 Restriction on paraquat preparations

(1) A person must not sell a preparation containing paraquat in a container of less than 5L of the preparation.

Maximum penalty—80 penalty units.

(2) A person must not sell a liquid preparation that contains paraquat unless the preparation—

(a) is coloured green or blue; and

(b) contains sufficient stenching agent to produce an offensive odour.

Maximum penalty—80 penalty units.

Part 6 Storage of poisons

284 Storage of poisons

(1) A person must not store a poison for sale within reach of children.

Maximum penalty—40 penalty units.

(2) A person who sells an S2 or S3 poison by retail must store the poison in a place that is not accessible to the public.

Maximum penalty—40 penalty units.

(3) A person who sells an S7 poison by retail must—

(a) store the poison—

(i) in a receptacle or storeroom that is kept locked; or

(ii) in another place the chief executive is reasonably satisfied is a secure place; and

(b) keep personal possession of the key to the place or ensure the key is in the possession of another responsible adult authorised by the person.

Maximum penalty—40 penalty units.

(4) A person who sells by retail a poison that contains an organic solvent distilling under 150ºC at 101–103kPa and is labelled as, or for use as, an adhesive must store the poison in a way that ensures it is not accessible to the public.

Maximum penalty—40 penalty units.

(5) A poison wholesaler must store an S2, S3 or S7 poison in a way that ensures the poison is not accessible to the public.

Maximum penalty—40 penalty units.

Part 7 Records of sales of poisons

285 Record of sale of S7 poison

(1) A person must not sell an S7 poison by retail unless, at the time of the sale, the person makes an accurate record of the sale—

(a) by making an entry in a book (a ***poisons sale book***); or

(b) by giving the person buying the poison (the ***purchaser***) an invoice that has a unique number.

Maximum penalty—20 penalty units.

(2) The person selling the S7 poison must—

(a) include the following in the poisons sale book or invoice—

(i) the date of the sale;

(ii) the name and quantity or volume of the poison sold;

(iii) the purpose for which the poison is required;

(iv) the purchaser's name and address;

(v) if the purchaser buys the poison in person—the purchaser's signature;

(vi) if the order for the poison was a telephone or written order—a note about the way the order was placed where the purchaser would sign the book or invoice if it was a personal sale; and

(b) for a record of the sale made by giving the purchaser an invoice—keep a copy of the invoice.

Maximum penalty—20 penalty units.

(2A) If the order for the S7 poison was a written order, the person selling the poison must keep the written order for 2 years from the day the person received it.

Maximum penalty—20 penalty units.

(3) The person must not use the poisons sales book for another purpose.

Maximum penalty—20 penalty units.

285A Record of sale of S3 pseudoephedrine

(1) A person who sells S3 pseudoephedrine to someone (the ***purchaser***) by retail must, at the time of the sale, make a record (a ***pseudoephedrine sales record***) of each of the following particulars for the sale—

(a) the date of the sale;

(b) the brand name and quantity of S3 pseudoephedrine sold;

(c) the purchaser's name and address;

(d) if the person asks the purchaser to give the person an acceptable form of identification—

(i) the type of document given; and

(ii) the unique number assigned to the document by the entity that issued the document.

Maximum penalty—20 penalty units.

(2) The pseudoephedrine sales record must be kept as an electronic record that is accessible online by both the chief executive and the commissioner of police.

(3) The person must keep the pseudoephedrine sales record for at least 2 years after the date of the sale.

Maximum penalty—20 penalty units.

Part 8 General

285B Certain losses etc. immediately reported to chief executive

If a person who sells a poison that is S3 pseudoephedrine knows, or reasonably suspects, that any of the poison that is S3 pseudoephedrine has been lost, misappropriated or stolen, the person must immediately give the chief executive a written notice about the loss, misappropriation or theft.

Maximum penalty—40 penalty units.

286 Prohibition on dispensing or supplying poisons to child under 16

(1) A person (the ***supplier***) must not dispense or supply an S2, S3, S6 or S7 poison to a child under 16 years unless the supplier—

(a) is a doctor or nurse practitioner; or

(b) is a pharmacist acting on a prescription or a doctor's or nurse practitioner's written instruction at a hospital.

Maximum penalty—40 penalty units.

(2) A person (the ***supplier***) must not supply an S2 or S3 poison to a child under 16 years unless the supplier is a doctor, isolated practice area paramedic, registered nurse or veterinary surgeon who, under this chapter, may supply an S2 or S3 poison.

Maximum penalty—40 penalty units.

(3) A registered nurse, other than a rural and isolated practice endorsed nurse, must not supply an S2 or S3 poison to a child under 16 years unless the nurse has a doctor's or nurse practitioner's oral or written instruction to supply the poison to the child.

Maximum penalty—40 penalty units.

(4) Subsection (5) applies to—

(a) a supplier who may supply a poison under subsection (1) or (2), other than a veterinary surgeon; or

(b) a registered nurse who may supply an S3 poison under subsection (3).

(5) Despite subsections (1), (2) or (3), the supplier or registered nurse may supply the following S3 poisons to a child who is 14 years or more if the supplier or registered nurse is reasonably satisfied the child has a therapeutic need for the poison—

(a) salbutamol;

(b) terbutaline.

287 False, misleading or incorrect entries

A person must not make an entry in a book or other record required to be kept under this chapter that the person knows is a false, misleading or incomplete entry.

Maximum penalty—20 penalty units.

288 Poisons for animals not to be dispensed etc. for human therapeutic use

A person must not, without an approval, dispense, prescribe, sell or use for human therapeutic use, a poison labelled, manufactured, packed or prepared for use for animal treatment.

Maximum penalty—40 penalty units.

289 Poisons for animals not to be administered to humans

A person must not, without an approval, administer to himself, herself or someone else a poison labelled,

manufactured, packed or prepared for use for animal treatment.

Maximum penalty—40 penalty units.

290 Unsafe disposal of poisons

(1) A person must not discharge, place or otherwise dispose of a poison—

(a) in or on an alley, street, public land or public place; or

(b) in or on other land or premises or another place, without the permission of the owner or occupier of the land, premises or place; or

(c) into or on a channel, creek, dam, drain, river, road, street, watercourse or another body of water.

(2) However, subsection (1) does not apply to—

(a) a person laying baits for pest destruction; or

(b) a person applying herbicides for the destruction of noxious weeds or unwanted vegetation; or

(c) a local government applying insecticides for horticultural purposes; or

(d) a person applying insecticides to a creek, dam, river, watercourse or other body of water for the control or destruction of mosquitoes; or

(e) a person applying insecticides to an alley, lane, place, public place or public land, road or thoroughfare for the control or destruction of midges or mosquitoes.

(3) However, subsection (2) applies only if a person doing an act mentioned in the subsection is doing it—

(a) under a permit or approval granted by the chief executive or a local government; or

(b) under the *Land Protection (Pest and Stock Route Management) Act 2002*.

(4) Despite subsection (2), a person must not discharge, place or otherwise dispose of a poison in a way that—

(a) endangers the life or safety of a person or a domestic animal; or

(b) exposes food, drink or a condiment or another poison or a drug to the risk of contamination by the poison; or

(c) gives access to the poison to someone not endorsed to possess it.

Maximum penalty—40 penalty units.

291 Labels and containers

(1) A person must not change, cover, deface or remove a brand, declaration, label, mark or statement that is required under this chapter to be fixed to, or shown on, the container of a poison.

Maximum penalty—40 penalty units.

(2) A person must not possess or sell a cracked or damaged package containing a poison.

Maximum penalty—40 penalty units.

(3) If a person becomes aware that a package containing a poison is cracked or damaged, the person must immediately—

(a) empty the contents of the package into a poison container labelled under this regulation; or

(b) if the contents are to be disposed of—dispose of them under any requirements of the local government for the area in which the person is located.

Maximum penalty—40 penalty units.

(4) A person must not soak, wash or otherwise treat a bottle or container used, or of a type commonly used, to hold a poison, or that has a brand, mark or label on it stating that the bottle or container has been used to hold a poison, in a tank or receptacle used to soak, wash or treat bottles or other

containers of a type commonly used to hold human or animal food or drink or a condiment.

Maximum penalty—40 penalty units.

292 Advertising of poisons

(1) A person must not advertise, or cause someone else to advertise, a substance that is or contains an S3 poison whether or not the poison is named in the advertisement.

Maximum penalty—40 penalty units.

(2) Subsection (1) does not apply to—

(a) an advertisement in a professional or trade journal; or

(b) a price list, advertisement or promotional material intended for circulation only in the dental, medical, pharmaceutical or veterinary professions or the wholesale poison trade; or

(c) an S3 poison that, under the standard, may be advertised; or

(d) a price list that complies with the document called 'Price Information Code of Practice', published by the Therapeutic Goods Administration, as in force from time to time.

Editor's note—

A copy of the Price Information Code of Practice may be obtained from the Therapeutic Goods Administration's website at <www.tga.gov.au>.

(3) A person must not advertise, or cause someone else to advertise, an offer to obtain or sell an S2, S3 or S7 poison unless the person is endorsed under this regulation to sell the poison.

Maximum penalty—40 penalty units.

(4) A person must not refer to an S9 poison in an advertisement.

Maximum penalty—40 penalty units.

(5) Subsection (4) does not apply to a person who refers to cannabis sativa in an advertisement in connection with an activity authorised under the *Drugs Misuse Act 1986*, section 47 or 48(1).

292A Automatic machines—Act, s 106

For section 106(2) of the Act, the sale or supply of an S2 or S3 poison by means of an automatic machine or similar mechanical device is prohibited.

293 Safe keeping of poisons

(1) A person must not store a poison within reach of children.

Maximum penalty—40 penalty units.

(2) A person must not carry, handle or store a poison in a way that may allow the poison to mix with, or contaminate, food, drink or a condiment or a drug or poison for human or animal use even if the container in which the poison is carried, stored or handled breaks or leaks.

Maximum penalty—40 penalty units.

294 Embalming

A person must not place arsenic or strychnine, or a substance or chemical compound containing arsenic or strychnine, on or in the body, or a part of the body, of a deceased person for embalming the body or part of the body.

Maximum penalty—60 penalty units.

295 Hawking of poisons

A person must not sell an S2, S3 or S7 poison in a street or from place to place unless the person has an approval to sell the poison in a street or from place to place.

Maximum penalty—40 penalty units.

296 Samples of poisons

A person must not distribute a sample of a poison in a street or from place to place.

Maximum penalty—40 penalty units.

297 Colouring of grain baits

A person must not sell or use, for pest destruction, a cereal, grain or meal containing a poison unless the cereal, grain or meal is coloured in a certified way.

Maximum penalty—40 penalty units.

298 Vaporisers and other devices

(1) A person must not sell or use a device (other than an electrical or other heating device) that contains a poison for the destruction of insects, unless—

(a) the poison in the device is inaccessible to children and domestic animals; and

(b) the device is not a hazard to people in its vicinity; and

(c) the device has been certified for use for insect destruction.

Maximum penalty—40 penalty units.

(2) A person must not sell or use an electrical or other heating device for vaporising a poison unless the device—

(a) has a vaporisation rate of more than 1gm per day when fully charged with the poison; and

(b) is certified for the purpose.

Maximum penalty—40 penalty units.

299 Prohibition of sale of chalk etc. containing poison

A person must not—

(a) sell chalk, crayons, finger colours, pencils, poster paints, school pastels or show-card colours containing a poison; or

(b) sell an artist's brush or pencil containing a poison in the outside lacquer of the brush or pencil.

Maximum penalty—40 penalty units.

300 Use of food or drink containers for poisons prohibited

A person must not use, or allow to be used, a food or drink container to hold a poison.

Maximum penalty—40 penalty units.

301 Fireworks

A person must not manufacture or sell fireworks containing arsenic.

Maximum penalty—20 penalty units.

302 Keeping records

A person who, under this chapter, must keep a document or record of transactions in poisons must—

(a) ensure it is kept in good condition, as far as practicable; and

(b) keep it for 2 years after the last entry that is made in it.

Maximum penalty—20 penalty units.

Chapter 5 Miscellaneous

Part 1 General

305 Language of documents

(1) A person who is required under this regulation to give, issue or keep a document must write the document in English.

Maximum penalty—40 penalty units.

(2) However, the person may also write the document in another language if it is reasonably necessary to ensure a person named in the document understands any instructions given in the document.

Example—

The instructions on a medicine dispensed for someone who does not speak English may be both in English and the language the person speaks.

308 Attempts to commit offences

(1) A person who attempts to commit an offence against this regulation commits an offence.

Maximum penalty—half the maximum penalty for committing the offence.

(2) The Criminal Code, section 4, applies to subsection (1).

Part 2 Transitional provisions

Division 1 Transitional provisions for Health (Drugs and Poisons) Amendment Regulation (No. 1) 2000

309 Definition for div 1

In this division—

commencement means the commencement of this section.

310 Certain authorities continue

(1) This section applies to a written authority in force immediately before the commencement.

(2) The written authority is taken to be an approval granted by the chief executive under section 18 after the commencement.

(3) In this section—

written authority means a written authority given to a person by the chief executive under section 73, 182, 269 or 273A before the commencement.

311 How certain applications are to be considered

(1) This section applies to an application for an approval mentioned in section 186(a) made before the commencement.

(2) If the chief executive decided the application before the commencement, this regulation, as in force immediately before the commencement, continues to apply in relation to the application, including any appeal from the decision about the application, as if the *Health (Drugs and Poisons) Amendment Regulation (No. 1) 2000* had not commenced.

(3) Without limiting subsection (2), if there is an appeal against the chief executive's decision and a court decides to set aside

the decision and return the issue to the chief executive with a direction to reconsider the application, the chief executive must reconsider, and decide, the application under this regulation as in force before the commencement of the *Health (Drugs and Poisons) Amendment Regulation (No. 1) 2000*.

(4) If the chief executive had not decided the application before the commencement, this regulation, as in force after the commencement, applies to the application.

Division 2 Transitional provision for Health (Drugs and Poisons) Amendment Regulation (No. 2) 2003

312 Certain persons may operate a controlled drugs administration facility without an approval

(1) This section applies to a person who, immediately before the commencement, operated a facility that is, from the commencement, a controlled drugs administration facility.

(2) Despite section 122A, the person may operate the facility without an operating approval for so long as it operates—

(a) continuously from the commencement; and

(b) at the place where it operated immediately before the commencement.

(3) In this section—

commencement means commencement of this section.

Division 3 Transitional provision for Health (Drugs and Poisons) Amendment Regulation (No. 2) 2005

313 Continuation of former ocular therapeutics protocol

(1) This section applies to a former ocular therapeutics protocol.

(2) The former ocular therapeutics protocol is taken to be an ocular therapeutics protocol approved and published by the drug authority committee.

(3) In this section—

former ocular therapeutics protocol means an ocular therapeutics protocol in force under this regulation immediately before the commencement of this section.

Division 4 Transitional provisions for Health (Drugs and Poisons) Amendment Regulation (No. 1) 2009

314 Definitions for div 4

In this division—

commencement means commencement of this section.

committee means the Optometrists Drug Authority Committee established under the pre-amended regulation, section 308A.

pre-amended regulation means this regulation as in force immediately before the commencement.

315 Dissolution of committee

(1) On the commencement—

(a) the committee is dissolved; and

(b) the members of the committee go out of office.

(2) No compensation is payable to a member because of subsection (1).

Appendix 1 Provisions not applying to morphine or opium in compounded preparations

section 9

section 50 (Records of transactions to be kept by licensee)

section 84(3) (Dealing with paper prescriptions and certain written instructions)

section 84A (Dealing with electronic prescriptions)

section 86 (Record of transactions involving controlled drugs to be kept by pharmacist)

section 87 (Entries to be made in controlled drugs record)

section 89 (Authorised persons to obtain controlled drugs on purchase order)

section 90 (Sale of controlled drugs to authorised persons)

chapter 2, part 7 (Records of controlled drugs)

section 120 (Notice required if lengthy treatment with controlled drug)

section 123 (Self-administration of controlled drugs by authorised persons prohibited)

Appendix 2 Application fees for licences

section 17

			$
1	Application for—		
	(a)	controlled drug manufacturer licence	543.00
	(b)	restricted drug manufacturer licence	543.00
	(c)	controlled drug wholesaler licence	543.00
	(d)	restricted drug wholesaler licence	543.00
	(e)	poison manufacturer licence	543.00
	(f)	poison wholesaler licence	543.00
	(g)	general poison licence	256.00
	(h)	licence to sell S7 poisons for other than human therapeutic use	256.00
	(i)	wholesale representative licence	69.50
2	Application for renewal of—		
	(a)	controlled drug manufacturer licence	440.50
	(b)	restricted drug manufacturer licence	440.50
	(c)	controlled drug wholesaler licence	440.50
	(d)	restricted drug wholesaler licence	440.50
	(e)	poison manufacturer licence	440.50
	(f)	poison wholesaler licence	440.50
	(g)	general poison licence	153.50
	(h)	licence to sell S7 poisons for other than human therapeutic use	153.50
	(i)	wholesale representative licence	69.50

Appendix 2A Drugs an ambulance officer may obtain, possess and administer

sections 66 and 174

Part 1 Controlled drugs

	Column 1	Column 2
1AA	ketamine	paramedic 4
1	morphine	paramedic 3, paramedic 3 (ECP), paramedic 4

Part 2 Restricted drugs

	Column 1	Column 2
1AA	atropine	paramedic 3 (ECP), paramedic 4
1AAA	amiodarone	paramedic 4
1	benztropine	paramedic 3 (ECP), paramedic 4
2	box jellyfish antivenom	paramedics 1, 2 and 3, paramedic 3 (ECP), paramedic 4
2A	ceftriaxone	paramedic 3, paramedic 4
2AA	clopidogrel	paramedic 4
2B	enoxaparin	paramedic 4
3	frusemide	paramedic 3 (ECP), paramedic 4
4	haloperidol	paramedic 3 (ECP), paramedic 4
4A	heparin	paramedics 3 and 4
5	hydrocortisone	paramedic 3 (ECP), paramedic 4
6	lignocaine	paramedic 4

	Column 1	Column 2
7	methoxyflurane	paramedics 1, 2 and 3 (ECP), paramedic 4
8	metoclopramide	paramedic 3, paramedic 3 (ECP), paramedic 4
9	midazolam	paramedic 3, paramedic 3 (ECP), paramedic 4
10	naloxone	paramedic 3, paramedic 3 (ECP), paramedic 4
11	nitrous oxide	paramedics 1, 2 and 3, paramedic 3 (ECP), paramedic 4
12	promethazine	paramedic 3 (ECP), paramedic 4
12A	reteplase	paramedic 4
13	salbutamol	paramedics 1, 2 and 3, paramedic 3 (ECP), paramedic 4
14	tenecteplase	paramedic 4

