# HEALTH (DRUGS AND POISONS) REGULATION 1996

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DICTIONARY
CHAPTER 1—INTRODUCTION

PART 1—PRELIMINARY

Short title

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

Commencement

2. This regulation commences on 1 January 1997.

PART 2—INTERPRETATION

Dictionary

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

(2) Definitions found elsewhere in this regulation are signposted² in the dictionary.³

¹ In some regulations, definitions are contained in a dictionary that appears as the last schedule or appendix and forms part of the regulation—Acts Interpretation Act 1954, section 14, Statutory Instruments Act 1992, section 14.

² Words defined elsewhere in this regulation are generally signposted in the dictionary. However, if a section has a definition that only applies to the section, it is not generally signposted. If this type of definition is set out in a separate subsection, the subsection is generally the last subsection of the section.

³ The signpost definitions in the dictionary alert the reader to terms defined elsewhere in the regulation and tell the reader where the definitions can be found. For example, the definition ‘“expiry day” see section 19’, tells the reader there is a definition of the term “expiry day” in section 19.
Meaning of “manufacture”

4.(1) “Manufacture”, of a controlled drug, restricted drug or a poison, means—

(a) perform a process to produce the drug or poison; or
(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 control operator for pest control under a licence under the Act; or
(c) by a fumigator for fumigation under a licence under the Act.

Meaning of “S2” to “S9”

5. The expression “S2”, “S3”, “S4”, “S5”, “S6”, “S7”, “S8” or “S9” means—

(a) if followed by a controlled drug, restricted drug or a poison—the drug or poison in the schedule to the standard with the number given in the expression; or
(b) if followed by ‘poison’ without naming a poison or substance—any poison in the schedule to the standard with the
number given in the expression.

Examples—

1. If a provision mentions ‘S2 fluorides’, it means fluorides in schedule 2 to the standard, i.e., fluorides in preparations for topical human therapeutic use.

2. If a provision mentions ‘S3 fluorides’, it means fluorides in schedule 3 to the standard, i.e., fluorides in dentifrices containing more than 1 000 mg/kg of fluoride ion. Fluorides may also be included in other schedules, for example as S4, S5 or S6 poisons.

3. If a provision mentions ‘S7 poison’, it means any poison in schedule 7 to the standard.

Meaning of “transaction”

6. “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 1 place to another (with or without a change of ownership).

Application of interpretation provisions in standard to regulation

7. (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 76 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 76(8) 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.

References to entering details, signing or dating entries etc.

8.(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 who uses a computer to keep records.
PART 3—APPLICATION OF REGULATION TO CERTAIN SUBSTANCES

Provisions not applied to morphine or opium in certain preparations

9. 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.

PART 4—PACKING AND LABELLING

Packaging of controlled or restricted drugs or poisons

10.(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.

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

(3) The chief health officer may approve 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 health officer is reasonably satisfied using the container

4 Part 2 (Recommended standards for labels and containers)
as a package for a controlled or restricted drug or a poison is as safe as using a container permitted under the standard.

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

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

**Certain containers not to be used**

12.(1) A person must not sell any of the following in a container of a kind mentioned in paragraph 52, 53 or 54 of the standard or a container that is an approved 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

(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.

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5 See paragraph 52 (Small glass or plastic bottles or jars), paragraph 53 (Other containers) and paragraph 54 (Containers for Schedule 5 poisons).
6 Section 10 (Packaging of controlled or restricted drugs or poisons)
7 Part 1 of the standard provides that—

'**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.’.
Camphor and naphthalene

13. 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—AUTHORITIES

Division 1—Preliminary

Meaning of “authority” for pt 5

14.(1) In this part—

“authority” means any of the following granted by the chief health officer—

(a) an approval;
(b) an authority;
(c) a drug licence;
(d) a poison licence;
(e) a cyanide permit;
(f) a strychnine permit.

(2) In addition, in division 4 “authority” includes an authority to deal with a controlled drug, restricted drug or poison under the following provisions—

(a) chapter 2, part 2, division 3;
(b) chapter 2, part 3;
(c) chapter 3, part 2, division 3;
(d) chapter 3, part 3;
Suitability of person to hold authority

15.(1) In deciding whether a person is a suitable person to hold, or to continue to hold, an authority the chief health officer 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 health officer’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.

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

(3) In this section—

“this regulation” includes the Poisons Regulation 1973.

Inquiries about person’s criminal history

16.(1) If asked by the chief health officer, the Commissioner of the Police Service
Police Service must give the chief health officer a written report about the criminal history of a person who has applied for, or holds, an authority.

