Introduction

The Pharmacist Extended Practice Regulations establish pharmacists’ authority to directly administer drug therapy and the circumstances when pharmacists may administer drug therapy including by injection, and stipulate that they must do so in accordance with the Standards of Practice.

These Standards specify the practice requirements for pharmacy practitioners when undertaking drug administration activities in a community setting, including pharmacy and non-pharmacy settings.

The Pharmacy Act and its Regulations authorize a pharmacist to delegate the technical activity of administering a drug by injection to a pharmacy technician, intern, or registered student who holds an NSCP Drug Administration by Injection Technical Permit. These Standards set out the expectations for pharmacy practitioners when they are involved in administering a drug to a patient, including for a pharmacist who delegates the technical aspect of administration and for the pharmacy practitioner accepting that delegation from the pharmacist.

Terminology

The following terms and definitions serve as a reference for these Standards.

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anaphylaxis Kit</td>
<td>A kit containing the necessary supplies and protocols for the treatment of anaphylactic reactions.</td>
</tr>
<tr>
<td>Drug Administration by Injection Permit</td>
<td>A permit issued to a pharmacist upon meeting the requirements in these Standards that qualifies them to administer drugs by injection to patients.</td>
</tr>
<tr>
<td>Drug Administration by Injection Technical Permit</td>
<td>A permit issued to a pharmacy technician, intern, or registered student upon meeting the requirements as described in these Standards that qualifies them to accept a delegation to administer a drug by injection to a patient from a pharmacist who holds an NSCP Drug Administration by Injection Permit.</td>
</tr>
<tr>
<td>Patient</td>
<td>A patient or their agent.</td>
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<tr>
<td>Personal protective equipment (PPE)</td>
<td>Items worn to help prevent potential exposure to infectious disease.¹</td>
</tr>
<tr>
<td>Pharmacy Practitioner</td>
<td>A pharmacist, pharmacy technician, intern, or student registered with the Nova Scotia College of Pharmacists.</td>
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</tbody>
</table>

Standards of Practice

1. Authorized Activities

1.1. A pharmacy practitioner undertaking the administration of a drug to a patient will do so by injection, orally, sublingually, buccally, via inhalation or topically.

1.2. A pharmacy practitioner administering a drug to a patient will have current certification in First Aid and Cardiopulmonary Resuscitation (CPR). (Refer to Appendix A - First Aid and CPR Certification Requirements)

1.3. A pharmacy practitioner administering a drug by injection will do so only where:
   • the pharmacist has a valid NSCP Drug Administration by Injection Permit (Refer to Appendix C - NSCP Drug Administration by Injection Permit Requirements);
   • the pharmacy technician, registered student, or intern has a valid NSCP Drug Administration by Injection Technical Permit (Refer to Appendix D - NSCP Drug Administration by Injection Technical Permit Requirements);
   • the drug is administered by the intramuscular (IM) or subcutaneous route;
   • the drug is administered in accordance with Appendix B - Special Consideration When Providing Injections;
   • the patient is two years of age or older, or in the case of immunization for influenza or SARS-CoV-2, the patient is 6 months of age or older.

1.4. A pharmacy practitioner will not administer a drug or other substance used for cosmetic purposes (e.g., Botox®, Dysport®, etc.)

1.5. A pharmacist with a valid NSCP Drug Administration by Injection Permit may delegate the authority to administer drug therapy by injection to a pharmacy technician, intern, or registered student with a valid NSCP Drug Administration by injection Technical Permit (Refer to Appendix D - NSCP Drug Administration by Injection Technical Permit Requirements) where the pharmacist:
   • is present in the pharmacy or other place where the drug administration is taking place (e.g., offsite clinic); and
   • in consideration of the knowledge, skills, and experience of the pharmacy practitioner to whom the authority is delegated:
     – provides the necessary level of supervision for a pharmacy student, or
     – provides the necessary direction for a pharmacy intern or pharmacy technician.

