

FAQs - Pharmacist Reporting

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What am I required to report?

Under the [Rules](#) in 24 A.A.R 783 for Opioid Reporting, Pharmacists are required to report naloxone doses dispensed to the Prescription Drug Monitoring Program (PDMP). [See Reporting for information on required reporters, health conditions to be reported, and reporting systems.](#)

When are we required to report? As in, how long is the acceptable timeline between an incident and when we must submit the report?

A pharmacist who dispenses naloxone or another opioid antagonist to an individual according to A.R.S. § 32-1979 shall, either personally or through a representative, submit a report as required in A.R.S. § 32-1979 to document the dispensing. .

Why is this now reportable?

On June 5, 2017, Arizona Governor Doug Ducey declared a [Public Health State of Emergency](#) due to the opioid epidemic. More than two Arizonans die every day due to opioid-related overdoses. An [Enhanced Surveillance Advisory](#) went into effect June 15, 2017 as a first step toward understanding the current burden in Arizona and to collect data to best target interventions. On October 9, 2017, [Emergency Rules in 9 A.A.C. 4](#) for opioid-related reporting were put in place. The [final rule for opioid reporting](#) went into effect April 5, 2018

Am I required to report every dose of naloxone I dispense?

No. Naloxone doses dispensed are required to be reported if they are in response to a suspected opioid overdose or provided for patients who may be at risk of an opioid overdose. If naloxone is dispensed for another purpose, like to reverse IV sedation or anesthesia, it does not need to be reported.

Do I need to report naloxone doses administered and/or dispensed in the situation where a physician retrieves naloxone from an automatic dispenser for a suspected opioid overdose (e.g. in the Emergency Department)?

Pharmacists are only required to report doses of naloxone they personally dispense and NOT the administration of naloxone ([see Reporting](#)). Therefore, in the situation where a physician retrieves naloxone from an automatic dispenser, there is no reporting required from the pharmacist.