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

**Division 2—Applications for authorities**

**Applications—form and fee**

17. An application for an authority, or the renewal of a drug licence or poison licence, must—

(a) be in the approved form\(^9\) (if any); and

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

**How chief health officer may deal with applications**

18.(1) The chief health officer must consider an application for an authority and either—

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

(b) refuse to grant the authority.

(2) Also, the chief health officer must consider an application for the renewal of a drug licence or poison licence and either—

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

(b) refuse to renew the drug licence or poison licence.

(3) If the chief health officer decides to grant the authority or renew the drug licence or poison licence, the chief health officer must promptly give the applicant—

(a) an authority or licence; and

(b) if a condition is stated on the authority or licence—a written notice

\(^9\) See section 15A of the Act (Approval of forms).
that states—
(i) the reasons for the condition; and
(ii) the applicant may appeal against the imposition of the condition within 28 days after the applicant receives notice of the decision to a Magistrates Court.

(4) If the chief health officer decides not to grant the authority or licence, the chief health officer must promptly give the applicant a written notice that states—
(a) the decision; and
(b) the reasons for the decision; and
(c) the applicant may appeal against the decision to a Magistrates Court within 28 days after the applicant receives notice of the decision.

Renewal of drug licence or poison licence before expiry

19.(1) The chief health officer may renew a drug licence or poison licence on application made to the chief health officer before the licence expires (the “expiry day”).

(2) However, the chief health officer must not renew a general poison licence if, on the expiry day, there is a pharmacy within 25 km by road of the licensee’s business premises.10

Renewal of drug or poison licences after expiry

20.(1) This section applies if—
(a) not less than 14 days before the expiry day, the holder of a drug licence or poison licence applies for a renewal of the licence; and
(b) the chief health officer has not, before the expiry day, made a decision whether to renew the licence.

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

10 For general poison licences, see chapter 4 (Poisons).
(3) If the chief health officer decides to renew the licence, the renewed licence is taken to have been renewed on the expiry day.

**Division 3—Other provisions about authorities**

**Holder of authority must comply with conditions**

21. The holder of an authority must not contravene a condition of the authority.

Maximum penalty—80 penalty units.

**Term of drug licence, poison licence or wholesale representative authority**

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

**Division 4—Suspension or cancellation of authority**

**Grounds for suspension or cancellation of authority**

23. Each of the following is a ground for the suspension or cancellation of an authority

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

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

(c) if the authority is granted by the chief health officer and states premises for the conduct of business under the authority—the premises are unfit for use under the authority.

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11 In this division, “authority” has an extended meaning—see section 14.
Procedure for suspension or cancellation of authority

24.(1) If the chief health officer considers there is a ground to suspend or cancel an authority (the “proposed action”), the chief health officer may give the holder of the authority (the “authority 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 authority—states the proposed suspension period; and
(e) invites the authority holder to show, 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 authority; or
(b) a stated controlled drug, restricted drug or poison or a stated activity permitted under the authority.

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

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

(i) all controlled drugs, restricted drugs, poisons or activities permitted under the authority; or
(ii) a stated controlled drug, restricted drug or poison or a stated activity; or

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

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

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

(5) If the chief health officer decides to suspend or cancel the authority, the notice must state—

(a) the reasons for the decision; and

(b) the authority holder may appeal to a Magistrates Court against the decision within 28 days after the person receives notice of the decision.

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

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

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

(7) However, if the authority 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.

Urgent suspension or cancellation of authority

25.(1) This section applies if the chief health officer is reasonably
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satisfied—

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

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

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

(3) However, the chief health officer must immediately give written notice of the decision to the authority holder.

(4) The notice must state—

(a) the reasons for the decision, including the reasons for the urgent suspension or cancellation; and

(b) the authority holder may appeal against the decision within 28 days after the person receives notice of the decision to a Magistrates Court.

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

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

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

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

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

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

Return of authority

26.(1) The holder of a suspended authority, or the former holder of a cancelled authority, must return the authority to the chief health officer 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 authority is returned to the chief health officer, the chief health officer must return it to the authority holder at the end of the suspension period.

Division 5—Replacement, amendment, return and surrender of authorities

Replacement of authority

27.(1) The holder of an authority may apply to the chief health officer for the replacement of a lost, stolen or destroyed authority.

(2) If the chief health officer is reasonably satisfied the authority has been lost, stolen or destroyed, the chief health officer must replace the authority.

(3) If the chief health officer is not satisfied the authority has been lost, stolen or destroyed, the chief health officer must—

(a) refuse to replace the authority; and

(b) give the applicant a written notice that states—

(i) the decision; and

(ii) the reasons for the decision; and

(iii) the applicant may appeal against the decision to a Magistrates Court within 28 days after the applicant receives notice of the decision.