1.6. A pharmacy technician, intern, or registered student with a valid NSCP Drug Administration by injection Technical Permit may accept the delegation and administer a drug by injection provided they:
   • are delegated to do so by a pharmacist with a valid NSCP Drug Administration by Injection Permit; and
   • are satisfied they are competent to administer the drug.
• are satisfied they have the level of supervision/direction necessary given their registration category and in consideration of their knowledge, skills, and experience.

2. Knowledge, Competencies and Professional Ethics

2.1. A pharmacy practitioner with a NSCP Drug Administration by Injection Permit or Technical Permit assumes responsibility for their decision to be involved in the administration of a drug and related subsequent actions that they take, including their decision not to administer a drug.

2.2. Prior to administering a drug to a patient, a pharmacy practitioner is satisfied that:

• they have the requisite competency to administer the drug in the given circumstance, including ensuring they have appropriate training to administer the drug;
• a pharmacist has determined the therapeutic appropriateness and timing of the administration; and
• consideration has been given to:
  — the appropriate site, route, and method of administration (including landmarking and injection technique);
  — the appropriate length and gauge of needle;
  — any special precautions required for the administration of the drug (e.g., hazardous drugs); and
  — any requirements as set out in Appendix B - Special Considerations When Providing Injections.

2.3. A pharmacy practitioner is prepared to treat emergencies or adverse events associated with administering drugs, including at a minimum:

• providing basic first aid
• use of adrenaline/epinephrine
• performing CPR
• managing vasovagal and anaphylactic reactions
• addressing needlestick injuries

2.4. A pharmacy practitioner is familiar with and adheres to the pharmacy’s established policies and procedures.

3. Patient Involvement

3.1. Prior to administering a drug to a patient, a pharmacist is satisfied that the patient has provided informed and voluntary consent (Refer to Standards of Practice: General Pharmacy Practice). Consent can be written, oral, or implied. However, if relying on implied consent, a pharmacy practitioner will be certain that the actions of the patient would be interpreted by others as having implied consent. Further, a pharmacy practitioner will not accept a signature on a consent form as a substitute for having a conversation with a patient such that it satisfies the requirements as described in Standard 3.2.
3.2. A pharmacist will be satisfied that the patient has been provided with enough information about the benefits, risks, and procedures involved in the administration of a drug to allow them to make an informed decision about providing consent.

Information provided to the patient to help inform their decision may include, where applicable:
- the purpose and benefits of the treatment
- the risks and possible adverse effects of the treatments, including serious adverse reactions
- what the treatment involves (e.g., the insertion of a needle into the deltoid muscle)
- requirements for post administration monitoring

3.3. A pharmacy manager ensures that a record of the drug administration is available to the patient.

4. Facilities and Equipment

4.1. A pharmacy practitioner ensures that drug administration that takes place in a community pharmacy occurs in a private consultation room that meets the requirements of the Pharmacy Practice Policy: Private Consultation Rooms (effective as of December 31, 2020), except in circumstances where this is not possible (e.g., pandemics, mass immunization initiatives, emergency situations).

4.2. When drug administration takes place outside of a community pharmacy setting, a pharmacy practitioner ensures that:
- the environment in which the administration takes place:
  - is clean, and in the case of drug administration by injection, allows for the use of appropriate aseptic technique and infection control procedures.
  - provides adequate patient privacy for the drug administration activity.
  - allows for the treatment of adverse reactions and emergencies.
- measures are in place to maintain the necessary cold chain, and the cold chain is maintained.