Part 3 Particular restricted drugs administered by paramedics 3 (ECP)

benztropine

frusemide

haloperidol

hydrocortisone

metoclopramide

promethazine

Appendix 2B Restricted drugs and poisons for surgical podiatrists

sections 172A and 260A

Part 1 Restricted drugs

Column 1 Restricted Drugs	Column 2 Preparation type	Column 3 Total dosage for a person's condition
amoxycillin or amoxycillin with clavulanic acid	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition
cephalexin	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition
codeine	oral	not exceeding 20 doses for the relevant condition with each dose being not more than 30mg in combination with each 500mg of paracetamol
diazepam	oral	not exceeding 10 doses of 5mg each for the relevant condition
diclofenac	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition
dicloxacillin	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition
doxycycline	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition
erythromycin	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition

Column 1	Column 2	Column 3
Restricted Drugs	**Preparation type**	**Total dosage for a person's condition**
ibuprofen	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition
metronidazole	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition
mupirocin	topical	not exceeding that usually required for a 10 day course of treatment for the relevant condition
naproxen	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition
roxithromycin	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition
temazepam	oral	not exceeding 2 doses of 10mg each for the relevant condition

Part 2 Poisons

Column 1	Column 2	Column 3
Poisons	**Preparation type**	**Total dosage for a person's condition**
fexofenadine	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition
hydrocortisone	topical	not exceeding that usually required for a 10 day course of treatment for the relevant condition with each dose being of a strength of 1% or less

Column 1 Poisons	Column 2 Preparation type	Column 3 Total dosage for a person's condition
loratadine	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition
promethazine	oral	not exceeding that usually required for a 10 day course of treatment for the relevant condition

Appendix 3 Who must sign certain purchase orders for controlled or restricted drugs

sections 89(4) and 200(4)

Part 1 Controlled drugs

	Column 1	Column 2
1	ambulance officer	the commissioner of the Queensland Ambulance Service or the commissioner's delegate
2	controlled drug manufacturer or wholesaler	the licensee or an adult employee authorised by the licensee to sign purchase orders for controlled drugs
3	Royal Flying Doctor Service of Australia base or outpost in Queensland	the person in charge of the base or outpost
4	a ship in Queensland	if the ship's master is authorised to obtain the drug under section 69(1)—the ship's master; or if the ship's master is authorised to obtain the drug under section 69(2)—a doctor
5	person who has an endorsement under section 18(1)	the endorsed person or a competent adult authorised by the person to sign the order
6	a person who has an approval under chapter 2, part 3 (Regulated controlled drugs)	the person

	Column 1	Column 2
7	detention centre	the detention centre's manager
		the detention centre's director of nursing, medical superintendent or registered nurse in charge
		the pharmacist in charge of the detention centre's dispensary
8	hospital	the hospital's medical superintendent or, in the medical superintendent's absence, a doctor nominated in writing by the medical superintendent
		the hospital's director of nursing
		the pharmacist in charge of the hospital's dispensary or, in the pharmacist's absence, a pharmacist nominated in writing by the pharmacist in charge
		the hospital's registered nurse in charge
9	nursing home	the nursing home's director of nursing or medical superintendent
		the pharmacist in charge of the nursing home's dispensary
		the registered nurse in charge of the nursing home
10	prison	the prison's general manager
		the prison's director of nursing, medical superintendent or registered nurse in charge
		the pharmacist in charge of the prison's dispensary

Part 2 Restricted drugs

	Column 1	Column 2
1	ambulance officer	the commissioner of the Queensland Ambulance Service or the commissioner's delegate
2	restricted drug manufacturer or wholesaler	the licensee or an adult employee authorised by the licensee to sign purchase orders for restricted drugs
3	Royal Flying Doctor Service of Australia base or outpost in Queensland	the person in charge of the base or outpost
4	a ship in Queensland	if the ship's master is authorised to obtain the drug under section 178(1)—the ship's master; or if the ship's master is authorised to obtain the drug under section 178(2)—a doctor
5	mine petroleum well petroleum field production facility petroleum pipeline transport facility	the person in charge on the site
6	person who has an endorsement under section 18(1)	the endorsed person or a competent adult authorised by the person to sign the order
7	person who has an approval under chapter 3, part 3 (Regulated restricted drugs)	the person
8	detention centre	the detention centre's manager the detention centre's director of nursing, medical superintendent or registered nurse in charge

	Column 1	Column 2
		the pharmacist in charge of the detention centre's dispensary
9	hospital	the hospital's medical superintendent or, in the medical superintendent's absence, a doctor nominated in writing by the medical superintendent
		the hospital's director of nursing
		the pharmacist in charge of the hospital's dispensary or, in the pharmacist's absence, a pharmacist nominated in writing by the pharmacist in charge
		the hospital's registered nurse in charge
10	nursing home	the nursing home's director of nursing or medical superintendent
		the pharmacist in charge of the nursing home's dispensary
		the registered nurse in charge of the nursing home
11	prison	the prison's general manager
		the prison's director of nursing, medical superintendent or registered nurse in charge
		the pharmacist in charge of the prison's dispensary
12	optometrist	the person
13	podiatrist	the person

	Column 1	Column 2
14	university	the university's vice-chancellor or a person to whom the vice-chancellor has delegated authority under section 179A(2)
15	St John Ambulance Australia—Queensland	the State Medical Officer of St John Ambulance Australia—Queensland or the State Medical Officer's delegate

Appendix 4 Computer-generated paper prescriptions

sections 79(6) and 190(4)

Part 1 Preliminary

1 Prescription form must be preprinted

(1) A computer-generated paper prescription for a controlled or restricted drug must be generated on a preprinted form with the prescriber's name, address and contact telephone number printed on it.

(2) However, if the prescriber practises his or her profession in association with another prescriber, the name, address and contact telephone number of the practice may be preprinted on the form.

2 Only prescriber may generate prescription

(1) Subject to subsection (2), the computer program must allow only the prescriber to generate a computer-generated paper prescription.

(2) The computer program may allow a certified person, or a certified class of persons to generate a prescription of the type mentioned in section 190(5A).

4 Requirements on generation of prescription

(1) When a paper prescription is generated, the computer system used to generate it must cause the following to appear on the prescription form—

(a) a mark or line between each item on the form;

(b) the total number of items included on the form;

(c) a unique number that allows the prescription and the prescription record for the person, or the person's animal, for whom it is written to be matched;

(d) the particulars mentioned in section 79(4)(a) or section 190(2)(a) printed on the form.

(2) The area below the space for the prescriber's signature must be scored, hatched or marked in another way to prevent another item being written on the form below the prescriber's signature.

Part 2 Controlled drugs

5 System messages

The computer program must generate a message that tells the prescriber that the prescriber must write the particulars mentioned in section 79(4)(e) to (n) on the prescription form in ink.

6 Particulars in a paper prescription that a computer may generate

The particulars mentioned in section 79(4)(b), (c) and (d) may, for a computer-generated paper prescription for a controlled drug, be generated by the computer.

Part 3 Restricted drugs

7 Particulars in a paper prescription that a computer may generate

The particulars mentioned in section 190(2)(b) to (n) may, for a computer-generated paper prescription for a restricted drug, be generated by the computer.

Appendix 5 Areas of local governments forming isolated practice areas

appendix 9, definition *isolated practice area*

Aurukun, Balonne, Banana, Barcaldine, Barcoo, Blackall Tambo, Boulia, Bulloo, Burke, Carpentaria, Central Highlands Charters Towers, Cloncurry, Cook, Croydon, Diamantina, Doomadgee, Etheridge, Flinders, Hope Vale, Isaac, Kowanyama, Lockhart River, Longreach, Maranoa, McKinlay, Mornington, Mount Isa, Murweh, Napranum, North Burnett, Northern Peninsula Area, Palm Island, Paroo, Pormpuraaw, Quilpie, Richmond, Tablelands, Torres, Western Downs, Winton, Woorabinda, Wujalwujal, Yarrabah.

Appendix 6 Minimum requirements for controlled drug receptacles

sections 118(1)(a) and 119(1)(a)

Part 1 Cabinets

1AA Definition for pt 1

In this part—

cabinet includes a safe that can be mounted to a wall but does not include an above-ground safe that is taken, under section 12, to be a secure place.

1AB Certain provisions not applicable to alarm cabinets

(1) Sections 1 to 4 do not apply to an alarm cabinet.

(2) In this section—

alarm cabinet means a metal cabinet that is fitted with an alarm that is activated if a person attempting to open the door of the cabinet does not open it in a particular way, including, for example, by using a combination.

1 Body requirements

(1) The body of a cabinet must be constructed of a single layer of mild steel plate at least 10mm thick and with continuous welding of all joints.

(2) The cabinet body must—

(a) incorporate—

(i) a full length steel lock keeper bar welded to the inside of the cabinet on the lock side; and

(ii) a full length steel bar welded to the inside of the cabinet on the hinge side that acts as a tamper-proof recess for a dog bar; and

(b) have, for installation—

(i) 4 suitably sized holes in the back plate; or

(ii) 2 suitably sized holes in the back plate and 2 suitably sized holes in the base of the cabinet.

2 Door requirements

(1) The door of a cabinet must be constructed of mild steel plate at least 10mm thick.

(2) When the cabinet door is closed, the door must—

(a) fit flush with the body of the cabinet; and

(b) have a clearance around the door of not more than 1.5mm.

(3) The cabinet door must incorporate—

(a) hardened steel plate, at the site of attachment of the lock, of an area that protects all parts of the lock from drilling; and

(b) a solid, full length dog bar, down the inside of the door on the hinge side, that recesses behind the bar mentioned in section 1(2)(a)(ii).

3 Lock requirements

(1) A cabinet lock must be—

(a) a 6-lever pick-proof lock; or

(b) a lock mechanism of a level of security equal to, or greater than a 6-lever pick-proof lock; or

(c) a tamper-proof combination lock of, or at least equivalent to, the ‘Sergeant & Greenleaf’ type.

(2) The cabinet lock must—

(a) be continuous welded to the inside face of the door; and

(b) incorporate a steel saddle around the lock, welded to the inside face of the door; and

(c) be fitted with a steel guard around the bolt of the lock, welded to the inside face of the door.

4 Hinge requirements

The hinges on the door of a cabinet must be—

(a) constructed of heavy duty steel; and

(b) continuous welded to the door and the body of the receptacle; and

(c) tamper-proof; and

(d) concealed on the inside of the cabinet if possible.

5 Mounting requirements

(1) The cabinet must be mounted by one of the methods mentioned in sections 6, 7, 8 and 9.

(2) The methods are called, in order, type 1, 2, 3 and 4 mountings.

(3) The chief executive may certify another way of mounting that is of equal or greater security.

6 Type 1 mounting

(1) For type 1 mounting, a cabinet must be mounted to a concrete, brick or timber wall by 4 bolts made from heavy duty galvanised steel or equivalent quality bolts, of at least 12mm diameter, that are passed through the wall and fastened inside the rear of the cabinet by steel ‘cyclone’ type washers and suitable nuts.

(2) However, for a timber wall, the bolts must pass through studs or noggings in the wall.

7 Type 2 mounting

(1) If type 1 mounting is not appropriate, a cabinet must be fixed to a concrete or brick wall by 4 dynabolts or other similar expanding type bolts.

(2) The bolts must—

(a) be heavy duty galvanised steel bolts, or an equivalent quality bolt, of at least 12mm diameter; and

(b) be fixed as far into the concrete or brickwork as is practicable.

8 Type 3 mounting

(1) If the wall is of timber construction but the floor is of brick or concrete, the cabinet must, if possible, be mounted—

(a) to the floor—by 2 dynabolts or other similar expanding type bolts; and

(b) to the wall—by 4 coach screws into the studs or noggings in the wall.

(2) The bolts must be of at least 12mm diameter and the screws must be of at least 12.5mm diameter.

9 Type 4 mounting

(1) If there is no brick or concrete floor or wall to which a cabinet may be mounted—

(a) but there is a wall and a floor to which the cabinet may be mounted—the cabinet must be mounted by 4 coach screws into the studs or noggings of 1 wall and 2 coach screws through the base of the cabinet into the framework of the floor; or

(b) but there are 2 walls to which the cabinet may be mounted—the cabinet must be mounted by 4 coach screws into the studs or noggings of the rear wall and 2 coach screws through the side of the cabinet into the studs or noggings of the second wall.

(2) The screws must be of at least 12.5mm diameter.

Part 2 In-floor safes

10 Application of part

(1) If an in-floor safe has a door system similar to that described in part 1, the door, lock and hinge must comply with sections 2, 3 and 4.

(2) If subsection (1) does not apply, the safe must comply with section 11.

11 In-floor safe

An in-floor safe must—

(a) have a body constructed—

(i) of mild steel plate that is continuously welded to prevent moisture penetration; and

(ii) in a way that incorporates protective recesses on the locking and non-locking sides that accommodate lock bolts and dog bars when the safe is closed; and

(b) have—

(i) a 6-lever pick-proof lock; or

(ii) a lock mechanism that gives a level of security equal to, or greater than a 6-lever pick-proof lock; or

(iii) a tamper-proof combination lock; and

(c) be embedded in reinforced concrete at least 100mm thick.

Part 3 Above-ground safes

12 Certain safes taken to be a secure place

(1) An above-ground safe with the space between the inner and outer shell filled with concrete or another material that gives equal or better security than concrete, and weighing at least 305kg, is taken to be a secure place if—

(a) the safe door complies with section 14; and

(b) the safe lock complies with section 15.

(2) An above-ground safe weighing less than 305kg is taken to be a secure place only if it complies with this part.

13 Body of safe

(1) The body of an above-ground safe must—

(a) have at least 2 anchoring holes in its base, of a diameter large enough to firmly accommodate 12mm bolts; and

(b) incorporate recesses provided by welded steel bars down both sides inside the safe to give protection to lock bolts and dog bars when the safe is closed.

(2) The space between the inner and outer shell of the safe must be filled with concrete or another material that gives equal or better security than concrete.

14 Safe door

The door of an above-ground safe must—

(a) be constructed of steel plate at least 10mm thick; and

(b) be fitted with dog bars or lock bars on the inside of the door, and tamper-proof steel hinges continuously welded to the door and the body of the safe.

15 Safe lock

The lock of an above-ground safe—

(a) must be—

(i) a 6-lever pick-proof lock; or

(ii) a lock mechanism that gives a level of security equal to, or greater than a 6-lever pick-proof lock; or

(iii) a tamper-proof combination lock of, or equivalent to, the 'Sergeant and Greenleaf' type; and

(b) must be fitted with a steel saddle, continuously welded to the door, covering the lock mechanism.

16 Anchoring

(1) An above-ground safe must have a facility for anchoring it flush to the floor of a building.

(2) If the safe has legs, the legs must be removed before the safe is installed.

(3) The safe must be installed with its back and at least 1 side flush with, or as close as possible to, the walls of the building.

(4) If the floor is a concrete or brick floor, the safe must be anchored by at least 2 dynabolts or other similar expanding type bolts of at least 12mm diameter.

(5) If the floor is a timber floor, the safe must be anchored by cup-head bolts of at least 12mm diameter, penetrating through the timber framework of the floor, steel cyclone type washers measuring 50mm x 50mm, and appropriate nuts located inside the safe.

(6) If it is not possible to comply with subsection (4) or (5), the safe must be anchored to a timber floor by at least 2 coach screws of at least 12.5mm diameter secured into the timber framework of the floor.

Appendix 7 Regulated poisons

appendix 9, definition *regulated poison*

1 The following S7 poisons—

- azocyclotin
- cyhexatin
- demeton
- 4,4 diaminodiphenylmethane (methyl dianiline)
- dimetilan
- ethylene dibromide
- hydrocyanic acid and cyanide
- 4,4'-methylenebis [2-chloroaniline]
- mirex
- phosphides, metallic
- strychnine
- S,S,S-tributylphosphorotrithioate.

2 The following S7 poisons (other than for use for analytical or research purposes)—

- abamectin
- alachlor
- chlordecone
- 1,3-dichloropropene.

3 The following S7 poisons (other than for use for industrial or manufacturing purposes or for analytical or research purposes)—

- acrolein
- allyl alcohol
- bifluoride

- ethylene oxide
- HCB
- hydrofluoric acid
- hydrosilicofluoric acid
- methyl bromide
- nicotine
- ortho-tolidine
- propylene oxide
- tetrachloroethane
- vinyl chloride.

4 The following S7 poisons (other than for use for industrial or manufacturing purposes or for analytical or research purposes)—

- acrylonitrile
- 4-aminopyridine
- arsenic
- benzene
- bromine (other than for use for water treatment and treatment of water in swimming pools and spas)
- brucine
- captafol
- carbon tetrachloride
- chlorine (other than for use for water treatment and treatment of water in swimming pools and spas)
- chloropicrin
- N, N-dimethyl-4-(phenylazo)-benzenamine
- dinitrocresol
- dinitrophenol
- dinoseb

- folpet
- maduramicin
- mercury
- methacrifos
- phosphorus
- 2, 2', 6, 6'-tetraisopropyl-diphenyl-carbodiimide (stabaxol)
- trichloroisocyanuric acid.

5 The following S7 poisons (other than for use for analytical or research purposes)—

- arprinocid
- carbadox
- chlordimeform
- chloromethiuron
- 4-chloro-o-toluidine
- 1,2-dibromo-3-chloropropane
- etaconazole
- halogenated dibenzodioxins (other than as a contaminant in proportions not greater than a proportion fixed by the chief executive)
- halogenated dibenzofurans (other than as a contaminant in proportions not greater than a proportion fixed by the chief executive)
- nitrofen
- pyrinuron.

6 The following S7 poisons (other than for use for industrial or manufacturing purposes)—

- brodifacoum
- bromadioline
- calciferol

- cholecalciferol
- coumatetralyl
- difenacoum
- epichlorohydrin
- halofuginone
- methoxyethylmercuric acetate
- methoxyethylmercuric chloride
- phenylmercuric acetate
- sulcofuron.

7 The following S7 poisons (other than for use by an authorised person under the *Land Protection (Pest and Stock Route Management) Act 2002*)—

- fluoroacetamide
- fluoroacetic acid (other than for use in prepared baits containing 0.03% or less of fluoroacetic acid)
- thallium or a preparation or admixture of thallium (other than in prepared baits containing 0.25% or less of thallium).