Amendment of authority on application

28.(1) The holder of an authority may apply to the chief health officer for an amendment of the authority.

(2) The chief health officer must decide the application by—

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

(b) refusing to amend the authority.

(3) The chief health officer may amend the authority only if the chief health officer is reasonably satisfied the amendment is necessary or desirable in the interests of the effective administration of this regulation.
(4) If the chief health officer refuses to amend the authority, the chief health officer must give the applicant a written notice that states—

(a) the decision; and
(b) the reasons for the decision; and
(c) the applicant may appeal against the decision to a Magistrates Court within 28 days after the applicant receives notice of the decision.

Amendment of authority without application

29.(1) The chief health officer may amend an authority if—

(a) the holder of the authority agrees to the amendment; or
(b) the chief health officer is reasonably satisfied the authority should be amended.

(2) If the chief health officer is reasonably satisfied the authority should be amended, the chief health officer must give the authority 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 authority holder to make written representations to the chief health officer, within a stated time of at least 28 days, to show why the conditions should not be amended.

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

(a) a new authority; and
(b) a written notice that states—
   (i) the old authority has been cancelled; and
   (ii) the way in which the new authority is different from the old
Minor amendment of authority

30.(1) This section applies if—

(a) the chief health officer is reasonably satisfied an authority should be amended; and

(b) the proposed amendment does not adversely affect the authority 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 health officer may amend the authority by written notice given to the authority holder.

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

Date amendment of authority takes effect

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

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

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

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12 Section 29 (Amendment of authority without application)
13 Section 28 (Amendment of authority on application), 29 (Amendment of authority without application) or 30 (Minor amendment of authority)
Surrender of authority

32.(1) The holder of an authority may surrender the authority by written notice given to the chief health officer.

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

Maximum penalty—20 penalty units.

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

PART 6—APPEALS

Decisions open to appeal

33.(1) An applicant for an authority may appeal against the chief health officer’s decision to refuse to grant the authority or to grant an authority subject to conditions.

(2) An authority holder may appeal against the following decisions of the chief health officer—

(a) a decision to refuse to renew a drug licence or poison licence;

(b) a decision to renew a drug licence or poison licence on new conditions;

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

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

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

Starting an appeal

34.(1) A person may start an appeal by filing a written notice of appeal with the clerk of the Magistrates Court nearest the place where the person proposes to carry on business, carries on business, works or lives.

(2) The notice of appeal must be filed within 28 days after the person
receives written notice of the decision appealed against.

(3) However, the person may make the application within 28 days after the person is given a statement of reasons if—

(a) the decision did not state the reasons for the decision; and

(b) the person asked for a statement of reasons within the period mentioned in subsection (2).

(4) Also, the court may extend the period for filing the notice of appeal.

(5) The notice of appeal must state fully the grounds of the appeal and the facts relied on.

Notice of appeal to be given to chief health officer

35. The clerk of the Magistrates Court must promptly give a copy of the notice of appeal to the chief health officer.

Stay of operation of decisions

36.(1) The Magistrates Court may grant a stay of the decision to secure the effectiveness of the appeal.

(2) The stay—

(a) may be given on conditions the court considers appropriate; and

(b) operates for the period fixed by the court; and

(c) may be revoked or amended by the court.

(3) The period of a stay must not extend past the time when the court decides the appeal.

(4) An appeal against a decision does not affect the decision, or the carrying out of the decision, unless the court grants a stay of the decision.

Hearing procedures for appeal

37.(1) The Magistrates Court—

(a) is not bound by the rules of evidence; and

(b) must observe natural justice; and
(c) may hear the appeal in court or chambers.

(2) The appeal is by way of rehearing, unaffected by the chief health officer’s decision.

Powers of court on appeal

38.(1) In deciding an appeal against a decision of the chief health officer, the Magistrates Court may—

(a) confirm the decision; or
(b) vary the decision; or
(c) set aside the decision and make a decision in substitution for the decision; or
(d) set aside the decision and return the issue to the chief health officer with directions the court considers appropriate.

(2) In varying the decision or substituting another decision, the court has the same powers as the chief health officer.

Example—
The court may decide that an unsuccessful applicant for an authority be granted the authority and impose conditions on it.

(3) If, on appeal, the court acts under subsection (1)(b) or (c), the decision is taken, for this regulation (other than this part), to be that of the chief health officer.

