

Pharmacist Education, Licensing, and Practice

Licensing and education

Applicants for Minnesota pharmacy licenses must have graduated from a college or school of pharmacy accredited by the American Council of Pharmacy Education. ACPE accreditation requires a four-year professional program, leading to the Doctor of Pharmacy degree. While there are still many pharmacists who graduated when Bachelor of Science degrees in pharmacy still existed, all U.S. pharmacy schools now offer only the Pharm.D. Foreign pharmacy graduates are still allowed to be licensed with bachelor degrees.

Current scope of practice

Minnesota law defines the practice of pharmacy to include (M.S. 151.01, Subd. 27):

- Interpretation and evaluation of prescription drug orders,
- Compounding, labeling and dispensing drugs and devices,
- Participation in:
 - clinical interpretations and monitoring of drug therapy,
 - drug and therapeutic device selection, drug administration for first dosage, and drug research,
 - administration of influenza vaccines (to patients 10 and older, and all other vaccines to patients 18 and older), under standing orders from a physician or by written protocol with a physician,
 - managing drug therapy and modifying drug therapy according to a written protocol between the pharmacist and a dentist, optometrist, physician, podiatrist or veterinarian, and
 - storage of drugs and the maintenance of records;
- Responsibility for participation in patient counseling on therapeutic values, content, hazards and use of drugs and devices, and
- Operating, managing and controlling a pharmacy.

Pharmacists have clear authority to compound, label and dispense drugs and to operate pharmacies. The use of the word “participation” implies that other aspects of pharmacy practice are shared with other health professions.

Prescribing

Licensed practitioners¹ may prescribe, administer and dispense legend drugs (M.S. Section 151.37, Subd. 2). A legend drug is a drug which federal law requires to be labeled: "Caution: Federal law prohibits dispensing without prescription" (M.S. 151.01, Subd. 17)

For purposes of compounding and dispensing (Section 151.15, Subd. 4), and prescribing legend drugs (Section 151.37, Subd. 2, paragraph. b), “practitioner” is defined to also include:

- Physician assistants who are authorized to prescribe, dispense or administer under Chapter 147A, and
- Advanced practice nurses authorized to prescribe, dispense or administer under Section 148.235.

¹ Licensed practitioners: physicians (M.D.s and D.O.s), dentists, optometrists, podiatrists, and veterinarians (151.01, Subd. 23).

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Licensed practitioners (physicians, dentists, optometrists, podiatrists and veterinarians) may direct (with supervision) a nurse, physician assistant, or medical student or resident to administer legend drugs to an individual patient. Licensed practitioners may also prescribe a legend drug, without reference to a specific patient, by directing a nurse (pursuant to M.S. 148.235, subd. 8 and 9), physician assistant or medical student or resident to adhere to a particular practice guideline or protocol when treating patients whose condition falls within such guideline or protocol. The protocol must specify the circumstances under which the drug is to be prescribed or administered (M.S. 151.37).

Drug therapy management

Pharmacists may participate in managing drug therapy and modifying drug therapy on a case-by-case basis under a written protocol with a dentist, optometrist, physician, podiatrist or veterinarian who is responsible for the patient's care. (The law is silent with regard a pharmacist's ability to work under a written protocol with an advanced nurse registered nurse or a physician assistant.) The pharmacist must report significant changes in drug therapy to the patient's medical record (M.S. 151.01, Subd. 27, paragraph 6).

Pharmacist discretion

Unless a prescription brand name is specified by the prescriber, a pharmacist may substitute a generically equivalent drug if, in the pharmacist's professional judgment, the substituted drug is therapeutically equivalent and interchangeable to the prescribed drug. With this noted exception, a pharmacist may not substitute an article different from the one ordered, or deviate in any manner from the requirements of an order or prescription without the approval of the prescriber (M.S. 151.21, Subd. 1).