8 An S9 poison.

9 A poison included in appendix C of the standard.

Appendix 8 Restricted drugs of dependency

appendix 9, definition *restricted drug of dependency*

acetyldihydrocodeine

adiphenine

alprazolam

amyl nitrite

amylobarbitone

barbiturates, other than barbiturates individually listed in this appendix

benzhexol

benzodiazepines, other than benzodiazepines individually listed in this appendix

bromazepam

chloral hydrate

chlordiazepoxide

clobazam

clonazepam

clorazepate

codeine

dexfenfluramine

dextromethorphan

dextropropoxyphene

dextrorphan

diazepam

diethylproprion

dihydrocodeine

ephedrine
ethylmorphine
fenfluramine
lorazepam
mazindol
medazepam
meprobamate
midazolam
nitrazepam
oxazepam
pentobarbitone
phentermine
propylhexedrine
temazepam
triazolam
zolazepam

Appendix 8A Rural hospitals

appendix 9, definition *rural hospital*

Atherton, Ayr, Babinda, Baralaba, Barcaldine, Beaudesert, Biggenden, Biloela, Blackall, Blackwater, Boonah, Bowen, Caboolture, Capella, Charleville, Charters Towers, Cherbourg, Childers, Chinchilla, Clermont, Collinsville, Cooktown, Cracow, Cunnamulla, Dalby, Dingo, Dunwich, Dysart, Eidsvold, Emerald, Emu Park, Esk, Gatton, Gayndah, Gin Gin, Gladstone, Goondiwindi, Gordonvale, Gympie, Hervey Bay, Home Hill, Hughenden, Ingham, Inglewood, Injune, Innisfail, Jandowae, Kilcoy, Kingaroy, Laidley, Longreach, Magnetic Island, Malanda, Many Peaks, Mareeba, Maryborough, Miles, Millaa Millaa, Millmerran, Mitchell, Monto, Moranbah, Mossman, Mount Perry, Moura, Mt Morgan, Mundubbera, Murgon, Nanango, Oakey, Proserpine, Proston, Quilpie, Ravenshoe, Richmond, Roma, Sapphire, Sarina, Springsure, St George, Stanthorpe, Tara, Taroom, Texas, Theodore, Thursday Island, Tully, Wandoan, Warwick, Weipa, Winton, Wondai, Yeppoon.

Appendix 9 Dictionary

section 3

acceptable form of identification, for a purchaser, means a current document that—

(a) is issued to the purchaser by—

(i) the Commonwealth or a State; or

(ii) an entity of the Commonwealth or a State; and

(b) shows a photograph of the purchaser.

Example of document—

driver licence

administer, for a controlled or restricted drug or a poison, means—

(a) give a person a single treatment dose of the drug or poison, to be taken by the person immediately; or

(b) cause an animal to take a single treatment dose of the drug or poison immediately.

ambulance officer see the *Ambulance Service Act 1991*.

approval means an approval given by the chief executive under this regulation, for a person to do a thing.

approved electronic form means an electronic form approved by the chief executive.

authorised person means the following—

(a) for chapter 2, a person who may, under chapter 2, perform a stated act involving a controlled drug or a regulated controlled drug;

(b) for chapter 3, a person who may, under chapter 3, perform a stated act involving a restricted drug or a regulated restricted drug;

(c) for chapter 4, a person who may, under chapter 4, perform a stated act involving a poison or a regulated poison.

authority means an authority a person has under this regulation—

(a) because of the person's occupation; or

(b) because the person holds an office.

Examples of occupations—

doctor, dentist, midwife

Examples of offices—

person in charge of a base of the Royal Flying Doctor Service of Australia, general manager of a prison

business premises, of a licensee or holder of an endorsement, means the premises stated in the relevant licence or endorsement under chapter 2, 3 or 4 as the business premises of the licensee or endorsement holder.

cabinet, for appendix 6, part 1, see appendix 6, section 1AA.

carer, for sections 235 and 256A, see the *Child Care Act 2002*, section 56.

certified means approved by the chief executive.

child care service, for sections 235 and 256A, see the *Child Care Act 2002*, section 5.

class, of a controlled or restricted drug or poison, means controlled or restricted drugs or poisons of the same nominal description.

compounded, for a substance combined with a therapeutically active substance, means the way the substances are combined prevents their separation by simple dissolution or in another simple physical way.

controlled drug means an S8 substance.

controlled drug manufacturer means a person who holds a controlled drug manufacturer licence.

Editor's note—

Controlled drug manufacturer licences are granted under chapter 2 (Controlled drugs).

controlled drugs administration facility means a facility of which the primary purpose is administering controlled drugs under a drug therapy protocol.

controlled drugs record see section 86.

controlled drugs register see section 50.

controlled drug wholesaler means a person who holds a controlled drug wholesaler licence.

Editor's note—

Controlled drug wholesaler licences are granted under chapter 2 (Controlled drugs).

conviction includes a plea of guilty or finding of guilt by a court even though a conviction is not recorded.

criminal history of a person means the person's criminal record within the meaning of the *Criminal Law (Rehabilitation of Offenders) Act 1986*.

cyanide, for chapter 4, part 2, means cyanide of potassium or sodium, and any other inorganic salt of hydrocyanic acid that is a poison, but does not include ferricyanide salts and ferrocyanide salts.

cyanide permit means a permit granted by the chief executive under this regulation for a person to obtain, possess or use cyanide.

declared public health emergency means a declared public health emergency under the *Public Health Act 2005*.

dental hygienist means a person registered under the Health Practitioner Regulation National Law—

(a) to practise in the dental profession, other than as a student; and

(b) in the dental hygienists division of that profession.

dental therapist means a person registered under the Health Practitioner Regulation National Law—

(a) to practise in the dental profession, other than as a student; and

(b) in the dental therapists division of that profession.

dentist means a person registered under the Health Practitioner Regulation National Law—

(a) to practise in the dental profession, other than as a student; and

(b) in the dentists division of that profession.

detention centre means a detention centre under the *Youth Justice Act 1992*.

dispensary see the *Health Regulation 1996*.

dispense means sell on prescription.

dispensed medicine means a medicine that is or contains a controlled or restricted drug or a poison and is—

(a) supplied for human therapeutic use by a registered nurse or midwife who may supply the medicine while practising nursing or midwifery; or

(aa) supplied for human therapeutic use by a dentist who may supply the medicine while practising dentistry; or

(b) supplied for human therapeutic use by a doctor who may supply the medicine while practising medicine; or

(ba) supplied for human therapeutic use by an optometrist who may supply the medicine while practising optometry; or

(c) supplied for animal use by a veterinary surgeon who may supply the medicine while practising veterinary medicine; or

(d) dispensed for human therapeutic use or animal use; or

(e) prepared for dispensing, for human or animal use, by a pharmacist.

dispenser means a person who may dispense a controlled or restricted drug or a poison.

drug licence means—

(a) a controlled drug manufacturer licence; or

(b) a controlled drug wholesaler licence; or

(c) a restricted drug manufacturer licence; or

(d) a restricted drug wholesaler licence.

drug therapy protocol means a certified document published by the department stating circumstances in which, and conditions under which, a person who may act under the protocol may use a stated controlled or restricted drug or poison for stated purposes.

ECP area means an area of the State classified as an ECP area by the Queensland Ambulance Service.

Editor's note—

ECP is an acronym used by the Queensland Ambulance Service for *extended care program*.

electronically sign, for an electronic prescription, means to use an electronic form of signature approved by the chief executive.

electronic communication means a communication of information in the form of data or text by guided or unguided electromagnetic energy.

electronic means, in relation to sending a document, means sending the document—

(a) embodied in a computer disk from which the document can be reproduced; or

(b) by an electronic communication.

electronic prescription means a prescription in an approved electronic form for transfer by electronic communication.

endorsement means any of the following—

(a) an authority;

(b) an approval;

(d) a drug licence;

(e) a wholesale representative licence;

(f) a poison licence;

(g) a cyanide permit;

(h) a strychnine permit.

enrolled nurse means a person registered under the Health Practitioner Regulation National Law—

(a) to practise in the nursing and midwifery profession, other than as a student; and

(b) in the enrolled nurses division of that profession.

expiry day see section 19.

hospital means a public sector hospital or private hospital.

hospital pharmaceutical assistant means an adult person who—

(a) has a qualification or statement of attainment issued under the *Vocational Education, Training and Employment Act 2000* by a registered training organisation, recognising the person has the skills and knowledge required to perform pharmaceutical imprest duties in a hospital; and

(b) performs pharmaceutical imprest duties in a hospital.

immunisation program means—

(a) an immunisation program carried out by the department; or

(b) an immunisation program carried out by a local government; or

(c) a certified immunisation program.

immunisation program nurse means a registered nurse who—

(a) immediately before 1 July 2010, held an annual licence certificate endorsed under the *Nursing Act 1992* that authorised the registered nurse to practise in an immunisation program; or

(b) has obtained a qualification in immunisation approved by the chief executive.

indigenous health worker means a person who—

(a) holds a Diploma of Health Science ATSI Primary Health Care (Generalist) ASF 5 from a college of technical and further education or a certified equivalent qualification; and

(b) has successfully completed the North Queensland Rural Health Training Unit Isolated Practice *Health (Drugs and Poisons) Regulation 1996* Course or a certified equivalent course of training for the accreditation of registered nurses for practice in an isolated practice area.

inspector means an inspector appointed under section 137 of the Act.

institution means a detention centre, hospital, nursing home or prison.

isolated practice area means—

(aa) a place that is at Cow Bay, Marpuna or Weipa; or

(a) a place that is—

(i) within the area of a local government mentioned in appendix 5; and

(ii) remote from pharmaceutical services; or

(b) a clinic conducted by the Royal Flying Doctor Service (Qld section) in an area isolated from medical, pharmaceutical and hospital services; or

(c) a plane operated by the Royal Flying Doctor Service (Qld section).

isolated practice area paramedic means an ambulance officer who—

(a) has successfully completed the training course, from James Cook University, Graduate Certificate of Rural and Remote Paramedic Practice that includes the Isolated Practice Area Paramedic course developed by the Northern Area Health Service Workforce Directorate; and

(b) is classified by the Queensland Ambulance Service as a paramedic 3, 3 (ECP) or 4.

isolated practice area (paramedics) means—

(a) a place that is at Cow Bay, Marpuna or Weipa; or

(b) a place that is—

(i) within—

(A) the operational area of the Calen, Carmila, Finch Hatton, Glenden, Happy Valley Fraser Island, Marlborough, Nebo, Millaa Millaa or Wowan, Queensland Ambulance Service station; or

(B) the area of a local government mentioned in appendix 5; and

(ii) remote from pharmaceutical services; or

(c) a clinic conducted by the Royal Flying Doctor Service (Qld section) in an area isolated from medical, pharmaceutical and hospital services.

issue, a controlled drug, restricted drug or poison, means give the drug or poison to a person who is endorsed under this regulation to administer the drug or poison to another person.

licensee means—

(a) for chapter 2—

(i) a controlled drug manufacturer; or

(ii) a controlled drug wholesaler; or

(b) for chapter 3—

(i) a restricted drug manufacturer; or

(ii) a restricted drug wholesaler; or

(c) for chapter 4—

(i) a poison manufacturer; or

(ii) a poison wholesaler; or

(iii) a person who holds a poison wholesaler licence; or

(iv) a person who holds a general poison licence; or

(v) a person who holds a licence to sell S7 poisons for other than human therapeutic use.

licensee of a child care service, for sections 235 and 256A, means a person who holds a licence to conduct a child care service under the *Child Care Act 2002*.

manufacture see section 4.

master, of a ship, see the *Transport Operations (Marine Safety) Act 1994*.

midwife means a person registered under the Health Practitioner Regulation National Law to practise in the nursing and midwifery profession as a midwife, other than as a student.

National Health Act means the *National Health Act 1953* (Cwlth).

nominal description, of a controlled or restricted drug, means the details necessary to describe the drug, including details of its composition, form, quality and strength, and distinguish it from a controlled or restricted drug of a different description.

nurse means a registered nurse or enrolled nurse.

nurse practitioner means a registered nurse whose registration is endorsed under the Health Practitioner Regulation National Law as being qualified to practise as a nurse practitioner.

nursing home means a facility, other than a hospital or private residence, at which accommodation and nursing or personal care is provided to persons who, because of disability, disease, illness, incapacity or infirmity, have a continuing need for care.

obtain, for a controlled or restricted drug or a poison, means acquire, buy, receive or otherwise obtain the drug or poison, and for a doctor, pharmacist or veterinary surgeon, includes offer to acquire, buy, receive or otherwise obtain.

ocular therapeutics protocol means a certified document published by the department stating—

(a) the circumstances in which, and conditions under which, an optometrist may administer, supply or prescribe a restricted drug; and

(b) the qualifications that an optometrist must attain before doing a thing mentioned in paragraph (a).

operating approval means an approval granted by the chief executive to a person to establish and operate a controlled drugs administration facility.

opium means any form of opium, other than the alkaloids noscapine and papaverine.

optometrist means a person registered under the Health Practitioner Regulation National Law to practise in the optometry profession, other than as a student.

oral health therapist means a person registered under the Health Practitioner Regulation National Law—

(a) to practise in the dental profession, other than as a student; and

(b) in the oral health therapists division of that profession.

orthoptist means a person whose name is recorded in the Register of Orthoptists kept by the Australian Orthoptists Registration Body Pty Ltd ACN 095 117 678.

outpost, of the Royal Flying Doctor Service of Australia, means a medicine chest kept at a place approved by a doctor authorised in writing by the service to approve the keeping of the medicine chest.

owner, of a ship, see the *Transport Operations (Marine Safety) Act 1994*.

paper prescription means a prescription in paper form whether or not the prescription was generated by a computer or handwritten.

paramedic 1 means an ambulance officer who is classified by the Queensland Ambulance Service as a paramedic 1.

paramedic 2 means an ambulance officer who is classified by the Queensland Ambulance Service as a paramedic 2.

paramedic 3 means an ambulance officer who—

(a) has successfully completed a training course certified as the course for a paramedic 3; and

(b) is classified by the Queensland Ambulance Service as a paramedic 3.

paramedic 3 (ECP) means an ambulance officer who—

(a) has successfully completed a training course certified as the course for a paramedic 3 (ECP); and

(b) is classified by the Queensland Ambulance Service as a paramedic 3 (ECP).

paramedic 4 means an ambulance officer who—

(a) has successfully completed a training course certified as the course for a paramedic 4; and

(b) is classified by the Queensland Ambulance Service as a paramedic 4.

personal supervision see section 5A.

pharmaceutical imprest duties means duties related to keeping an inventory of drugs obtained for use at a hospital or issued for treatment of the hospital's patients.

physician's assistant means a person appointed by the chief executive, and employed by the department, as a physician's assistant.

podiatrist means a person registered under the Health Practitioner Regulation National Law to practise in the podiatry profession, other than as a student.

poison means—

(a) an S2, S3, S5, S6, S7 or S9 substance; or

(b) a substance mentioned in appendix C of the standard.

poison licence means—

(a) a poison manufacturer licence; or

(b) a poison wholesaler licence; or

(c) a general poison licence; or

(d) a licence to sell S7 poisons for other than human therapeutic use.

poison manufacturer means a person who holds a poison manufacturer licence.

Editor's note—

Poison manufacturer licences are issued under chapter 4 (Poisons).

poison wholesaler means a person who holds a poison wholesaler licence.

Editor's note—

Poison wholesaler licences are issued under chapter 4 (Poisons).

possess, a controlled drug, restricted drug, poison or other substance, includes—

(a) have custody or control of the drug, poison or other substance; and

(b) have an ability or right to obtain custody or control of the drug, poison or other substance.

practice plan, for a physician's assistant, means a document that—

(a) is developed and signed by a physician's assistant and his or her supervising medical officer; and

(b) states the circumstances and conditions for a physician's assistant to use a controlled drug, restricted drug or poison; and

(c) is in a form approved by the chief executive.

prescribe means make a written direction (other than a purchase order or written instruction) authorising a dispenser to dispense a stated controlled or restricted drug or a stated poison.

prescriber means a person who, under this regulation, is endorsed to prescribe a controlled or restricted drug or a poison.

prescription means a prescriber's direction (other than a purchase order or written instruction) to dispense a stated controlled or restricted drug or a stated poison, and includes,

for sections 79, 80, 81, 190, 191 and 192 a duplicate of a prescription attached to a repeat authorisation, under the National Health Act, issued by a dispenser.

prison see the *Corrective Services Act 2006*, schedule 4.

produce, a controlled or restricted drug or a poison, means—

(a) cultivate, package, prepare or produce a substance; or

(b) offer to cultivate, package, prepare or produce a substance; or

(c) do or offer to do anything for or in connection with an act mentioned in paragraph (a).

public sector hospital has the meaning given in the *Health Services Act 1991*.

purchase order means an order for the supply of a controlled or restricted drug or a poison, placed by an endorsed person under chapter 2, 3 or 4.

QCAT information notice means a notice complying with the QCAT Act, section 157(2).

quality standard see section 4A.

reasonably believe means believe on grounds that are reasonable in the circumstances.

reasonably satisfied means satisfied on grounds that are reasonable in the circumstances.

registered nurse means a person registered under the Health Practitioner Regulation National Law—

(a) to practise in the nursing and midwifery profession, other than as a student; and

(b) in the registered nurses division of that profession.

registered training organisation means a registered training organisation under the *Vocational Education, Training and Employment Act 2000*.

regulated controlled drug means a controlled drug mentioned in chapter 2, part 3.

regulated poison means a poison in appendix 7 of this regulation.

regulated restricted drug means a restricted drug mentioned in chapter 3, part 3.

relevant condition, for giving a prescription or written instruction, means the condition for which the prescription or instruction is given.

repeat prescription means a prescription on which there is a direction to repeat the sale or supply of a stated controlled or restricted drug or a stated poison a stated number of times.

resident, of a nursing home, means a person receiving care or supervision at the nursing home.

restricted drug means an S4 substance.

restricted drug manufacturer means a person who holds a restricted drug manufacturer licence.

Editor's note—

Restricted drug manufacturer licences are issued under chapter 3 (Restricted drugs).

restricted drug of dependency means a restricted drug in appendix 8 of this regulation.

restricted drug wholesaler means a person who holds a restricted drug wholesaler licence.

Editor's note—

Restricted drug wholesaler licences are issued under chapter 3 (Restricted drugs).

rural and isolated practice endorsed nurse means a registered nurse whose registration is endorsed under the Health Practitioner Regulation National Law as being qualified to obtain, supply and administer S2, S3, S4 and S8 drugs or poisons for practising nursing in a rural and isolated practice area.

rural hospital means—

(a) a public sector hospital at a place stated in appendix 8A; or

(b) the Capricorn Sector Outpatients' Clinic; or

(c) Maleny Soldiers Memorial Hospital; or

(d) Noosa District Community Hospital.

S2* to *S9 see section 5.

sexual health program means—

(a) sexual or reproductive health program carried out by a district health service; or

(b) a certified sexual or reproductive health program.

sexual health program nurse means a registered nurse who—

(a) immediately before 1 July 2010, held an annual licence certificate endorsed under the *Nursing Act 1992* that authorised the registered nurse to practise in a sexual health program; or

(b) has obtained a qualification in sexual health approved by the chief executive.

specialist health practitioner, in a specialty, means a person registered under the Health Practitioner Regulation National Law to practise in the medical profession as a specialist registrant in the specialty.

specialist physician means a person registered under the Health Practitioner Regulation National Law in the medical profession as a specialist registrant in the specialty of physician.

specified health service district means any of the following health service districts declared under the *Health Services Act 1991*—

- Cairns
- Cape York
- Mount Isa
- Torres Strait and Northern Peninsula Area.

standard means the Standard for the Uniform Scheduling of Medicines and Poisons set out in schedule 1 of the *Poisons Standard 2009* (Cwlth).

