

Frequently Asked Questions (FAQs)

Pharmacist Reporting

What am I required to report?

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?

Our request of you, and our goal as a Department, is for all reporters to submit a report within 5 business days. We understand that this may not always be possible, but request your assistance in obtaining timely and potentially life-saving data.

Does the reporting mandate include weekends?

For the purposes of reporting under Emergency Rule 9 A.A.C. 4, “business day” means the period from 8:00 a.m. to 5:00 p.m. Monday through Friday, and excluding state holidays.

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 for opioid-related reporting were put in place.

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.

Updated December 8, 2017