4.3. A pharmacy practitioner ensures the supplies necessary to administer medications and treat emergencies are readily available and include, but are not limited to:
- needles and syringes of varying sizes as necessary for the patient, site of injection and the characteristics of the drug
- personal protective equipment and other supplies as determined necessary to ensure proper infection control
- sharps containers
- an anaphylaxis kit consistent with the Public Health Agency of Canada (PHAC) Canadian Immunization Guide
- a first aid kit consistent with Occupational Health and Safety Regulations
- a mat or an examination table to allow a patient to lie down in the event of an adverse reaction or emergency
• an examination table if the practitioner is administering a drug that requires the patient to lie down for
the administration (e.g., a drug that is administered into sites other than the deltoid muscle, or for drugs
that have specific administration requirements such as Sublocade®)

5. Policies and Procedures

5.1. Pharmacy managers ensure that policies and procedures for activities associated with the administration of
drugs are established, implemented, and enforced. These will be maintained in a readily retrievable format,
and will address, at a minimum, the following topics:
  • routine drug administration processes and procedures, including:
    − the process for ensuring that clinical appropriateness for the administration has been completed by a
      pharmacist when the technical procedure is delegated, and
    − the process for delegating the technical administration to a Technical Permit holder.
  • post-administration observation in accordance with the established standard of care as determined by
    the Public Health Agency of Canada Canadian Immunization Guide and the Nova Scotia Immunization
    Manual
  • universal precautions and infection control, including hazardous waste management
  • treatment of adverse events, emergencies, and needle stick injuries
  • anaphylaxis kits
  • precautions for patients with latex allergies
  • reporting of adverse reactions (e.g., Adverse Events Following Immunization [AEFI] reporting)
  • management of the cold chain
  • documentation of drug administration and notification to other healthcare professionals

5.2. Pharmacy managers ensure that policies and procedures are reviewed and updated as necessary, at least
every three (3) years, upon a change in practice or Standards, or in the event of a quality related event (QRE).

5.3. Pharmacy managers ensures that a process for updating and reviewing policies and procedures is in place.

6. Follow-up and Monitoring

6.1. A pharmacist ensures a follow-up plan is in place as appropriate and documents the plan and any results as
part of the patient record.

6.2. When providing immunizations, a pharmacy practitioner monitors the post-administration response by
ensuring that post-immunization observation takes place in accordance with the established standard of
care as determined by the Public Health Agency of Canada Canadian Immunization Guide and the Nova Scotia
Immunization Manual.

The Public Health Agency of Canada has created resources for providers of immunizations during the COVID-19 pandemic. Please consult the following resources for additional information:
• Guidance for influenza vaccine delivery in the presence of COVID-19
• NACI Statement: Recommendations on the duration of the post-vaccination observation period for influenza vaccination during the COVID-19 pandemic
• Interim guidance on continuity of immunization programs during the COVID-19 pandemic
7. Notification and Documentation

7.1. A pharmacy practitioner ensures that the details of the drug administration are documented in the patient record, including:

- date of administration;
- drug administered;
- planned follow-up, as appropriate;
- the name of any pharmacy practitioner involved in the process;
- pharmacy information including name and contact information;
- information regarding adverse events, in particular, if an AEFI form has been completed; and
- In the case of an immunization, documentation required by the Nova Scotia Department of Health and Wellness as set out in the Nova Scotia Immunization Manual.

7.2. A pharmacy practitioner ensures the details of the drug administration are communicated to the patient’s primary health care provider or specialist at the earliest opportunity:

- in every instance for drugs administered by injection (for vaccines see the specific requirements in 7.3 below); and
- when appropriate in instances when a drug has been administered by a non-injectable route.

Note: A template notification form is included with these Standards and is available on the NSCP website. However, notifications can be created and communicated electronically using pharmacy software or other means provided the above data elements are included.

7.3. Each time a pharmacy practitioner administers a vaccine to a patient, the pharmacy practitioner will communicate the record of the injection to the patient’s primary healthcare provider by ensuring that the details of the immunization are submitted to the provincial centralized immunization record (PANORAMA) using the following processes established by the Nova Scotia Department of Health and Wellness:

- For all vaccines other than those against SARS-CoV-2, the details of the immunization are submitted into the Immunization Module in the Nova Scotia Drug Information System (NS DIS).
- For vaccines against SARS-CoV-2, the details of the immunization are submitted into CANImmunize Clinic Flow.