State analyst means an analyst appointed under section 153Z of the Act.

statement of attainment, for a hospital pharmaceutical assistant, see the *Vocational Education, Training and Employment Act 2000*, section 19.

strychnine, for chapter 4, part 2, means strychnine as an S7 poison.

strychnine permit means a permit granted by the chief executive under this regulation for a person to obtain, possess or use strychnine.

supervising medical officer, for a physician's assistant, means a person who—

(a) is a medical practitioner; and

(b) supervises the work performed by the physician's assistant in his or her employment in the department.

supervision see section 5A.

supply, for a controlled or restricted drug or a poison, means give, or offer to give, a person 1 or more treatment doses of the drug or poison, to be taken by the person during a certain period.

surgical podiatrist means a person registered under the Health Practitioner Regulation National Law to practise in the podiatry profession as a specialist registrant in the specialty of surgical podiatry.

trainee pharmacist, means a person who—

(a) is undergoing a course of training, the successful completion of which would qualify the person to hold an approved qualification for the pharmacy profession under the Health Practitioner Regulation National Law; or

(b) is undertaking a period of supervised practice required for registration as a pharmacist under the Health Practitioner Regulation National Law.

trainee State analyst means a person who is undergoing a course of training, the successful completion of which will qualify the trainee for appointment as a State analyst.

transaction see section 6.

treatment approval means any of the following approvals—

(a) an approval given to a doctor by the chief executive under section 78(1)(a);

(b) a written approval given to a doctor by the chief executive under section 122;

(c) a written approval given to a doctor by the chief executive under section 213;

(d) a written approval given to a dentist by the chief executive under section 213A.

Veterans Entitlements Act means the *Veterans' Entitlements Act 1986* (Cwlth).

wholesale means sell for resale.

wholesale representative means a person who holds a wholesale representative licence.

Editor's note—

Wholesale representative licences are issued under chapter 3 (Restricted drugs).

written instruction means any of the following—

(a) a written direction, other than a prescription or purchase order, signed by a dentist, doctor, nurse practitioner or surgical podiatrist and on which the date of the direction is shown;

(b) a standing order signed by a doctor or nurse practitioner and on which the date of the order is shown;

(c) a written entry on a patient's medical records signed and dated by a doctor or nurse practitioner.

Endnotes

1 Index to endnotes

2 Date to which amendments incorporated

This is the reprint date mentioned in the Reprints Act 1992, section 5(c). Accordingly, this reprint includes all amendments that commenced operation on or before 28 January 2011. Future amendments of the Health (Drugs and Poisons) Regulation 1996 may be made in accordance with this reprint under the Reprints Act 1992, section 49.

3 Key

Key to abbreviations in list of legislation and annotations

Key		Explanation	Key		Explanation
AIA	=	**Acts Interpretation Act 1954**	**(prev)**	=	**previously**
amd	=	**amended**	**proc**	=	**proclamation**
amdt	=	**amendment**	**prov**	=	**provision**
ch	=	**chapter**	**pt**	=	**part**
def	=	**definition**	**pubd**	=	**published**
div	=	**division**	**R[X]**	=	**Reprint No. [X]**
exp	=	**expires/expired**	**RA**	=	**Reprints Act 1992**
gaz	=	**gazette**	**reloc**	=	**relocated**
hdg	=	**heading**	**renum**	=	**renumbered**
ins	=	**inserted**	**rep**	=	**repealed**
lap	=	**lapsed**	**(retro)**	=	**retrospectively**
notfd	=	**notified**	**rv**	=	**revised edition**
num	=	**numbered**	**s**	=	**section**
o in c	=	**order in council**	**sch**	=	**schedule**
om	=	**omitted**	**sdiv**	=	**subdivision**
orig	=	**original**	**SIA**	=	**Statutory Instruments Act 1992**
p	=	**page**	**SIR**	=	**Statutory Instruments Regulation 2002**
para	=	**paragraph**	**SL**	=	**subordinate legislation**
prec	=	**preceding**	**sub**	=	**substituted**
pres	=	**present**	**unnum**	=	**unnumbered**
prev	=	**previous**			

4 Table of reprints

Reprints are issued for both future and past effective dates. For the most up-to-date table of reprints, see the reprint with the latest effective date.

If a reprint number includes a letter of the alphabet, the reprint was released in unauthorised, electronic form only.

Reprint No.	Amendments to	Effective	Reprint date
1	none	1 January 1997	10 January 1997
2	1997 SL No. 64	21 March 1997	25 March 1997
2A	1997 SL No. 323	3 October 1997	7 November 1997
2B	1997 SL No. 383	14 November 1997	26 November 1997
2C	1998 SL No. 149	19 June 1998	22 June 1998
2D	1998 SL No. 203	17 July 1998	22 July 1998
2E	1998 SL No. 259	25 September 1998	19 October 1998
3	1999 SL No. 8	19 February 1999	2 March 1999
3A	1999 SL No. 174	30 July 1999	27 October 1999
3B	1999 SL No. 258	5 November 1999	23 November 1999
3C	1999 SL No. 326	1 January 2000	1 January 2000
3D	2000 Act No. 28	27 July 2000	4 August 2000
3E	2000 SL No. 333	15 December 2000	22 December 2000
4	2000 SL No. 333	15 December 2000	19 January 2001

Reprint No.	Amendments to	Effective	Reprint date
4A rv	2001 SL No. 205	16 November 2001	23 November 2001
4B rv	2001 SL No. 275	21 December 2001	24 December 2001
4C rv	2001 SL No. 264	1 January 2002	11 January 2002
4D rv	2001 SL No. 267	1 February 2002	8 February 2002
4E rv	2002 SL No. 20	15 February 2002	22 February 2002
4F rv	2002 SL No. 31	1 March 2002	7 March 2002
4G rv	2002 SL No. 80	1 May 2002	15 May 2002

Reprint No.	Amendments included	Effective	Notes
4H 2rv	2002 SL No. 156	1 July 2002	
4HA 2rv	2001 SL No. 205	1 August 2002	
4I 3rv	2002 SL No. 248	27 September 2002	
4J 2rv	2002 SL No. 361	1 January 2003	
4K 2rv	2003 SL No. 29	7 March 2003	R4K 2rv withdrawn, see R5 2rv
5 2rv	—	7 March 2003	Revision notice issued for R5 Revision notice no. 2 issued for R5
5A 2rv	2003 SL No. 130	1 July 2003	
5B rv	2003 SL No. 189	1 September 2003	
5C rv	2003 SL No. 201	20 September 2003	
5D	2003 SL No. 255	31 October 2003	
5E	2003 SL No. 348	19 December 2003	
5F	2003 Act No. 63	1 January 2004	
5G	2004 SL No. 34	8 April 2004	
6	2004 SL No. 27	1 July 2004	
6A rv	2004 SL No. 154	18 August 2004	
6B	2004 SL No. 291	17 December 2004	
6C	2005 SL No. 40	24 March 2005	
6D	2005 SL No. 142	1 July 2005	
6E	2005 SL No. 160	15 July 2005	
6F	2005 SL No. 222	9 September 2005	
6G	2005 SL No. 170	1 October 2005	R6G withdrawn, see R7
7	—	1 October 2005	
7A	2005 SL No. 314	1 January 2006	
7B	2005 SL No. 314	1 April 2006	
7C	2006 SL No. 91	19 May 2006	
7D	2006 SL No. 91	1 July 2006	
7E	2006 SL No. 190	1 October 2006	
7F	2006 SL No. 295	1 December 2006	
7G	2006 SL No. 308	15 December 2006	
7H	2007 SL No. 18	2 March 2007	R7H withdrawn, see R8
8	—	2 March 2007	
8A	2007 SL No. 57	20 April 2007	
8B	2007 SL No. 143	29 June 2007	

Reprint No.	Amendments included	Effective	Notes
8C	2007 SL No. 129	1 October 2007	
8D	2007 SL No. 333	14 December 2007	
9	2008 SL No. 57	15 March 2008	
9A	2008 SL No. 185	1 October 2008	
9B	2008 Act No. 53	7 November 2008	
9C	2008 SL No. 421 2008 SL No. 422	12 December 2008	
9D	2009 SL No. 154	1 October 2009	
9E	2009 Act No. 24	1 December 2009	
9F	2009 SL No. 293	11 December 2009	
9G	2010 SL No. 13	19 February 2010	
9H	2010 Act No. 34	29 March 2010	
10	2009 SL No. 293	31 March 2010	
10A	2010 SL No. 113	11 June 2010	
10B	2010 SL No. 108	1 July 2010	
10C	2010 SL No. 194	1 October 2010	
10D	2011 SL No. 4	28 January 2011	

5 Tables in earlier reprints

Name of table	Reprint No.
Corrected minor errors	1, 4, 7, 8, 10

6 List of legislation

Health (Drugs and Poisons) Regulation 1996 SL No. 414
made by the Governor in Council on 19 December 1996
notfd gaz 20 December 1996 pp 1588–98
ss 1–2 commenced on date of notification
remaining provisions commenced 1 January 1997 (see s 2)
exp 31 August 2011 (see SIA s 56A(2) and SIR s 5 sch 3)
Note—The expiry date may have changed since this reprint was published. See the latest reprint of the SIR for any change.

amending legislation—

Health (Drugs and Poisons) Amendment Regulation (No. 1) 1997 SL No. 64
notfd gaz 21 March 1997 pp 1234–5
pt 3 never commenced and rep by 1997 SL No. 323 s 13
remaining provisions commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 2) 1997 SL No. 323 pts 1–2
notfd gaz 3 October 1997 pp 481–2
commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 3) 1997 SL No. 383
notfd gaz 14 November 1997 pp 1164–5
commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 1) 1998 SL No. 149
notfd gaz 22 May 1998 pp 509–14
s 68 commenced 19 June 1998 (see s 2)
remaining provisions commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 2) 1998 SL No. 203
notfd gaz 17 July 1998 pp 1404–6
commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 3) 1998 SL No. 259
notfd gaz 25 September 1998 pp 327–9
commenced on date of notification

Health Legislation Amendment Regulation (No. 1) 1998 SL No. 343 pts 1, 5
notfd gaz 18 December 1998 pp 1551–7
ss 1–2 commenced on date of notification
remaining provisions commenced 21 December 1998 (see s 2)

Health (Drugs and Poisons) Amendment Regulation (No. 1) 1999 SL No. 8
notfd gaz 19 February 1999 pp 667–8
commenced on date of notification

Health Legislation Amendment Regulation (No. 1) 1999 SL No. 174 pts 1, 4
notfd gaz 30 July 1999 pp 1905–6
commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 2) 1999 SL No. 258
notfd gaz 5 November 1999 pp 918–21
commenced on date of notification

Sugar Industry Act 1999 No. 51 ss 1, 2(2), 228 sch 1
date of assent 18 November 1999
ss 1–2 commenced on date of assent
remaining provisions commenced 1 January 2000 (see s 2(2))

Health (Drugs and Poisons) Amendment Regulation (No. 3) 1999 SL No. 326
notfd gaz 17 December 1999 pp 1586–9
commenced on date of notification

Drugs Misuse Amendment Act 2000 No. 28 pt 1, s 26 sch
date of assent 27 July 2000
commenced on date of assent

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2000 SL No. 333
notfd gaz 15 December 2000 pp 1478–83
commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2001 SL No. 205
notfd gaz 16 November 2001 pp 982–5

ss 39, 40, 44(6) and (8) commenced 1 August 2002 (see s 2 and 2002 SL No. 183)
remaining provisions commenced on date of notification

Dental Practitioners Registration Regulation 2001 SL No. 264 ss 1–2, 17 sch 5
notfd gaz 14 December 2001 pp 1351–4
ss 1–2 commenced on date of notification
remaining provisions commenced 1 January 2002 (see s 2)

Optometrists Registration Regulation 2001 SL No. 266 ss 1–2, 10 sch 3
notfd gaz 14 December 2001 pp 1351–4
ss 1–2 commenced on date of notification
remaining provisions commenced 1 February 2002 (see s 2)

Pharmacists Registration Regulation 2001 SL No. 267 ss 1–2, 14 sch 4
notfd gaz 14 December 2001 pp 1351–4
ss 1–2 commenced on date of notification
remaining provisions commenced 1 February 2002 (see s 2)

Health (Drugs and Poisons) Amendment Regulation (No. 2) 2001 SL No. 275
notfd gaz 21 December 2001 pp 1482–8
commenced on date of notification

Health Legislation Amendment Regulation (No. 1) 2002 SL No. 20 pts 1, 3
notfd gaz 15 February 2002 pp 618–19
commenced on date of notification

Medical Practitioners Registration Regulation 2002 SL No. 31 ss 1–2, 16 sch 4
notfd gaz 1 March 2002 pp 850–2
ss 1–2 commenced on date of notification
remaining provisions commenced 1 March 2002 (see s 2)

Podiatrists Registration Regulation 2002 SL No. 80 ss 1–2, 10 sch 3
notfd gaz 26 April 2002 pp 1540–3
ss 1–2 commenced on date of notification
remaining provisions commenced 1 May 2002 (see s 2)

Health Legislation Amendment Regulation (No. 2) 2002 SL No. 156 pts 1, 3
notfd gaz 28 June 2002 pp 876–83
s 8 commenced 1 July 2002 (see s 2)
remaining provisions commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2002 SL No. 248
notfd gaz 27 September 2002 pp 340–4
ss 1–2 commenced on date of notification
remaining provisions commenced 27 September 2002 (see s 2)

Health (Drugs and Poisons) Amendment Regulation (No. 2) 2002 SL No. 361
notfd gaz 20 December 2002 pp 1359–63
ss 1–2 commenced on date of notification
remaining provisions commenced 1 January 2003 (see s 2)

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2003 SL No. 29
notfd gaz 7 March 2003 pp 845–6
commenced on date of notification

Health Legislation Amendment Regulation (No. 1) 2003 SL No. 130 pts 1, 3
notfd gaz 27 June 2003 pp 749–56
ss 1–2 commenced on date of notification
remaining provisions commenced 1 July 2003 (see s 2)

Child Care Regulation 2003 SL No. 189 ss 1–2, 130
notfd gaz 22 August 2003 pp 1372–5
ss 1–2 commenced on date of notification
remaining provisions commenced 1 September 2003 (see s 2)

Pest Management Regulation 2003 SL No. 201 ss 1, 2(3), 33 sch 1
notfd gaz 5 September 2003 pp 57–8
ss 1–2 commenced on date of notification
remaining provisions commenced 20 September 2003 (see s 2(3))

Training Reform Act 2003 No. 63 ss 1, 2(2), 60 sch
date of assent 13 October 2003
ss 1–2 commenced on date of assent
remaining provisions commenced 1 January 2004 (2003 SL No. 293)

Health (Drugs and Poisons) Amendment Regulation (No. 2) 2003 SL No. 255
notfd gaz 31 October 2003 pp 691–4
commenced on date of notification

Health Legislation Amendment and Repeal Regulation (No. 1) 2003 SL No. 348 pts 1–2
notfd gaz 19 December 2003 pp 1307–13
commenced on date of notification

Dental Practitioners Registration and Other Legislation Amendment Regulation (No. 1) 2004 SL No. 27 ss 1–2, 3(2) sch
notfd gaz 2 April 2004 pp 1315–16
ss 1–2 commenced on date of notification
remaining provisions commenced 1 July 2004 (see s 2)

Health Legislation Amendment Regulation (No. 1) 2004 SL No. 34 pts 1, 4
notfd gaz 8 April 2004 pp 1391–3
commenced on date of notification

Health Legislation Amendment Regulation (No. 3) 2004 SL No. 154 ss 1–2(1), pt 3
notfd gaz 13 August 2004 pp 1165–7
ss 1–2 commenced on date of notification
remaining provisions commenced 18 August 2004 (see s 2(1))

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2004 SL No. 291
notfd gaz 17 December 2004 pp 1277–85
commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2005 SL No. 40
notfd gaz 24 March 2005 pp 996–7
commenced on date of notification

Health Legislation Amendment Regulation (No. 3) 2005 SL No. 142 pts 1–2
notfd gaz 1 July 2005 pp 763–6
commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 2) 2005 SL No. 160
notfd gaz 15 July 2005 pp 906–7
commenced on date of notification

Health Legislation Amendment Regulation (No. 4) 2005 SL No. 170 ss 1, 2(2), pt 3
notfd gaz 29 July 2005 pp 1146–8
ss 1–2 commenced on date of notification
remaining provisions commenced 1 October 2005 (see s 2(2))

Health Legislation Amendment Regulation (No. 5) 2005 SL No. 222 pts 1–2
notfd gaz 9 September 2005 pp 147–8
commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 3) 2005 SL No. 314
notfd gaz 16 December 2005 pp 1490–6
ss 1–2 commenced on date of notification
s 17 commenced 1 April 2006 (see s 2(1))
remaining provisions commenced 1 January 2006 (see s 2(2))

Health Legislation Amendment Regulation (No. 3) 2006 SL No. 91 pts 1–2
notfd gaz 19 May 2006 pp 252–4
ss 1–2 commenced on date of notification
ss 4, 6, 11–12, 14 commenced 1 July 2006 (see s 2)
remaining provisions commenced on date of notification

Health Legislation Amendment Regulation (No. 6) 2006 SL No. 190 ss 1, 2(3), pt 3
notfd gaz 28 July 2006 pp 1480–2
ss 1–2 commenced on date of notification
remaining provisions commenced 1 October 2006 (see s 2(3))

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2006 SL No. 295
notfd gaz 1 December 2006 pp 1587–90
commenced on date of notification

Health Legislation Amendment Regulation (No. 7) 2006 SL No. 308 pts 1–2
notfd gaz 15 December 2006 pp 1861–5
commenced on date of notification

Health Legislation Amendment Regulation (No. 1) 2007 SL No. 18 pts 1, 5
notfd gaz 2 March 2007 pp 983–6
commenced on date of notification

Health Legislation Amendment Regulation (No. 2) 2007 SL No. 57 s 1, pt 5
notfd gaz 20 April 2007 pp 1793–5
commenced on date of notification

Health Legislation Amendment Regulation (No. 3) 2007 SL No. 129 ss 1, 2(4), pt 2
notfd gaz 22 June 2007 pp 1018–20
ss 1–2 commenced on date of notification
remaining provisions commenced 1 October 2007 (see s 2(4))

Health Legislation Amendment Regulation (No. 4) 2007 SL No. 143 pts 1, 4
notfd gaz 29 June 2007 pp 1157–65
commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2007 SL No. 333
notfd gaz 14 December 2007 pp 2131–5
commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2008 SL No. 57
notfd gaz 14 March 2008 pp 1469–72
ss 1–2 commenced on date of notification
remaining provisions commenced 15 March 2008 (see s 2)

Health Legislation Amendment Regulation (No. 3) 2008 SL No. 185 ss 1, 2(4), pt 3
notfd gaz 27 June 2008 pp 1268–78
ss 1–2 commenced on date of notification
remaining provisions commenced 1 October 2008 (see s 2(4))

Corrective Services and Other Legislation Amendment Act 2008 No. 53 pts 1, 5
date of assent 23 October 2008
ss 1–2 commenced on date of assent
remaining provisions commenced 7 November 2008 (2008 SL No. 363)

Health (Drugs and Poisons) Amendment Regulation (No. 2) 2008 SL No. 421
notfd gaz 12 December 2008 pp 2044–53
commenced on date of notification

Health (Drugs and Poisons) and Radiation Safety Amendment Regulation (No. 1) 2008 SL No. 422 pts 1–2
notfd gaz 12 December 2008 pp 2044–53
commenced on date of notification

Queensland Civil and Administrative Tribunal (Jurisdiction Provisions) Amendment Act 2009 No. 24 ss 1–2, ch 7 pt 5
date of assent 26 June 2009
ss 1–2 commenced on date of assent
remaining provisions commenced 1 December 2009 (2009 SL No. 252)

Health Legislation Amendment Regulation (No. 2) 2009 SL No. 154 ss 1–2(1), pt 2
notfd gaz 24 July 2009 pp 1169–70
ss 1–2 commenced on date of notification
remaining provisions commenced 1 October 2009 (see s 2(1))

Juvenile Justice and Other Acts Amendment Act 2009 No. 34 ss 1, 2(2), 45(1) sch pt 1 amdt 19
date of assent 17 September 2009
ss 1–2 commenced on date of assent
remaining provisions commenced 29 March 2010 (2010 SL No. 37)

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2009 SL No. 293
notfd gaz 11 December 2009 pp 1187–91
ss 1–2 commenced on date of notification
s 5 commenced 31 March 2010 (see s 2)
remaining provisions commenced on date of notification

Environment and Resource Management and Other Legislation Amendment Regulation (No. 1) 2010 SL No. 13 pts 1, 6
notfd gaz 19 February 2010 pp 407–9
commenced on date of notification

Health and Other Legislation Amendment Regulation (No. 1) 2010 SL No. 108 pts 1, 10
notfd gaz 11 June 2010 pp 459–61
ss 1–2 commenced on date of notification
remaining provisions commenced 1 July 2010 (see s 2)

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2010 SL No. 113
notfd gaz 11 June 2010 pp 459–61
commenced on date of notification

Health (Drugs and Poisons) Amendment Regulation (No. 2) 2010 SL No. 194
notfd gaz 30 July 2010 pp 1253–5
ss 1–2 commenced on date of notification
remaining provisions commenced 1 October 2010 (see s 2)

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2011 SL No. 4
notfd gaz 28 January 2011 pp 156–7
commenced on date of notification

7 List of annotations

CHAPTER 1—INTRODUCTION
PART 1—PRELIMINARY
Commencement
s 2 om R2 (see RA s 37)

PART 2—INTERPRETATION
Meaning of "manufacture"
s 4 amd 2003 SL No. 201 s 33 sch 1; 2004 SL No. 291 s 3; 2011 SL No. 4 s 3

Quality standards for dispensing certain drugs and selling certain poisons
s 4A ins 2006 SL No. 91 s 4
amd 2010 SL No. 108 s 24

Meaning of "S2" to "S9"
s 5 amd 2000 SL No. 333 s 3
sub 2001 SL No. 205 s 4
amd 2002 SL No. 248 s 4; 2003 SL No. 348 s 3

Meaning of "supervision" and "personal supervision"
s 5A ins 2011 SL No. 4 s 4

Application of interpretation provisions in standard to regulation
s 7 amd 2000 SL No. 333 s 4

References to entering details, signing or dating entries etc.
s 8 amd 2007 SL No. 18 s 10

PART 3—APPLICATION OF REGULATION TO CERTAIN SUBSTANCES
Classification of new drugs and poisons
s 9A ins 2000 SL No. 333 s 5
amd 2011 SL No. 4 s 5

Reclassifications of poisons
s 9B ins 2000 SL No. 333 s 5

PART 4—PACKING AND LABELLING
Packaging of controlled or restricted drugs or poisons
s 10 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 6; 2011 SL No. 4 s 6

Certain containers not to be used
s 12 amd 2000 SL No. 333 s 7

PART 5—ENDORSEMENTS
pt hdg amd 2000 SL No. 333 s 8

Division 1—Preliminary
Meaning of "authority" for pt 5
s 14 amd 1998 SL No. 343 s 12
om 2000 SL No. 333 s 9

Suitability of person to hold endorsement
prov hdg amd 2000 SL No. 333 s 10
s 15 amd 1998 SL No. 343 ss 12–13; 2000 SL No. 333 s 10; 2011 SL No. 4 s 7

Inquiries about person's criminal history
s 16 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 10

Division 2—Applications for endorsements
div hdg amd 2000 SL No. 333 s 11

Applications—form and fee
s 17 amd 1998 SL No. 149 s 4; 2000 SL No. 333 s 12; 2002 SL No. 156 s 6

How chief executive may deal with applications
prov hdg amd 1998 SL No. 343 s 12
s 18 amd 1997 SL No. 323 s 3; 1998 SL No. 149 s 5; 1998 SL No. 343 s 12; 1999 SL No. 258 s 3
sub 2000 SL No. 333 s 13
amd 2002 SL No. 156 s 7; 2009 Act No. 24 s 1020

Renewal of drug licence, poison licence, treatment approval or wholesale representative licence before expiry
prov hdg amd 2000 SL No. 333 s 14(1)
s 19 amd 1998 SL No. 149 s 6; 1998 SL No. 343 s 12; 2000 SL No. 333 s 14(2)–(3)

Renewal of drug licence, poison licence, treatment approval or wholesale representative licence after expiry
prov hdg sub 1998 SL No. 149 s 7(1)
amd 2000 SL No. 333 s 15(1)
s 20 amd 1998 SL No. 149 s 7(2)–(3); 1998 SL No. 343 s 12; 2000 SL No. 333 s 15(2)–(3)

Division 2A—Applications for operating approvals
div 2A (ss 20A–20F) ins 2003 SL No. 255 s 3

Division 3—Other provisions about endorsements
div hdg amd 2000 SL No. 333 s 16

Holder of endorsement must comply with conditions
prov hdg amd 2000 SL No. 333 s 10
s 21 amd 2000 SL No. 333 s 10

Term of drug licence, poison licence or wholesale representative licence
s 22 sub 2000 SL No. 333 s 17

Division 4—Suspension or cancellation of endorsement
div hdg amd 2000 SL No. 333 s 10

Grounds for suspension or cancellation of endorsement
prov hdg amd 2000 SL No. 333 s 18(1)
s 23 amd 1998 SL No. 149 s 8; 1998 SL No. 343 s 12; 2000 SL No. 333 s 18(2); 2001 SL No. 205 s 5; 2003 SL No. 255 s 4

Procedure for suspension or cancellation of endorsement
prov hdg amd 2000 SL No. 333 s 19(1)
s 24 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 19; 2009 Act No. 24 s 1021; 2011 SL No. 4 s 8

Urgent suspension or cancellation of endorsement
prov hdg amd 2000 SL No. 333 s 10
s 25 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 10; 2009 Act No. 24 s 1022; 2011 SL No. 4 s 9

Urgent cancellation of certain approvals
s 25A ins 2001 SL No. 205 s 6
amd 2009 Act No. 24 s 1023

Return of endorsement
prov hdg amd 2000 SL No. 333 s 10
s 26 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 10

Application for amendment or repeal of decision to suspend or cancel endorsement
s 26A ins 2000 SL No. 333 s 20

Division 5—Replacement, amendment, return and surrender of endorsements
div hdg amd 2000 SL No. 333 s 21

Replacement of endorsement
prov hdg amd 2000 SL No. 333 s 10
s 27 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 10; 2009 Act No. 24 s 1024

Amendment of endorsement on application
prov hdg amd 2000 SL No. 333 s 10
s 28 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 10; 2009 Act No. 24 s 1025

Amendment of endorsement without application
prov hdg amd 2000 SL No. 333 s 22(1)
s 29 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 22; 2009 Act No. 24 s 1026

Minor amendment of endorsement
prov hdg amd 2000 SL No. 333 s 10
s 30 amd 1998 SL No. 149 s 9; 1998 SL No. 343 s 12; 2000 SL No. 333 s 10

Date amendment of endorsement takes effect
prov hdg amd 2000 SL No. 333 s 10
s 31 amd 2000 SL No. 333 s 10

Surrender of endorsement
prov hdg amd 2000 SL No. 333 s 10
s 32 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 10; 2001 SL No. 205 s 7

PART 6—EXTERNAL REVIEW
pt hdg sub 2009 Act No. 24 s 1027

Decisions that may be reviewed
prov hdg amd 2009 Act No. 24 s 1028(1)
s 33 amd 1998 SL No. 343 ss 12–13; 2000 SL No. 333 s 10; 2009 Act No. 24 s 1028(2)–(4)

Starting an appeal
s 34 om 2009 Act No. 24 s 1029

Notice of appeal to be given to chief executive
prov hdg amd 1998 SL No. 343 s 12
s 35 amd 1998 SL No. 343 s 12
om 2009 Act No. 24 s 1029

Stay of operation of decisions
s 36 om 2009 Act No. 24 s 1029

Hearing procedures for appeal
s 37 amd 1998 SL No. 343 s 13
om 2009 Act No. 24 s 1029

Powers of court on appeal
s 38 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 10
om 2009 Act No. 24 s 1029

Appeal to District Court on questions of law only
s 39 amd 1999 SL No. 174 s 9
om 2009 Act No. 24 s 1029

CHAPTER 2—CONTROLLED DRUGS
Application of pt 1
s 40 amd 1998 SL No. 343 s 12
sub 2000 SL No. 333 s 23

Licence to state business premises and other particulars
s 41 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 24

Restrictions on grant of controlled drug manufacturer licence
s 42 amd 1998 SL No. 343 s 12

Controlled drug manufacturer licence
s 43 amd 2011 SL No. 4 s 10

Offence to manufacture controlled drugs without licence
s 45 amd 1997 SL No. 64 s 4; 2000 SL No. 333 s 25; 2011 SL No. 4 s 11

Restrictions on grant of controlled drug wholesaler licence
s 46 amd 1998 SL No. 343 s 12

General conditions that apply to controlled drug wholesaler licence
s 48 amd 2011 SL No. 4 s 12

Licensee to give invoice when selling controlled drug
s 49A ins 1997 SL No. 64 s 5

Records of transactions to be kept by licensee
s 50 amd 2000 SL No. 333 s 26; 2004 SL No. 34 s 7

Discrepancy to be immediately reported to chief executive
s 50A ins 2011 SL No. 4 s 13

PART 2—ENDORSEMENTS
pt hdg sub 2003 SL No. 348 s 4

Endorsement needed for controlled drugs
s 51 amd 1998 SL No. 149 s 10
sub 2000 SL No. 333 s 27
amd 2011 SL No. 4 s 14

Anaesthetic assistants and enrolled nurses
s 52 amd 1997 SL No. 64 s 6; 1999 SL No. 258 s 4; 2003 SL No. 348 s 5

Approved dispenser
prov hdg amd 2000 SL No. 333 s 28(1)
s 53 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 28(2)
om 2011 SL No. 4 s 15

Bases and outposts of Royal Flying Doctor Service
s 54 amd 2004 SL No. 291 s 4

Dentists
s 56 amd 1997 SL No. 64 s 7; 2000 SL No. 333 s 29; 2003 SL No. 348 s 6

Doctors
s 58 amd 2011 SL No. 4 s 16

Enrolled nurses
s 58A ins 2006 SL No. 91 s 5
amd 2006 SL No. 308 s 3; 2008 SL No. 422 s 3; 2010 SL No. 108 s 25

Hospital pharmaceutical assistants
s 58B ins 2006 SL No. 91 s 5
amd 2011 SL No. 4 s 17

Hospitals
s 59 sub 2011 SL No. 4 s 18

Indigenous health workers
s 59A ins 1999 SL No. 8 s 3
amd 2000 SL No. 333 s 30; 2001 SL No. 205 s 8; 2004 SL No. 291 s 5; 2008 SL No. 422 s 4

Manufacturer or wholesaler of controlled drugs
s 61 prov hdg sub 1998 SL No. 149 s 11

Midwives
s 62 amd 1997 SL No. 64 s 8; 2004 SL No. 291 s 6
sub 2007 SL No. 143 s 7
amd 2008 SL No. 422 s 5

Nursing homes
s 63 amd 1997 SL No. 64 s 9

Pharmacists
s 64 amd 1997 SL No. 64 s 10; 1998 SL No. 149 s 12; 1999 SL No. 258 s 5; 2000 SL No. 333 s 31; 2001 SL No. 205 s 9; 2001 SL No. 267 s 14 sch 4; 2003 SL No. 255 s 5; 2003 SL No. 348 s 7; 2004 SL No. 291 s 7; 2005 SL No. 314 s 4; 2008 SL No. 422 s 6; 2011 SL No. 4 s 19

Physician's assistants
s 64AA ins 2008 SL No. 422 s 7

Surgical Podiatrists
s 64A ins 2006 SL No. 308 s 4

Queensland Ambulance Service
s 66 amd 1997 SL No. 64 s 11
sub 2000 SL No. 333 s 32
amd 2007 SL No. 333 s 3; 2008 SL No. 422 s 8

Registered nurses
s 67 amd 1997 SL No. 64 s 12; 1997 SL No. 323 s 4; 1998 SL No. 259 s 3; 1999 SL No. 8 s 4; 2000 SL No. 333 s 33; 2001 SL No. 205 s 10; 2004 SL No.

291 s 8; 2005 SL No. 314 s 5; 2006 SL No. 308 s 5; 2007 SL No. 333 s 4; 2008 SL No. 422 s 9; 2010 SL No. 108 s 26

Certain registered nurses at rural hospitals
prov hdg amd 2001 SL No. 205 s 11
s 68 sub 1997 SL No. 64 s 13
amd 2004 SL No. 291 s 9; 2008 SL No. 422 s 10

Ship's master
s 69 sub 2003 SL No. 348 s 8

State analysts
s 70 amd 2011 SL No. 4 s 20

State forensic and scientific service facilities
s 70AA ins 2011 SL No. 4 s 21

Trainees in certain occupations
s 70A ins 2003 SL No. 348 s 9

Veterinary surgeons
s 71 amd 2011 SL No. 4 s 22

Other authorities may be given
s 73 amd 1997 SL No. 64 s 14; 1998 SL No. 343 s 12
om 2000 SL No. 333 s 34

When endorsement is not needed
prov hdg amd 2000 SL No. 333 s 35(1)
s 74 amd 2000 SL No. 333 s 35(2); 2003 SL No. 348 s 10; 2011 SL No. 4 s 23

Butorphanol and carfentanyl
s 75 om 1998 SL No. 149 s 13

Approved drugs—dextromoramide and hydromorphone
s 76 om 1998 SL No. 149 s 13

Approved drug—dronabinol (*delta*-9-tetrahydrocannabinol)
s 77 amd 2011 SL No. 4 s 24

Specified condition drugs—amphetamine, dexamphetamine, methylamphetamine, methylphenidate, phenmetrazine
s 78 amd 1997 SL No. 64 s 15; 1998 SL No. 149 s 14; 1998 SL No. 343 s 12; 1999 SL No. 258 s 6; 1999 SL No. 326 s 3; 2010 SL No. 108 s 27; 2011 SL No. 4 s 25

PART 4—PRESCRIBING AND DISPENSING CONTROLLED DRUGS
pt hdg sub 1998 SL No. 149 s 15

Prescribing controlled drugs
prov hdg sub 1998 SL No. 149 s 16
amd 1999 SL No. 258 s 7
s 79 amd 2000 SL No. 333 s 36; 2003 SL No. 348 s 11; 2005 SL No. 314 s 6; 2006 SL No. 308 s 6; 2007 SL No. 18 s 11; 2008 SL No. 422 s 11

Restrictions on making prescriptions
prov hdg amd 2007 No. 18 s 12(1)
s 80 amd 2000 SL No. 333 s 37; 2007 SL No. 18 s 12(2)–(3); 2011 SL No. 4 s 26

Oral prescription
s 81 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 38; 2005 SL No. 314 s 7; 2007 SL No. 18 s 13; 2008 SL No. 422 s 12
sub 2010 SL No. 113 s 3

Faxed prescription
s 81AA ins 2010 SL No. 113 s 3

Quality standard for dispensing controlled drugs
s 81A ins 2006 SL No. 91 s 6

Conditions of dispensing
s 82 amd 1998 SL No. 149 s 17; 1998 SL No. 343 s 12; 1999 SL No. 258 s 8; 2003 SL No. 348 s 12; 2004 SL No. 291 s 10; 2005 SL No. 142 s 3; 2007 SL No. 18 s 14; 2008 SL No. 422 s 13; 2010 SL No. 108 s 28; 2011 SL No. 4 s 27

Prescription made by person authorised under regulation
s 82A ins 2010 SL No. 108 s 29

Dispensing generic drugs
s 83 amd 1997 SL No. 64 s 16; 2007 SL No. 18 s 15; 2011 SL No. 4 s 28

Dealing with paper prescriptions and certain written instructions
prov hdg amd 1998 SL No. 149 s 18(1); 2007 SL No. 18 s 16(1)
s 84 amd 1998 SL No. 149 s 18(2)–(4); 1998 SL No. 343 s 12; 1999 SL No. 258 s 9; 1999 SL No. 326 s 4; 2000 SL No. 333 s 39; 2001 SL No. 205 s 12; 2003 SL No. 255 s 6; 2003 SL No. 348 s 13; 2007 SL No. 18 s 16(2)–(3); 2007 SL No. 143 s 8

Dealing with electronic prescriptions
s 84A ins 2007 SL No. 18 s 17

Labelling dispensed and supplied medicines
prov hdg amd 2000 SL No. 333 s 40(1)
s 85 amd 1998 SL No. 149 s 19; 1999 SL No. 258 s 10; 2000 SL No. 333 s 40(2)–(3); 2001 SL No. 205 s 13; 2003 SL No. 255 s 7; 2007 SL No. 18 s 18; 2011 SL No. 4 s 29

Sale of controlled drug after expiry date
s 85A ins 2011 SL No. 4 s 30

Record of transactions involving controlled drugs to be kept by pharmacist
prov hdg sub 1998 SL No. 149 s 20(1)
s 86 amd 1998 SL No. 149 s 20(2); 1999 SL No. 258 s 11; 2000 SL No. 333 s 36; 2003 SL No. 255 s 8
sub 2004 SL No. 34 s 8

Entries to be made in controlled drugs record
prov hdg sub 2004 SL No. 34 s 9(1)
s 87 amd 1999 SL No. 258 s 12; 2003 SL No. 348 s 14; 2004 SL No. 34 s 9(2)–(5); 2007 SL No. 18 s 19

Stock to be checked
s 88 amd 1997 SL No. 64 s 17; 1998 SL No. 343 s 12; 2004 SL No. 34 s 10; 2011 SL No. 4 s 31