7.4. If a patient does not have a primary care provider or specialist, a pharmacy practitioner informs the patient that they will subsequently forward the drug administration information to a primary care provider or specialist, upon the patient’s direction.

7.5. As required by the Nova Scotia Department of Health and Wellness, a pharmacy practitioner ensures that a reciprocal notification form is completed and submitted to the local Public Health office for vaccines that are both supplied and funded by Public Health (except for the influenza vaccine and vaccines against SARS-CoV-2 which do not require a reciprocal notification form).
7.6. As required by the Nova Scotia Department of Health and Wellness, a pharmacy practitioner ensures that adverse events that occur following vaccine administration are reported to the local Public Health office (the Nova Scotia Immunization Manual includes AEFI Guidelines).
Appendix A – First Aid and CPR Certification Requirements

The Standards require that pharmacy practitioners who undertake drug administration activities maintain current certification in First Aid and Cardiopulmonary Resuscitation (CPR). As such, current certification in First Aid and CPR is required for a pharmacy practitioner to obtain an NSCP Drug Administration by Injection Permit or Technical Permit.

The specific requirements for First Aid and CPR certification, and the approved organizations through which these certifications must be obtained, are outlined below.

First Aid

- Certification in Emergency First Aid (minimum)

Cardiopulmonary Resuscitation (CPR) Certification

- CPR certification (minimum CPR Level C or equivalent)

Organizations:

- Canadian Red Cross
- St. John Ambulance Canada
- Lifesaving Society
- Canadian Ski Patrol
- Heart and Stroke Foundation
Appendix B – Special Considerations When Providing Injections

Intramuscular Administration into Sites Other than the Deltoid Muscle

Most pharmacy practitioners have received formal training for IM injections limited to the deltoid muscle.

Prior to administering IM injections into sites other than the deltoid (e.g., thigh, hip, or buttocks), pharmacy practitioners must have received additional appropriate training, be satisfied they have the competency to administer the medication and have demonstrated their competency to do so. For clarity, appropriate training includes an opportunity for the pharmacy practitioner to have landmarked and administered the medication into the site under the guidance of an individual who assesses and confirms their competency.

Subcutaneous Administration into Sites Other than the Arm

Most pharmacy practitioners have received formal training for subcutaneous injections limited to the back of the arm.

Prior to administering subcutaneous injections into sites other than the arm, (e.g., abdomen, leg), pharmacy practitioners must be satisfied that they have the training and competence necessary to administer into the site.

Drug Administration by Injection in Young Children

Prior to administering injections in young children, pharmacy practitioners must be educated and knowledgeable about the factors specific to the administration of injections in this patient population. For clarity, education should include, but is not limited to, attaining the skills and knowledge to be able to:

- identify the most appropriate site for injection;
- counsel on, and provide, appropriate pain management strategies;
- use, and advise caregivers on, effective distraction techniques;
- advise and guide caregivers on appropriate bundling and positioning;
- manage anxiety, including caregiver anxiety;
- identify and manage anaphylaxis in young children, and
- advise caregivers on the identification of anaphylaxis.

Further, if administering injections into a site other than the deltoid, pharmacy practitioners must have undertaken appropriate training as described above in “Intramuscular Administration into Sites Other than the Deltoid Muscle”.

Other Considerations

Pharmacies that provide drug administration into sites that require the patient to lie down must have a private consultation room equipped with a suitable table to accommodate the patient and that can be properly disinfected.

(Note: the requirements above are not applicable for the administration of emergency medications such as epinephrine and naloxone)
Administration of Long-Acting Antipsychotics (LAIs)

Patients receiving LAIs can have complex health care needs and are often followed closely by a specialized care team, including doctors, nurses, social workers, and others in order to meet these complex needs. The ongoing relationship between the patient and their healthcare team is important for ensuring the long-term effectiveness and safety of LAI antipsychotic treatment and requires effective and timely communications among healthcare providers to ensure consistent, high quality care.