PART 5—OBTAINING AND SELLING CONTROLLED DRUGS ON PURCHASE ORDER
pt hdg sub 1998 SL No. 149 s 21

Authorised persons to obtain controlled drugs on purchase order
s 89 amd 1998 SL No. 149 s 22

Sale of controlled drugs to authorised persons
s 90 amd 1998 SL No. 149 s 23; 2003 SL No. 348 s 15

Sending controlled drugs by carrier etc.
s 92 amd 1997 SL No. 64 s 18; 1998 SL No. 343 s 12

Dealing with purchase orders
s 93 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 41; 2003 SL No. 348 s 16

Unlawful possession of controlled drugs
s 94 amd 2000 Act No. 28 s 26 sch; 2001 SL No. 205 s 14; 2011 SL No. 4 s 32

Possession by user
s 95 amd 1997 SL No. 64 s 19; 2000 SL No. 333 s 42

Oral instruction must be put in writing
prov hdg sub 2005 SL No. 40 s 3(1)
s 97 sub 1997 SL No. 64 s 20
amd 1998 SL No. 149 s 24; 1998 SL No. 343 s 12; 2005 SL No. 40 s 3(2); 2005 SL No. 314 s 8; 2007 SL No. 333 s 5; 2008 SL No. 422 s 14

Central storer to keep main issue book for controlled drugs
s 99 amd 1998 SL No. 149 s 25; 2000 SL No. 333 s 36

Details to be recorded when controlled drugs obtained by central storer
s 100 amd 1998 SL No. 149 s 26

Unit storer to keep ward drugs book for controlled drugs
s 101 amd 1998 SL No. 149 s 27; 2000 SL No. 333 s 36

Single storer to keep single storage book for controlled drugs
s 106 amd 1997 SL No. 64 s 21; 1998 SL No. 149 s 28; 2000 SL No. 333 s 36

Details to be recorded when controlled drugs administered
s 108 amd 2005 SL No. 40 s 4

Records of controlled drugs supplied to be kept
s 109 amd 1997 SL No. 64 s 22; 1997 SL No. 323 s 5; 1998 SL No. 149 s 29; 2000 SL No. 333 s 36

Responsibility for checking accuracy of records at institutions
s 110 amd 1998 SL No. 343 s 12; 2011 SL No. 4 s 33

Records—dentists, doctors, nurse practitioners, veterinary surgeons
prov hdg amd 2005 SL No. 314 s 9(1)
s 111 amd 2005 SL No. 314 s 9(2)

Records—ambulance officers, indigenous health workers, midwives and rural and isolated practice endorsed nurses
prov hdg amd 2001 SL No. 205 s 15; 2005 SL No. 314 s 10(1); 2011 SL No. 4 s 34(1)
s 112 amd 1997 SL No. 64 s 23; 2001 SL No. 205 s 15; 2005 SL No. 314 s 10(2)–(6); 2011 SL No. 4 s 34(2)–(4)

Record keeping for certain nursing practices and Queensland Ambulance Service stations
prov hdg amd 2007 SL No. 333 s 6(1)
s 113 amd 1998 SL No. 343 s 12; 2001 SL No. 205 s 16; 2007 SL No. 333 s 6(2); 2011 SL No. 4 s 35

Records—other approved persons
prov hdg amd 2000 SL No. 333 s 43(1)
s 114 amd 2000 SL No. 333 s 43

Exemption of user from keeping records
s 115 amd 2000 SL No. 333 s 44

Discrepancy to be immediately reported to chief executive
prov hdg amd 1998 SL No. 343 s 12
s 116A ins 1998 SL No. 149 s 30
amd 1998 SL No. 343 s 12
sub 2011 SL No. 4 s 36

Storage of controlled drugs at institutions
s 118 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 45; 2011 SL No. 4 s 37

Storage of controlled drugs generally
s 119 amd 1998 SL No. 343 s 12; 2001 SL No. 205 s 17; 2003 SL No. 348 s 17; 2011 SL No. 4 s 38

PART 9—TREATMENT WITH AND DEPENDENCE ON CONTROLLED DRUGS
pt hdg amd 2000 SL No. 333 s 46

Notice required if lengthy treatment with controlled drug
s 120 amd 1998 SL No. 343 s 12; 2006 SL No. 308 s 7

Controlled drugs not to be obtained unless information disclosed
prov hdg amd 2006 SL No. 308 s 8; 2008 SL No. 422 s 15(1)
s 121 amd 1997 SL No. 64 s 24; 2006 SL No. 308 s 8; 2008 SL No. 422 s 15(2)

Approval needed for treating certain drug dependent persons with controlled drugs
prov hdg amd 2011 SL No. 4 s 39(1)
s 122 amd 1998 SL No. 149 s 31; 1998 SL No. 343 s 12; 2000 SL No. 333 s 47; 2006 SL No. 308 s 9; 2007 SL No. 143 s 9; 2011 SL No. 4 s 39(2)–(3)

Approval needed to establish or operate a controlled drugs administration facility
s 122A ins 2003 SL No. 255 s 9

Self-administration of controlled drugs by authorised persons prohibited
s 123 amd 2005 SL No. 314 s 11

Improper use of prescriptions for controlled drugs
s 127 amd 1998 SL No. 149 s 32

False statements—controlled drugs
s 128 amd 2000 SL No. 333 s 48

Unsafe disposal or use of controlled drugs
s 130 amd 2000 SL No. 333 s 49

Advertising controlled drugs
s 131 amd 1998 SL No. 149 s 33; 2003 SL No. 348 s 18; 2008 SL No. 57 s 4

Automatic machines—Act, s 106
s 131A ins 2004 SL No. 34 s 11

CHAPTER 3—RESTRICTED DRUGS
PART 1—LICENCES
Application of pt 1
s 134 amd 1998 SL No. 343 s 12
sub 2000 SL No. 333 s 50

Licence to state business premises and other particulars
s 135 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 51

Restrictions on grant of restricted drug manufacturer licences
s 136 amd 1998 SL No. 343 s 12

Restricted drug manufacturer licence
s 137 amd 1997 SL No. 64 s 25; 2011 SL No. 4 s 40

Offence to manufacture restricted drug without licence
s 139 amd 1997 SL No. 64 s 26; 2000 SL No. 333 s 52; 2011 SL No. 4 s 41

Restrictions on grant of restricted drug wholesaler licence
s 140 amd 1998 SL No. 343 s 12

General conditions that apply to restricted drug wholesaler licence
s 142 amd 2003 SL No. 255 s 10; 2011 SL No. 4 s 42

Records of transactions to be kept by licensee
s 144 amd 2000 SL No. 333 s 53; 2003 SL No. 255 s 11; 2004 SL No. 34 s 12

Certain losses etc. to be immediately reported to chief executive
s 144A ins 2011 SL No. 4 s 43

Persons to whom a licensee may give samples
prov hdg sub 2003 SL No. 255 s 12(1)
s 145 amd 2003 SL No. 255 s 12(2)

PART 2—ENDORSEMENTS
pt hdg amd 2000 SL No. 333 s 54

Endorsement needed for restricted drugs
s 146 amd 1998 SL No. 149 s 34
sub 2000 SL No. 333 s 55
amd 2011 SL No. 4 s 44

Wholesale representative licence
s 147 amd 1998 SL No. 343 s 12
sub 2000 SL No. 333 s 56
amd 2003 SL No. 255 s 13; 2011 SL No. 4 s 45

Wholesale representative may obtain restricted drugs
s 148 amd 2003 SL No. 255 s 14; 2011 SL No. 4 s 46

Storage etc. of samples
s 149 amd 2001 SL No. 205 s 18; 2003 SL No. 255 s 15; 2011 SL No. 4 s 47

Returns of transactions
s 150 amd 2003 SL No. 255 s 16

Giving samples
prov hdg sub 2003 SL No. 255 s 17(1)
s 153 amd 2003 SL No. 255 s 17(2); 2011 SL No. 4 s 48

Division 3—Particular endorsements
div hdg amd 2000 SL No. 333 s 57

Anaesthetic assistants and enrolled nurses
s 155 amd 1997 SL No. 64 s 27; 1999 SL No. 258 s 13; 2003 SL No. 348 s 19

Approved dispensers
prov hdg amd 2000 SL No. 333 s 58(1)
s 156 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 58(2)
om 2011 SL No. 4 s 49

Bases and outposts of Royal Flying Doctor Service
s 157 amd 2004 SL No. 291 s 11

Dental hygienists
s 158A ins 2005 SL No. 40 s 5
amd 2006 SL No. 91 s 7; 2010 SL No. 108 s 30; 2011 SL No. 4 s 50

Dental therapists
prov hdg sub 2004 SL No. 27 s 3(2) sch
s 158B (prev s 177) amd 2001 SL No. 264 s 17 sch 5; 2003 SL No. 348 s 22; 2004 SL No. 27 s 3(2) sch; 2005 SL No. 40 s 8(1)–(2)
reloc and renum 2005 SL No. 40 s 8(3)
amd 2006 SL No. 91 s 8; 2010 SL No. 108 s 31; 2011 SL No. 4 s 51

Oral health therapists
s 158C ins 2010 SL No. 108 s 32
amd 2011 SL No. 4 s 52

Dentists
s 159 amd 1997 SL No. 64 s 28; 1999 SL No. 258 s 14; 2004 SL No. 34 s 13; 2004 SL No. 291 s 12

Doctors
s 161 amd 2004 SL No. 291 s 13; 2011 SL No. 4 s 53

Enrolled nurses
s 162 amd 2000 SL No. 333 s 59; 2003 SL No. 348 s 20; 2004 SL No. 34 s 14; 2004 SL No. 291 s 14; 2005 SL No. 40 s 6; 2006 SL No. 308 s 10; 2008 SL No. 422 s 16; 2010 SL No. 108 s 33

First aid providers
s 163AA ins 2008 SL No. 421 s 3

Hospital pharmaceutical assistants
s 163A ins 2001 SL No. 205 s 19
amd 2006 SL No. 91 s 9; 2011 SL No. 4 s 54

Hospitals
s 164 amd 1997 SL No. 64 s 29
sub 2011 SL No. 4 s 55

Indigenous health workers
prov hdg sub 1998 SL No. 149 s 35(1)
s 164A (prev s 154) amd 1998 SL No. 149 s 35(2)–(5)
renum and reloc 1998 SL No. 149 s 35(6)
sub 1999 SL No. 8 s 5
amd 2000 SL No. 333 s 60; 2001 SL No. 205 s 20; 2004 SL No. 291 s 15; 2008 SL No. 422 s 17

Manufacturer or wholesaler of restricted drugs
prov hdg sub 1998 SL No. 149 s 36
s 166 amd 2004 SL No. 34 s 15

Midwives
s 167 amd 1997 SL No. 64 s 30; 2004 SL No. 291 s 16; 2005 SL No. 222 s 3; 2007 SL No. 143 s 10; 2008 SL No. 422 s 18

Eligible midwives
s 167A ins 2011 SL No. 4 s 56

Mine sites etc.
s 168 amd 2003 SL No. 255 s 18

Optometrists
s 170 amd 2000 SL No. 333 s 61; 2005 SL No. 40 s 7; 2011 SL No. 4 s 57

Orthopists
s 170A ins 2011 SL No. 4 s 58

Pharmacists
s 171 amd 1997 SL No. 64 s 31; 2000 SL No. 333 s 62; 2001 SL No. 267 s 14 sch 4; 2003 SL No. 348 s 21; 2004 SL No. 291 s 17; 2005 SL No. 314 s 12; 2008 SL No. 422 s 19; 2011 SL No. 4 s 59

Physician's assistants
s 171A ins 2008 SL No. 422 s 20

Podiatrists
s 172 amd 2001 SL No. 205 s 21; 2006 SL No. 308 s 11

Surgical podiatrists
s 172A ins 2006 SL No. 308 s 12

Queensland Ambulance Service
s 174 amd 1997 SL No. 64 s 32; 1999 SL No. 258 s 15
(1)(c) exp 31 December 1999 (see s 174(5))
sub 2000 SL No. 333 s 63
amd 2005 SL No. 314 s 13; 2006 SL No. 91 s 10; 2007 SL No. 333 s 7; 2008 SL No. 422 s 21

Queensland Ambulance Service—first responders
s 174A ins 2008 SL No. 421 s 4

St John Ambulance Australia—Queensland
s 174B ins 2008 SL No. 421 s 4

Registered nurses
s 175 amd 1997 SL No. 64 s 33; 1997 SL No. 323 s 6; 1998 SL No. 259 s 4; 1999 SL No. 8 s 6; 2000 SL No. 333 s 64; 2001 SL No. 205 s 22; 2004 SL No. 291 s 18; 2005 SL No. 314 s 14; 2006 SL No. 308 s 13; 2007 SL No. 333 s 8; 2008 SL No. 422 s 22; 2010 SL No. 108 s 34; 2011 SL No. 4 s 60

Certain registered nurses at rural hospitals
prov hdg amd 2001 SL No. 205 s 23
s 176 sub 1997 SL No. 64 s 34
amd 1999 SL No. 258 s 16; 2004 SL No. 291 s 19; 2008 SL No. 422 s 23

Ship's master
s 178 sub 2003 SL No. 348 s 23

State analysts
s 179 amd 2011 SL No. 4 s 61

State forensic and scientific service facilities
s 179AAA ins 2011 SL No. 4 s 62

Trainees in certain occupations
s 179AA ins 2003 SL No. 348 s 24

Universities
s 179A ins 2000 SL No. 333 s 65
amd 2003 SL No. 255 s 19

Veterinary nurses
s 179B ins 2000 SL No. 333 s 65
amd 2003 SL No. 348 s 25

Veterinary surgeons
s 180 amd 2011 SL No. 4 s 63

Other authorities may be given
s 182 amd 1997 SL No. 64 s 35; 1998 SL No. 343 s 12
om 2000 SL No. 333 s 66

When endorsement is not needed
prov hdg amd 2000 SL No. 333 s 67(1)
s 183 amd 2000 SL No. 333 s 67(2); 2003 SL No. 348 s 26; 2011 SL No. 4 s 64

Possession etc. of certain regulated restricted drugs
s 184 om 1998 SL No. 149 s 37

Dinoprost and dinoprostone
s 185 amd 2000 SL No. 333 s 68; 2010 SL No. 108 s 35

Acitretin, etretinate, isotretinoin and tretinoin
prov hdg amd 1998 SL No. 149 s 38(1); 1999 SL No. 258 s 17
s 186 amd 1998 SL No. 149 s 38(2); 1999 SL No. 258 s 17
sub 2000 SL No. 333 s 69
amd 2001 SL No. 205 s 24; 2003 SL No. 348 s 27; 2010 SL No. 108 s 36; 2011 SL No. 4 s 65

Bexarotene
prov hdg sub 2001 SL No. 205 s 25(1)
s 186A ins 2000 SL No. 333 s 69
amd 2001 SL No. 205 s 25(2)
sub 2004 SL No. 34 s 16
amd 2005 SL No. 40 s 9; 2010 SL No. 108 s 37

Thalidomide
s 186B ins 2004 SL No. 34 s 16
amd 2004 SL No. 291 s 20; 2005 SL No. 40 s 10; 2010 SL No. 108 s 38

Clomiphene, cyclofenil, luteinising hormone and urofollitrophin
s 187 amd 1997 SL No. 64 s 36; 2001 SL No. 205 s 26; 2010 SL No. 108 s 39

Clozapine
s 188 amd 2000 SL No. 333 s 70; 2010 SL No. 108 s 40

Bosentan
s 188A prev s 188A ins 1998 SL No. 203 s 3
om 1999 SL No. 8 s 7
pres s 188A ins 2004 SL No. 34 s 17
amd 2010 SL No. 108 s 41; 2011 SL No. 4 s 66

Teriparatide
s 188B ins 2004 SL No. 34 s 17
amd 2010 SL No. 108 s 42; 2011 SL No. 4 s 67

Exemptions for some acts involving certain regulated restricted drugs
s 189 amd 1998 SL No. 149 s 39; 1999 SL No. 258 s 18; 2001 SL No. 205 s 27; 2004 SL No. 34 s 18; 2011 SL No. 4 s 68

PART 4—PRESCRIBING AND DISPENSING RESTRICTED DRUGS
pt hdg sub 1998 SL No. 149 s 40

Prescribing restricted drugs
prov hdg sub 2000 SL No. 333 s 71(1)
s 190 amd 1997 SL No. 323 s 7; 2000 SL No. 333 s 71(2); 2005 SL No. 40 s 11; 2005 SL No. 314 s 15; 2006 SL No. 308 s 14; 2007 SL No. 18 s 20; 2008 SL No. 422 s 24; 2011 SL No. 4 s 69

Restrictions on making prescriptions
prov hdg amd 2007 SL No. 18 s 21(1)
s 191 amd 2000 SL No. 333 s 72; 2007 SL No. 18 s 21(2)–(3); 2011 SL No. 4 s 70

Oral prescription
s 192 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 73; 2004 SL No. 34 s 19; 2005 SL No. 314 s 16; 2007 SL No. 18 s 22; 2008 SL No. 422 s 25
sub 2010 SL No. 113 s 4

Faxed prescription
s 192AA ins 2010 SL No. 113 s 4

Quality standard for dispensing restricted drugs
s 192A ins 2006 SL No. 91 s 11

General conditions of dispensing
prov hdg amd 2010 SL No. 108 s 43(1)
s 193 amd 1998 SL No. 149 s 41; 1998 SL No. 343 s 12; 2003 SL No. 348 s 28; 2004 SL No. 291 s 21; 2005 SL No. 142 s 4; 2007 SL No. 18 s 23; 2008 SL No. 422 s 26; 2010 SL No. 108 s 43(2)–(3)

Authorised prescriber
s 193A ins 2010 SL No. 108 s 44

Emergency sale of restricted drugs by pharmacist
s 194 amd 1997 SL No. 64 s 37; 2004 SL No. 291 s 22

Dispensing generic drugs
s 195 amd 1997 SL No. 64 s 38; 2007 SL No. 18 s 24; 2011 SL No. 4 s 71

Interstate prescriptions
s 196 amd 1997 SL No. 64 s 39; 1999 SL No. 258 s 19; 2005 SL No. 314 s 17; 2007 SL No. 18 s 25
om 2010 SL No. 108 s 45

Dealing with prescriptions
s 197 amd 1997 SL No. 64 s 40; 1998 SL No. 343 s 12; 2007 SL No. 18 s 26; 2011 SL No. 4 s 72

Labelling dispensed medicines
s 198 amd 1998 SL No. 149 s 42; 2003 SL No. 348 s 29; 2004 SL No. 34 s 20; 2005 SL No. 40 s 12; 2007 SL No. 18 s 27; 2011 SL No. 4 s 73

Sale of restricted drug after expiry date
s 198A ins 2011 SL No. 4 s 74

Records of restricted drugs dispensed to be kept
s 199 amd 2000 SL No. 333 s 36; 2004 SL No. 34 s 21; 2007 SL No. 18 s 28

PART 5—OBTAINING AND SELLING RESTRICTED DRUGS ON PURCHASE ORDER
pt hdg sub 1998 SL No. 149 s 43; 1998 SL No. 343 s 14

Authorised persons to obtain restricted drugs on purchase order
s 200 amd 1998 SL No. 149 s 44; 1999 SL No. 258 s 20; 2006 SL No. 308 s 15

Sale of restricted drugs to authorised persons
s 201 amd 1999 SL No. 258 s 21; 2003 SL No. 348 s 30; 2010 SL No. 108 s 46

Interstate orders of specified restricted drugs
s 201A ins 2010 SL No. 108 s 47

Dealing with purchase orders
s 203 amd 1998 SL No. 343 s 12; 2011 SL No. 4 s 75

Unlawful possession of restricted drugs
s 204 amd 2000 Act No. 28 s 26 sch; 2001 SL No. 205 s 28; 2011 SL No. 4 s 76

Possession by user
s 205 amd 2000 SL No. 333 s 74

Dentist or doctor may instruct someone to administer or supply a restricted drug
s 206 om 1997 SL No. 64 s 41

Records of restricted drugs supplied to be kept
s 207 amd 1997 SL No. 64 s 42; 1997 SL No. 323 s 8; 2000 SL No. 333 s 36; 2001 SL No. 205 s 29; 2005 SL No. 314 s 18; 2007 SL No. 333 s 9; 2011 SL No. 4 s 77

Records—other approved persons
prov hdg amd 2000 SL No. 333 s 75(1)
s 208 amd 2000 SL No. 333 s 75

Exemption of user from keeping records
s 209 amd 2005 SL No. 40 s 13

Records not to be changed but may be corrected
s 210 amd 1997 SL No. 64 s 43

Storage of restricted drugs generally
s 211 amd 2001 SL No. 205 s 30; 2005 SL No. 314 s 19

PART 9—TREATMENT WITH AND DEPENDENCE ON RESTRICTED DRUGS OF DEPENDENCY

pt hdg amd 2000 SL No. 333 s 76

Restricted drugs of dependency not to be obtained unless information disclosed to dentist, doctor, nurse practitioner or surgical podiatrist

prov hdg amd 2006 SL No. 308 s 16
s 212 amd 2006 SL No. 308 s 16

Approval needed for treating certain drug dependent persons with restricted drugs of dependency

prov hdg amd 2006 SL No. 308 s 17(1); 2011 SL No. 4 s 78(1)
s 213 amd 1998 SL No. 149 s 45; 1998 SL No. 343 s 12
sub 1999 SL No. 258 s 22
amd 2006 SL No. 308 s 17(2)–(3); 2011 SL No. 4 s 78(2)–(3)

Approval needed for treatment by dentist of drug dependent person with restricted drugs of dependency

s 213A ins 1999 SL No. 258 s 22

Improper use of prescriptions for restricted drugs

s 217 amd 1997 SL No. 64 s 44; 1998 SL No. 149 s 46

False statements—restricted drugs

s 218 amd 2000 SL No. 333 s 77

Unsafe disposal or use of restricted drugs

s 219 amd 2000 SL No. 333 s 78

Advertising of restricted drugs

s 220 amd 1998 SL No. 149 s 47; 2003 SL No. 348 s 31; 2008 SL No. 57 s 5

Automatic machines—Act, s 106

s 220A ins 2004 SL No. 34 s 22

CHAPTER 4—POISONS

Application of pt 1

s 223 amd 1998 SL No. 343 s 12
sub 2000 SL No. 333 s 79

Licence to state business premises and other particulars

s 224 amd 1998 SL No. 343 s 12

Restrictions on grant of poison manufacturer licence

s 225 amd 1998 SL No. 343 s 12

Offence to manufacture S2, S3 or S7 poisons without licence

s 227 amd 1997 SL No. 64 s 45; 2000 SL No. 333 s 80; 2011 SL No. 4 s 79

Restrictions on grant of poison wholesaler licence

s 228 amd 1998 SL No. 343 s 12

Poison wholesaler licence

s 229 amd 1997 SL No. 64 s 46; 2001 SL No. 205 s 31

Restrictions on grant of general poison licence
s 231 amd 1998 SL No. 343 s 12; 2002 SL No. 361 s 4; 2005 SL No. 314 s 20; 2011 SL No. 4 s 80

General licence
s 232 amd 2002 SL No. 361 s 5; 2005 SL No. 314 s 21; 2011 SL No. 4 s 80

Restriction on grant of licence to sell S7 poisons other than for human therapeutic use
s 233 amd 1998 SL No. 343 s 12

Wholesale and retail sales by manufacturers and wholesalers
s 235 prev s 235 amd 1997 SL No. 64 s 47; 1997 SL No. 323 s 9; 1998 SL No. 149 s 48
om 2000 SL No. 333 s 81
pres s 235 (prev s 273A) ins 1998 SL No. 149 s 55
amd 1998 SL No. 343 s 12
sub 2000 SL No. 333 s 98
amd 2001 SL No. 205 s 37
reloc and renum 2003 SL No. 348 s 52
amd 2004 SL No. 34 s 23; 2007 SL No. 143 s 11; 2007 SL No. 333 s 10

Records of certain transactions by poison manufacturers and wholesalers
s 237 prov hdg sub 2000 SL No. 333 s 82

PART 2—PERMITS FOR CYANIDE AND STRYCHNINE
pt hdg sub 2003 SL No. 348 s 32

Division 1—Cyanide
div hdg prev div 1 hdg om 2003 SL No. 348 s 33
pres div 1 hdg (prev div 2 hdg) renum 2003 SL No. 348 s 34

Obtaining, possession or use of cyanide
s 238 prev s 238 amd 1998 SL No. 343 s 12
sub 2000 SL No. 333 s 83
om 2003 SL No. 348 s 33
pres s 238 (prev s 280) amd 1998 SL No. 149 s 58; 2000 SL No. 333 s 101; 2003 SL No. 348 s 54(1)–(2)
reloc and renum 2003 SL No. 348 s 54(3)
amd 2005 SL No. 40 s 14

Restriction on sale of cyanide
s 238A (prev s 281) amd 2000 SL No. 333 s 102
reloc and renum 2003 SL No. 348 s 55
amd 2005 SL No. 314 s 22

Requirements for cyanide obtained outside the State
prov hdg sub 2005 SL No. 40 s 15(1)
s 239 sub 2003 SL No. 348 s 35
amd 2005 SL No. 40 s 15

Permit conditions
s 240 amd 2003 SL No. 348 s 36

Division 2—Strychnine
div hdg prev div 2 hdg renum 2003 SL No. 348 s 34
pres div 2 hdg (prev div 3 hdg) renum 2003 SL No. 348 s 34

Obtaining, possession or use of strychnine
s 240A (prev s 282) amd 1998 SL No. 149 s 59; 2000 SL No. 333 s 103; 2003 SL No. 348 s 56(1)–(2)
reloc and renum 2003 SL No. 348 s 56(3)
amd 2005 SL No. 40 s 16; 2011 SL No. 4 s 81

Restriction on sale of strychnine
s 240B (prev s 283) amd 2000 SL No. 333 s 104
reloc and renum 2003 SL No. 348 s 57
amd 2005 SL No. 314 s 23

Requirements for strychnine obtained outside the State
prov hdg sub 2005 SL No. 40 s 17(1)
s 241 sub 2003 SL No. 348 s 37
amd 2005 SL No. 40 s 17

Permit conditions
s 242 amd 2003 SL No. 348 s 38; 2011 SL No. 4 s 82

PART 3—ENDORSEMENTS
pt hdg amd 2000 SL No. 333 s 84

Endorsement needed for S2, S3 or S7 poison
s 243 amd 1998 SL No. 149 s 49
sub 2000 SL No. 333 s 85
amd 2011 SL No. 4 s 83

Division 2—Particular endorsements
div hdg amd 2000 SL No. 333 s 86

Approved dispensers
prov hdg amd 2000 SL No. 333 s 87(1)
s 245 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 87(2)
om 2011 SL No. 4 s 84

Outposts of Royal Flying Doctor Service
s 246 amd 2004 SL No. 291 s 23
sub 2005 SL No. 314 s 24

Cane protection and productivity board
s 247 sub 1999 Act No. 51 s 228 sch
om 2003 SL No. 348 s 39

Dental hygienists
s 248 amd 2000 SL No. 333 s 88; 2001 SL No. 264 s 17 sch 5; 2004 SL No. 27 s 3(2) sch; 2005 SL No. 40 s 18; 2010 SL No. 108 s 48
sub 2011 SL No. 4 s 85

Dental therapists
prov hdg sub 2004 SL No. 27 s 3(2) sch

s 248A (prev s 264) amd 2001 SL No. 264 s 17 sch 5; 2003 SL No. 348 s 45; 2004 SL No. 27 s 3(2) sch; 2005 SL No. 40 s 21(1)–(3)
reloc and renum 2005 SL No. 40 s 21(4)
amd 2007 SL No. 57 s 11; 2007 SL No. 333 s 11; 2010 SL No. 108 s 49
sub 2011 SL No. 4 s 85

Oral health therapists
s 248B ins 2010 SL No. 108 s 50
sub 2011 SL No. 4 s 85

Doctors
s 251 amd 2004 SL No. 291 s 24

Enrolled nurses
s 252 amd 1998 SL No. 149 s 51; 2003 SL No. 348 s 40; 2005 SL No. 40 s 19

Hospital pharmaceutical assistants
s 252A ins 2001 SL No. 205 s 33
amd 2011 SL No. 4 s 86

Indigenous health workers
prov hdg sub 1998 SL No. 149 s 50(1)
s 252B (prev s 252A (orig s 244)) amd 1997 SL No. 64 s 48; 1998 SL No. 149 s 50(2)–(5)
renum and reloc 1998 SL No. 149 s 50(6)
sub 1999 SL No. 8 s 8
amd 2000 SL No. 333 s 89; 2001 SL No. 205 s 32(1)
renum 2001 SL No. 205 s 32(2)

Local governments
s 254 amd 2001 SL No. 205 s 34; 2005 SL No. 40 s 20

Midwives
s 255 amd 1997 SL No. 323 s 10
sub 2000 SL No. 333 s 90
amd 2004 SL No. 291 s 25; 2007 SL No. 143 s 12

Optometrists
s 256 amd 2003 SL No. 348 s 41

Orthopists
s 256AA ins 2011 SL No. 4 s 87

Particular individuals who provide child care
s 256A ins 2003 SL No. 29 s 3
amd 2003 SL No. 189 s 130; 2004 SL No. 34 s 24

Persons with certain asthma management training
s 256B ins 2007 SL No. 143 s 13

Pharmacists
s 257 amd 1997 SL No. 64 s 49; 2001 SL No. 267 s 14 sch 4; 2003 SL No. 348 s 42; 2011 SL No. 4 s 88

Pharmacy assistants
s 258 amd 2011 SL No. 4 s 89

Physician's assistants
s 258A ins 2008 SL No. 422 s 27

Physiotherapists
s 259 amd 2003 SL No. 348 s 43

Podiatrists
s 260 amd 2003 SL No. 348 s 44; 2006 SL No. 308 s 18

Surgical podiatrists
s 260A ins 2006 SL No. 308 s 19

Queensland Ambulance Service
s 262 amd 2000 SL No. 333 s 91; 2007 SL No. 333 s 12

St John Ambulance Australia—Queensland
s 262A ins 2008 SL No. 421 s 5

Registered nurses
s 263 sub 1997 SL No. 64 s 50
amd 1997 SL No. 323 s 11; 1999 SL No. 8 s 9; 2001 SL No. 205 s 35; 2004 SL No. 291 s 26; 2005 SL No. 314 s 25; 2008 SL No. 422 s 28; 2010 SL No. 108 s 51

Certain registered nurses at rural hospitals
prov hdg amd 2001 SL No. 205 s 36
s 263A ins 1997 SL No. 64 s 50
amd 2004 SL No. 291 s 27; 2008 SL No. 422 s 29

Ship's master
s 264A ins 2003 SL No. 348 s 46

State analysts
s 265 amd 1998 SL No. 149 s 52; 2011 SL No. 4 s 90

Trainees in certain occupations
s 265AA ins 2003 SL No. 348 s 47

Universities
s 265A ins 2000 SL No. 333 s 92
amd 2003 SL No. 255 s 20

Veterinary nurses
s 265B ins 2000 SL No. 333 s 92
amd 2003 SL No. 348 s 48

Watch house keepers etc.
s 267 amd 2003 SL No. 255 s 21

Wholesale representatives
s 267A ins 2000 SL No. 333 s 93
amd 2003 SL No. 255 s 22; 2011 SL No. 4 s 91

Other authorities for an S2 or S3 poison may be given
s 269 amd 1997 SL No. 64 s 51; 1998 SL No. 343 s 12
om 2000 SL No. 333 s 94

When endorsement is not needed
prov hdg amd 2000 SL No. 333 s 95(1)
s 270 amd 1998 SL No. 149 s 53; 2000 SL No. 333 s 95(2); 2003 SL No. 348 s 49; 2011 SL No. 4 s 92

Approval must not be granted for therapeutic use of S9 poisons
s 270A ins 2003 SL No. 348 s 50

Prohibition on dispensing etc. regulated poisons
s 271 amd 1997 SL No. 64 s 52; 1998 SL No. 149 s 54; 2000 SL No. 333 s 96; 2002 SL No. 248 s 5; 2003 SL No. 348 s 51; 2004 SL No. 34 s 25; 2008 Act No. 53 s 16; 2011 SL No. 4 s 93

Fluoroacetic acid in baits
s 272 amd 2000 SL No. 333 s 97; 2003 SL No. 255 s 23; 2004 SL No. 34 s 26

Prohibition on possession etc. of certain poisons
s 273 om 2011 SL No. 4 s 94

Quality standard for selling S2 or S3 poisons
s 273A ins 2006 SL No. 91 s 12

Dispensing or selling S2, S3 or S7 poisons
prov hdg amd 2000 SL No. 333 s 99(1)
s 274 amd 1998 SL No. 149 s 56; 2000 SL No. 333 s 99(2); 2003 SL No. 348 s 53

Dispensing generic poisons
s 275 amd 1997 SL No. 64 s 53; 2011 SL No. 4 s 95

Sale of S2 or S3 poison after expiry date
s 276A ins 2011 SL No. 4 s 96

Sale of S3 poisons
s 277 amd 1998 SL No. 149 s 57; 2000 SL No. 333 s 100; 2002 SL No. 361 s 6; 2005 SL No. 314 s 26; 2007 SL No. 143 s 14; 2009 SL No. 293 s 4

Storage of poisons
s 284 amd 1998 SL No. 343 s 12

Record of sale of S7 poison
prov hdg sub 2002 SL No. 361 s 7
s 285 amd 1997 SL No. 64 s 54; 1998 SL No. 149 s 60

Record of sale of S3 pseudoephedrine
s 285A ins 2002 SL No. 361 s 8
amd 2009 SL No. 293 s 5

Certain losses etc. immediately reported to chief executive
s 285B ins 2011 SL No. 4 s 97

Prohibition on dispensing or supplying poisons to child under 16
s 286 amd 1999 SL No. 258 s 23; 2000 SL No. 333 s 105; 2001 SL No. 205 s 38; 2004 SL No. 291 s 28; 2005 SL No. 314 s 27; 2007 SL No. 333 s 13; 2011 SL No. 4 s 98

Unsafe disposal of poisons
s 290 amd 1998 SL No. 343 s 12; 1999 Act No. 51 s 228 sch; 2000 SL No. 333 s 106; 2005 SL No. 40 s 22; 2006 SL No. 308 s 20

Advertising of poisons
s 292 amd 1998 SL No. 149 s 61; 2000 SL No. 333 s 107; 2002 SL No. 248 s 6; 2003 SL No. 348 s 58; 2008 SL No. 57 s 6

Automatic machines—Act, s 106
s 292A ins 2004 SL No. 34 s 27

Colouring of grain baits
s 297 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 36; 2011 SL No. 4 s 99

Vaporisers and other devices
s 298 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 36; 2011 SL No. 4 s 100

CHAPTER 5—MISCELLANEOUS
PART 1—GENERAL
pt hdg prev pt 1 hdg om 2001 SL No. 205 s 39
pres pt 1 hdg (prev pt 2 hdg) renum 2001 SL No. 205 s 40

Inspector not required to deliver portion of drug or poison seized
s 303 amd 1997 SL No. 383 s 3; 1999 SL No. 326 s 5; 2000 SL No. 333 s 108; 2001 SL No. 275 s 3
om 2001 SL No. 205 s 39 (amdt could not be given effect)
exp 30 June 2002 (see s 303(4))

General powers after entering places
s 303A ins 1997 SL No. 64 s 55
amd 1997 SL No. 383 s 4; 1999 SL No. 326 s 6; 2000 SL No. 333 s 109; 2001 SL No. 275 s 4
om 2001 SL No. 205 s 39 (amdt could not be given effect)
exp 30 June 2002 (see s 303A(6))

Inspector may serve notice to comply
s 304 om 2001 SL No. 205 s 39

False or misleading information
s 306 amd 2000 SL No. 333 s 110
om 2001 SL No. 205 s 39

False, misleading or incomplete documents
s 307 om 2001 SL No. 205 s 39

PART 1A—OPTOMETRISTS DRUG AUTHORITY COMMITTEE
pt hdg ins 2005 SL No. 160 s 3
om 2009 SL No. 293 s 6

Division 1—Establishment and function
div 1 (ss 308A–308B) ins 2005 SL No. 160 s 3
om 2009 SL No. 293 s 6

Division 2—Membership
div 2 (ss 308C–308J) ins 2005 SL No. 160 s 3
om 2009 SL No. 293 s 6

Division 3—Drug authority committee business
div 3 (ss 308K–308N) ins 2005 SL No. 160 s 3
om 2009 SL No. 293 s 6

PART 2—TRANSITIONAL PROVISIONS
pt hdg orig pt hdg exp 1 January 1997 (see s 315)
prev pt hdg ins 1998 SL No. 149 s 62
exp 18 June 1998 (see prev s 310)
pres pt 2 hdg (prev pt 3 hdg) ins 2000 SL No. 333 s 111
renum 2001 SL No. 205 s 40

Division 1—Transitional provisions for Health (Drugs and Poisons) Amendment Regulation (No. 1) 2000
div hdg ins 2003 SL No. 255 s 24

Definition for div 1
prov hdg amd 2003 SL No. 255 s 25(1)
s 309 orig s 309 exp 1 January 1997 (see s 315)
prev s 309 ins 1998 SL No. 149 s 62
exp 18 June 1998 (see prev s 310)
pres s 309 ins 2000 SL No. 333 s 111
amd 2003 SL No. 255 s 25(2)–(3)

Certain authorities continue
s 310 orig s 310 exp 1 January 1997 (see s 315)
AIA s 20A applies (see orig s 310(2))
prev s 310 ins 1998 SL No. 149 s 62
exp 18 June 1998 (see prev s 310)
pres s 310 ins 2000 SL No. 333 s 111