Given these complex health care needs, and to ensure that pharmacy practitioners administering LAIs complement the quality of care provided to patients, pharmacy practitioners may administer LAI medications in circumstances where:

- the patient’s mental health care team has contacted the pharmacy practitioner to request that they administer the medication and has provided patient specific administration details;
- the pharmacy practitioner has the training and facilities necessary to administer the medication in the recommended site and can accommodate the request;
- a process has been established between the patient’s mental health care team and the pharmacy practitioner that allows for the timely exchange of information related to the patient’s mental health, treatment response, adverse effects, and other issues related to the patient’s health;
- the pharmacy practitioner communicates any pertinent observations, including if a patient does not receive a dose, to the patient’s mental health care team; and
- the pharmacy practitioner is satisfied that regular contact is maintained between the patient and their mental health care team for ongoing assessments of mental health care needs.
Appendix C – NSCP Drug Administration by Injection Permit

Requirements

The Standards of Practice require that pharmacists administering drugs by injection have a valid NSCP Drug Administration by Injection Permit. The permit must be renewed at the end of each calendar year, regardless of when it was issued.

To obtain an initial NSCP Drug Administration by Injection Permit, the following requirements must be met:

- Completion of a pharmacist immunization and injection education training program that has obtained CCCEP Competency Mapped Accreditation or is specifically approved by Council, or completion of another program recognized by another Canadian provincial pharmacy regulatory authority (PRA) as meeting that PRA’s education and training requirements for authorization of pharmacists to administer drugs by injection.
- Current certification in First Aid and CPR as set out in Appendix A - First Aid and CPR Certification Requirements.
- For pharmacists with no previous NSCP Drug Administration by Injection Technical Permit or Permit, application for a permit within one (1) year of completion of the education program.
- For pharmacists with current authorization to administer drugs by injection from another PRA, submission of a declaration that they have administered a sufficient number of injections in the past two (2) years to maintain their competence.
- Pharmacists with lapsed authorization to administer drugs by injection in another PRA must meet the requirements for Lapsed Permits below.
- Submission of a completed application and fee.

To annually renew a Permit, a pharmacist must:

- have current certification in First Aid and CPR as set out in Appendix A - First Aid and CPR Certification Requirements.
- declare that they have administered a sufficient number of injections in the past two (2) years to maintain their competence. (If this declaration cannot be made, a refresher course is necessary for permit renewal)
- submit a completed online application and fee.

Lapsed Permits

To renew a Permit that has lapsed, a pharmacist must:

- declare that they have administered a sufficient number of injections in the past two (2) years to maintain their competence (including through the authority granted in another province or health authority in Nova Scotia), OR
- complete a refresher version of a pharmacist immunization and injection education training program that has obtained CCCEP Competency Mapped Accreditation, is specifically approved by Council, or one that is recognized by another Canadian provincial pharmacy regulatory authority (PRA) as meeting that PRA’s education and training requirements for a refresher program, AND
- have current certification in First Aid and CPR as set out in *Appendix A - First Aid and CPR Certification Requirements*, AND
- submit a completed application and fee.

### NSCP Drug Administration by Injection *Permit* Requirements

<table>
<thead>
<tr>
<th>Permit Requirements</th>
<th>Initial NSCP Permit</th>
<th>Annual Online Permit Renewal</th>
<th>Renewal of Lapsed Permit (a or b)</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>No previous authorization/permit to inject</td>
<td>Current authorization/permit in another Canadian jurisdiction</td>
<td>Current Drug Admin Technical Permit-First application for Permit</td>
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<td>Immunization and injection education and training program: CCEP accredited, approved by Council, or recognized by another PRA</td>
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<tr>
<td>Current First Aid and Cardiopulmonary Resuscitation (CPR) certification (See Appendix A)</td>
<td>✓</td>
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<tr>
<td>Refresher version of an immunization and injection education and training program as described above</td>
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<tr>
<td>Self-declaration of continued competence to administer drugs by injection</td>
<td>✓</td>
<td>✓</td>
<td>✓³</td>
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<tr>
<td>Completed application and submitted fee</td>
<td>✓</td>
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Appendix D – NSCP Drug Administration by Injection Technical Permit Requirements

The Standards of Practice require that pharmacy practitioners who are pharmacy technicians, interns, or registered students have a valid NSCP Drug Administration by Injection Technical Permit. The Technical Permit must be renewed at the end of each calendar year, regardless of when it was issued.