How certain applications are to be considered
s 311 prev s 311 exp 1 January 1997 (see s 315)
pres s 311 ins 2000 SL No. 333 s 111

Division 2—Transitional provision for Health (Drugs and Poisons) Amendment Regulation (No. 2) 2003
div hdg ins 2003 SL No. 255 s 26

Certain persons may operate a controlled drugs administration facility without an approval
s 312 prev s 312 exp 1 January 1997 (see s 315)
pres s 312 ins 2003 SL No. 255 s 26

Division 3—Transitional provision for Health (Drugs and Poisons) Amendment Regulation (No. 2) 2005

div hdg ins 2005 SL No. 160 s 4

Continuation of former ocular therapeutics protocol

s 313 prev s 313 exp 1 January 1997 (see s 315)
AIA s 20A applies (see s 313(2))
pres s 313 ins 2005 SL No. 160 s 4

Division 4—Transitional provisions for Health (Drugs and Poisons) Amendment Regulation (No. 1) 2009

div hdg ins 2009 SL No. 293 s 7

Definitions for div 4

s 314 prev s 314 exp 1 January 1997 (see s 315)
pres s 314 ins 2009 SL No. 293 s 7

Dissolution of committee

s 315 prev s 315 exp 1 January 1997 (see s 315)
pres s 315 ins 2009 SL No. 293 s 7

APPENDIX 1—PROVISIONS NOT APPLYING TO MORPHINE OR OPIUM IN COMPOUNDED PREPARATIONS

amd 2004 SL No. 34 s 28; 2007 SL No. 18 s 29

APPENDIX 2—APPLICATION FEES FOR LICENCES

hdg sub 2000 SL No. 333 s 112(1)

appendix 2 amd 2000 SL No. 333 s 112(2)
sub 2002 SL No. 20 s 5; 2002 SL No. 156 s 8; 2003 SL No. 130 s 6; 2004 SL No. 154 s 6; 2005 SL No. 170 s 6; 2006 SL No. 190 s 6; 2007 SL No. 129 s 4; 2008 SL No. 185 s 6
amd 2009 SL No. 154 s 4
sub 2010 SL No. 194 s 4

APPENDIX 2A—DRUGS AN AMBULANCE OFFICER MAY OBTAIN, POSSESS AND ADMINISTER

ins 1997 SL No. 64 s 56
amd 1998 SL No. 149 s 63
sub 2000 SL No. 333 s 113
amd 2004 SL No. 291 s 29; 2006 SL No. 295 s 3; 2007 SL No. 18 s 30; 2007 SL No. 57 s 12; 2007 SL No. 333 s 14; 2008 SL No. 57 s 7; 2008 SL No. 421 s 6

APPENDIX 2B—RESTRICTED DRUGS AND POISONS FOR SURGICAL PODIATRISTS

ins 2006 SL No. 308 s 21

APPENDIX 3—WHO MUST SIGN CERTAIN PURCHASE ORDERS FOR CONTROLLED OR RESTRICTED DRUGS

hdg sub 2000 SL No. 333 s 114(1)

appendix 3 amd 1998 SL No. 149 s 64; 2000 SL No. 333 s 114(2)–(12); 2001 SL No. 205 s 41; 2003 SL No. 348 s 59; 2008 SL No. 421 s 7; 2011 SL No. 4 s 101

APPENDIX 4—COMPUTER-GENERATED PAPER PRESCRIPTIONS
hdg amd 2007 SL No. 18 s 31(1)
appendix 4 amd 2003 SL No. 348 s 60(1)

Prescription form must be preprinted
s 1 amd 2007 SL No. 18 s 31(2)

Only prescriber may generate prescription
s 2 amd 2007 SL No. 18 s 31(2); 2011 SL No. 4 s 102(1)–(2)

Changes not to be made
s 3 om 1998 SL No. 149 s 65

Requirements on generation of prescription
s 4 amd 2003 SL No. 348 s 60(2)–(3); 2007 SL No. 18 s 31(3); 2011 SL No. 4 s 102(3)

System messages
s 5 amd 2003 SL No. 348 s 60(4)–(5); 2007 SL No. 333 s 15(1)

Particulars in a paper prescription that a computer may generate
prov hdg amd 2007 SL No. 18 s 31(4)
s 6 amd 2003 SL No. 348 s 60(6); 2007 SL No. 18 s 31(2)

Particulars in a paper prescription that a computer may generate
prov hdg amd 2007 SL No. 18 s 31(4)
s 7 amd 2007 SL No. 18 s 31(2); 2007 SL No. 333 s 15(2)

APPENDIX 5—AREAS OF LOCAL GOVERNMENTS FORMING ISOLATED PRACTICE AREAS
sub 1997 SL No. 64 s 57; 2008 SL No. 57 s 8
amd 2008 SL No. 421 s 8; 2010 SL No. 13 s 11

APPENDIX 6—MINIMUM REQUIREMENTS FOR CONTROLLED DRUG RECEPTACLES
Definition for pt 1
s 1AA ins 2003 SL No. 348 s 61(1)

Certain provisions not applicable to alarm cabinets
s 1AB ins 2003 SL No. 348 s 61(1)

Lock requirements
s 3 amd 1997 SL No. 64 s 58

Mounting requirements
s 5 amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 115(1)

Type 1 mounting
s 6 amd 1998 SL No. 149 s 66; 2003 SL No. 348 s 61(2)

Type 2 mounting
s 7 amd 1998 SL No. 149 s 66; 2003 SL No. 348 s 61(2)

Type 3 mounting
s 8 amd 1998 SL No. 149 s 66; 2003 SL No. 348 s 61(3)

Type 4 mounting
s 9 amd 1998 SL No. 149 s 66

Certain safes taken to be a secure place
s 12 amd 2000 SL No. 333 s 115(2)

Body of safe
s 13 amd 1998 SL No. 149 s 66; 2003 SL No. 348 s 61(2)

Anchoring
s 16 amd 1998 SL No. 149 s 66; 2003 SL No. 348 s 61(2)

APPENDIX 6A—POISONS
ins 2001 SL No. 205 s 42
amd 2002 SL No. 248 s 7
om 2003 SL No. 348 s 62

APPENDIX 7—REGULATED POISONS
amd 1997 SL No. 64 s 59; 1998 SL No. 149 s 67; 1998 SL No. 343 s 12; 2000 SL No. 333 s 36; 2002 SL No. 248 s 8; 2003 SL No. 348 s 63; 2004 SL No. 291 s 30; 2005 SL No. 40 s 23; 2011 SL No. 4 s 103

APPENDIX 7A—RESTRICTED DRUGS
ins 2001 SL No. 205 s 43
om 2003 SL No. 348 s 64

APPENDIX 8—RESTRICTED DRUGS OF DEPENDENCY
amd 1998 SL No. 149 s 68; 2000 SL No. 333 s 116; 2005 SL No. 314 s 28; 2011 SL No. 4 s 104

APPENDIX 8A—RURAL HOSPITALS
ins 1997 SL No. 64 s 60
amd 1998 SL No. 149 s 69; 2005 SL No. 142 s 5, 2006 SL No. 91 s 13

APPENDIX 9—DICTIONARY
def **"acceptable form of identification"** ins 2009 SL No. 293 s 8(2)
amd 2011 SL No. 4 s 105(3)–(4)
def **"administer"** amd 2003 SL No. 255 s 27(3); 2011 SL No. 4 s 105(5)
def **"ambulance officer"** amd 2002 SL No. 248 s 9
def **"appointed member"** ins 2005 SL No. 160 s 5(1)
om 2009 SL No. 293 s 8(1)
def **"approval"** amd 1998 SL No. 343 s 12
sub 2000 SL No. 333 s 117(1)–(2); 2003 SL No. 255 s 27(1)–(2)
def **"approved"** amd 1998 SL No. 343 s 12
om 2000 SL No. 333 s 117(1)
def **"approved electronic form"** ins 2003 SL No. 348 s 65(2)
def **"authorised person"** sub 2000 SL No. 333 s 117(1)–(2)
def **"authority"** sub 2000 SL No. 333 s 117(1)–(2)
def **"business premises"** amd 2000 SL No. 333 s 117(3)
def **"cabinet"** ins 2003 SL No. 348 s 65(2)
def **"carer"** om 2003 SL No. 348 s 65(1)
ins 2004 SL No. 34 s 29(2)

def **"certification"** ins 2000 SL No. 333 s 117(2)
om 2011 SL No. 4 s 105(1)
def **"certified"** ins 2011 SL No. 4 s 105(2)
def **"child care service"** ins 2004 SL No. 34 s 29(2)
def **"clinical pharmacologist"** ins 2005 SL No. 160 s 5(1)
om 2010 SL No. 108 s 52(1)
def **"controlled drugs administration facility"** ins 2003 SL No. 255 s 27(2)
def **"controlled drugs book"** om 2004 SL No. 34 s 29(1)
def **"controlled drugs record"** ins 2004 SL No. 34 s 29(2)
def **"cyanide permit"** ins 2003 SL No. 348 s 65(2)
def **"declared public health emergency"** ins 2005 SL No. 314 s 29(1)
def **"dental hygienist"** ins 2004 SL No. 27 s 3(2) sch
sub 2010 SL No. 108 s 52
def **"dental therapist"** ins 2004 SL No. 27 s 3(2) sch
sub 2010 SL No. 108 s 52
def **"dentist"** ins 2001 SL No. 264 s 17 sch 5
amd 2004 SL No. 27 s 3(2) sch
sub 2010 SL No. 108 s 52
def **"detention centre"** amd 2009 Act No. 34 s 45(1) sch pt 1 amdt 19
def **"dispensary"** amd 2002 SL No. 248 s 9
def **"dispensed medicine"** amd 2005 SL No. 40 s 24(2); 2011 SL No. 4 s 105(6)
def **"drug authority committee"** ins 2005 SL No. 160 s 5(1)
om 2009 SL No. 293 s 8(1)
def **"drug therapy protocol"** amd 1998 SL No. 343 s 12; 2000 SL No. 333 s 117(4); 2011 SL No. 4 s 105(7)
def **"ECP area"** ins 2000 SL No. 333 s 117(2)
amd 2001 SL No. 205 s 44(3)
def **"electronically sign"** ins 2007 SL No. 18 s 32
def **"electronic communication"** ins 2003 SL No. 348 s 65(2)
def **"electronic means"** ins 2003 SL No. 348 s 65(2)
def **"electronic prescription"** ins 2007 SL No. 18 s 32
def **"endorsed"** om 2000 SL No. 333 s 117(1)
def **"endorsement"** ins 2000 SL No. 333 s 117(2)
amd 2001 SL No. 205 s 44(4); 2011 SL No. 4 s 105(8)
def **"enrolled nurse"** ins 2004 SL No. 291 s 31(2)
sub 2010 SL No. 108 s 52
def **"hospital"** ins 2001 SL No. 205 s 44(2)
def **"hospital pharmaceutical assistant"** ins 2001 SL No. 205 s 44(2)
amd 2003 Act No. 63 s 60 sch
def **"immunisation program"** amd 2000 SL No. 333 s 117(5); 2011 SL No. 4 s 105(9)
def **"immunisation program nurse"** ins 2010 SL No. 108 s 52(2)
def **"indigenous health worker"** ins 1999 SL No. 8 s 10(1)
amd 2000 SL No. 333 s 117(6); 2001 SL No. 205 s 44(5)
def **"inspector"** amd 2001 SL No. 205 s 44(6)
def **"isolated practice area"** amd 1997 SL No. 64 s 61(2); 1999 SL No. 8 s 10(2)

def **"isolated practice area paramedic"** ins 2007 SL No. 333 s 16(2)
def **"isolated practice area (paramedics)"** ins 2007 SL No. 333 s 16(2)
def **"isolated practice endorsed"** sub 1997 SL No. 64 s 61(1), (3)
om 2001 SL No. 205 s 44(1)
def **"issue"** ins 1997 SL No. 64 s 61(3)
amd 2000 SL No. 333 s 117(7)
def **"licensee"** amd 1998 SL No. 149 s 70(3); 2001 SL No. 205 s 44(7)
def **"licensee of a child care service"** ins 2004 SL No. 34 s 29(2)
def **"master"** amd 2002 SL No. 248 s 9
def **"midwife"** amd 2002 SL No. 248 s 9
sub 2004 SL No. 291 s 31(1)–(2); 2010 SL No. 108 s 52
def **"National Drugs and Poisons Schedule Committee"** ins 2000 SL No. 333 s 117(2)
om 2011 SL No. 4 s 105(1)
def **"nurse"** ins 2004 SL No. 291 s 31(2)
def **"nurse practitioner"** ins 2004 SL No. 291 s 31(2)
sub 2010 SL No. 108 s 52
def **"nursing home"** sub 2007 SL No. 333 s 16
def **"ocular therapeutics protocol"** ins 2005 SL No. 40 s 24(1)
amd 2005 SL No. 160 s 5(2)
sub 2009 SL No. 293 s 8
amd 2011 SL No. 4 s 105(10)
def **"operating approval"** ins 2003 SL No. 255 s 27(2)
def **"optometrist"** sub 2001 SL No. 266 s 10 sch 3; 2010 SL No. 108 s 52; 2010 SL No. 108 s 52
def **"oral health therapist"** ins 2010 SL No. 108 s 52(2)
def **"orthoptist"** ins 2011 SL No. 4 s 105(2)
def **"owner"** amd 2002 SL No. 248 s 9
def **"paper prescription"** ins 2007 SL No. 18 s 32
def **"paramedic 1"** ins 2000 SL No. 333 s 117(2)
def **"paramedic 2"** ins 2000 SL No. 333 s 117(2)
def **"paramedic 3"** ins 2000 SL No. 333 s 117(2)
amd 2011 SL No. 4 s 105(11)
def **"paramedic 3 (ECP)"** ins 2000 SL No. 333 s 117(2)
amd 2011 SL No. 4 s 105(11)
def **"paramedic 4"** ins 2000 SL No. 333 s 117(2)
amd 2011 SL No. 4 s 105(11)
def **"personal supervision"** ins 2011 SL No. 4 s 105(2)
def **"pharmaceutical imprest duties"** ins 2001 SL No. 205 s 44(2)
def **"pharmacist"** sub 2001 SL No. 267 s 14 sch 4
om 2010 SL No. 108 s 52(1)
def **"pharmacy"** sub 2001 SL No. 267 s 14 sch 4
om 2004 SL No. 291 s 31(1)
def **"physician's assistant"** ins 2008 SL No. 422 s 30
def **"podiatrist"** sub 2002 SL No. 80 s 10 sch 3; 2010 SL No. 108 s 52
def **"poison"** sub 2000 SL No. 333 s 117(1)–(2); 2001 SL No. 205 s 44(1)–(2); 2003 SL No. 348 s 65
def **"practice plan"** ins 2008 SL No. 422 s 30

def **"prescribe"** amd 2000 SL No. 333 s 117(8)
def **"prescriber"** amd 2000 SL No. 333 s 117(9)
def **"prescription"** amd 1998 SL No. 149 s 70(4); 2000 SL No. 333 s 117(10)
def **"prison"** amd 2002 SL No. 248 s 9; 2003 SL No. 29 s 4
sub 2007 SL No. 333 s 16
def **"private practice endorsed midwife"** om 1997 SL No. 323 s 12
def **"public sector hospital"** ins 1997 SL No. 64 s 61(3)
def **"purchase order"** amd 2000 SL No. 333 s 117(11)
def **"QCAT information notice"** ins 2009 Act No. 24 s 1030
def **"quality standard"** ins 2006 SL No. 91 s 14
def **"registered nurse"** amd 2002 SL No. 248 s 9
sub 2004 SL No. 291 s 31(1)–(2); 2010 SL No. 108 s 52
def **"registered training organisation"** ins 2001 SL No. 205 s 44(2)
amd 2002 SL No. 248 s 9
sub 2003 Act No. 63 s 60 sch
def **"regulated controlled drug"** ins 2001 SL No. 205 s 44(2)
def **"regulated drug"** om 2001 SL No. 205 s 44(1)
def **"regulated restricted drug"** ins 2001 SL No. 205 s 44(2)
def **"relevant condition"** ins 2006 SL No. 308 s 22(1)
def **"restricted drug"** sub 2001 SL No. 205 s 44(1)–(2); 2003 SL No. 348 s 65; 2011 SL No. 4 s 105(1)–(2)
def **"rural and isolated practice endorsed nurse"** ins 2001 SL No. 205 s 44(2)
amd 2004 SL No. 291 s 31(3)
sub 2010 SL No. 108 s 52
def **"rural hospital"** ins 1997 SL No. 64 s 61(3)
amd 1998 SL No. 149 s 70(5)
def **"section 122 approval"** ins 1998 SL No. 149 s 70(2)
amd 1998 SL No. 343 s 12
om 2000 SL No. 333 s 117(1)
def **"sell"** om 2000 SL No. 333 s 117(1)
def **"sexual health program"** amd 2000 SL No. 333 s 117(12)
def **"sexual health program nurse"** ins 2010 SL No. 108 s 52(2)
def **"specialist"** sub 2002 SL No. 31 s 16 sch 4
om 2010 SL No. 108 s 52(1)
def **"specialist health practitioner"** ins 2010 SL No. 108 s 52(2)
def **"specialist physician"** ins 2010 SL No. 108 s 52(2)
def **"specified health service district"** ins 2001 SL No. 205 s 44(2)
def **"standard"** amd 1999 SL No. 258 s 24
sub 2010 SL No. 108 s 52
amd 2011 SL No. 4 s 105(12)
def **"State analyst"** amd 2001 SL No. 205 s 44(8)
def **"statement of attainment"** ins 2001 SL No. 205 s 44(2)
amd 2002 SL No. 248 s 9; 2003 Act No. 63 s 60 sch
def **"strychnine permit"** ins 2003 SL No. 348 s 65(2)
def **"supervising medical officer"** ins 2008 SL No. 422 s 30
sub 2010 SL No. 108 s 52
def **"supervision"** ins 2011 SL No. 4 s 105(2)

def **"supply"** sub 2003 SL No. 255 s 27(1)–(2)
def **"surgical podiatrist"** ins 2006 SL No. 308 s 22(1)
sub 2010 SL No. 108 s 52
def **"trainee pharmacist"** ins 2003 SL No. 348 s 65(2)
sub 2010 SL No. 108 s 52
def **"trainee State analyst"** ins 2011 SL No. 4 s 105(2)
def **"treatment approval"** ins 2000 SL No. 333 s 117(2)
amd 2001 SL No. 205 s 44(9)–(10); 2003 SL No. 255 s 27(4)
def **"university"** om 1998 SL No. 149 s 70(1)
def **"Veterans Entitlements Act"** amd 2001 SL No. 205 s 44(11); 2004 SL No. 154 s 7
def **"wholesale representative"** sub 2000 SL No. 333 s 117(1)–(2)
def **"written instruction"** sub 2003 SL No. 348 s 65
amd 2005 SL No. 314 s 29(2)–(3); 2006 SL No. 308 s 22(2)