To obtain an initial NSCP Drug Administration by Injection Technical Permit, the following requirements must be met:

- For pharmacy students and interns, completion of a pharmacist immunization and injection education training program that has obtained CCCEP Competency Mapped Accreditation or is specifically approved by Council, or completion of another program recognized by another Canadian provincial pharmacy regulatory authority (PRA) as meeting that PRA’s education and training requirements and credentials for pharmacists to administer drugs by injection.
- For pharmacy technicians, completion of a pharmacy technician injection education training program that has obtained CCCEP Competency Mapped Accreditation or is specifically approved by Council, or completion of another program recognized by another Canadian provincial pharmacy regulatory authority (PRA) as meeting that PRA’s education and training requirements and credentials for pharmacy technicians to administer drugs by injection.
- Current certification in First Aid and CPR as set out in Appendix A - First Aid and CPR Certification Requirements.
- For pharmacy practitioners with no previous NSCP Drug Administration by Injection Technical Permit, application for a Technical Permit within one (1) year of completion of the education program.
- For pharmacy practitioners with current credentials to administer drugs by injection from another PRA, declaration that they have administered a sufficient number of injections in the past two (2) years to maintain their competence.
- For pharmacy practitioners with lapsed authorization to administer drugs by injection in another PRA must meet the requirements for Lapsed Permits below.
- Submission of a completed application and fee.

To annually renew a Technical Permit, a pharmacy practitioner must:

- have current certification in First Aid and CPR as set out in Appendix A - First Aid and CPR Certification Requirements.
- declare that they have administered a sufficient number of injections in the past two (2) years to maintain their competence. (If this declaration cannot be made, a refresher course is necessary for technical permit renewal)
- submit a completed application and fee.

Lapsed Technical Permits

To renew a Technical Permit that has lapsed, a pharmacy practitioner must:

- declare that they have administered a sufficient number of injections in the past two (2) years to maintain their competence, (including through the authority granted in another province or health authority in Nova Scotia), OR
- complete a refresher version of an education and training program that has obtained CCCEP Competency Mapped Accreditation, is specifically approved by Council, or one that is recognized by another Canadian provincial pharmacy regulatory authority (PRA) as meeting that PRA’s education and training requirements for a refresher program, AND
- have current certification in First Aid and CPR as set out in Appendix A - First Aid and CPR Certification Requirements, AND
- submit a completed application form and fee.

### NSCP Drug Administration by Injection Technical Permit Requirements

<table>
<thead>
<tr>
<th>NSCP Drug Administration by Injection Technical Permit Requirements</th>
<th>Initial NSCP Technical Permit</th>
<th>Annual Online Technical Permit Renewal</th>
<th>Renewal of Lapsed Technical Permit (a or b)</th>
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<tbody>
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<tr>
<td>Current First Aid and Cardiopulmonary Resuscitation (CPR) certification See Appendix A</td>
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# DRUG ADMINISTRATION NOTIFICATION

- **Response Required**: [ ]
- **For your records**: [ ]
- **Date**: ________________

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<thead>
<tr>
<th>TO:</th>
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<tbody>
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<td>Provider</td>
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**Planned Follow-Up**: [ ] N/A

**Details**: 

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**Pharmacy Practitioner Information**: 

- **Authorizing Pharmacist**
- **Signature**
- **Administrator/Immunizer**
- **Signature**
- **Pharmacy Name**
- **Phone/Fax**