Appeal to District Court on questions of law only

39. A party dissatisfied by the Magistrates Court’s decision may appeal to a District Court, but only on a question of law.
CHAPTER 2—CONTROLLED DRUGS

PART 1— LICENCES

Division 1— Preliminary

Types of licences

40. The chief health officer may grant or renew the following types of licences under this chapter—

(a) controlled drug manufacturer licences;

(b) controlled drug wholesaler licences.

Licence to state business premises and other particulars

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

(2) The chief health officer 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 health officer must also state in the licence—

(a) the controlled drug or drugs the licensee is authorised to 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 health officer may state in the licence the controlled drug or drugs the licensee is authorised to sell under the licence.
Restrictions on grant of controlled drug manufacturer licence

42. The chief health officer may grant a controlled drug manufacturer licence to a person only if the chief health officer 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.

Controlled drug manufacturer licence

43. A controlled drug manufacturer—

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

(b) is taken to hold a controlled drug wholesaler licence.

General conditions that apply to controlled drug manufacturer licence

44. 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.

**Offence to manufacture controlled drugs without licence**

45. 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 who manufactures the controlled drug for the analyst’s official duties.

Maximum penalty—80 penalty units.

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### Division 3—Controlled drug wholesaler licence

**Restrictions on grant of controlled drug wholesaler licence**

46. The chief health officer may grant a controlled drug wholesaler licence to a person only if the chief health officer 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.

**Controlled drug wholesaler licence**

47.(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).

General conditions that apply to controlled drug wholesaler licence

48. (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) 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.\(^14\)

Maximum penalty—80 penalty units.

Offence to wholesale controlled drugs without licence

49. 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

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\(^{14}\) The code is issued by the Commonwealth department in which the Therapeutic Goods Act 1989 (Cwlth) is administered and is available from the Commonwealth Government Bookshop, Adelaide Street, Brisbane.
authority under the *Narcotic Drugs Act 1967* (Cwlth).

Maximum penalty—80 penalty units.

*Division 4—General*

**Records of transactions to be kept by licensee**

50.(1) A licensee must keep a record of controlled drugs (a "controlled drugs register") in a book or in another approved 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.

(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.

PART 2—AUTHORITIES

Division 1—Preliminary

Authority needed for controlled drugs

51.(1) A person must not have in the person’s possession a controlled drug unless the person is, under this chapter, authorised to possess the drug.

Maximum penalty—80 penalty units.

(2) A person must not obtain a controlled drug for someone else unless the person is, under this chapter, authorised to obtain the drug for the other person.

Maximum penalty—80 penalty units.

(3) A person must not dispense, prescribe or sell a controlled drug unless the person is, under this chapter, authorised to dispense, prescribe or sell the drug.
s 52 42 s 53

Health (Drugs and Poisons) No. 414, 1996

Maximum penalty—80 penalty units.

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

Maximum penalty—80 penalty units.

(5) If a person may only administer, dispense, issue, obtain, possess, prescribe or sell a controlled drug at a stated place or under stated conditions, the person must not administer, dispense, issue, obtain, possess, prescribe or sell the drug at another place or in contravention of the conditions.

Maximum penalty—80 penalty units.

Division 2—Particular authorities

Anaesthetic assistants and enrolled nurses

52.(1) This section 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 authorised by the Queensland Nursing Council to assist in anaesthetic procedures.

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

Authorised dispenser

53. If the chief health officer is reasonably satisfied a person who is employed as a pharmacist’s assistant has had satisfactory training and experience in dispensing controlled drugs, the chief health officer may authorise the person, in writing, to dispense a controlled drug at a dispensary under a pharmacist’s direction and personal supervision.
Bases and outposts of Royal Flying Doctor Service

54.(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 instruction.

Carriers

55. 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.

Dentists

56. 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 or supply a controlled drug an oral or written instruction to administer or supply codeine, morphine, oxycodone, papaveretum, pentazocine or pethidine at the place where the dentist practises dentistry.

Detention centres

57.(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;15 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.

Doctors

58. 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

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15 Part 5 (Obtaining controlled drugs on purchase order)
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.

Hospitals

59.(1) This section applies to the following persons—
   (a) the medical superintendent of a hospital;
   (b) the pharmacist in charge of a hospital’s dispensary;
   (c) the director of nursing of a hospital.

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

Inspectors

60. 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.

Controlled drug manufacturer or wholesaler

61.(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
(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;\(^{16}\)

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.

Midwives

62.(1) To the extent necessary to practise midwifery, a midwife is authorised to possess a controlled drug at the place where the person practises midwifery and administer the drug—

(a) on a doctor’s oral or written instruction;\(^{17}\) or

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

(2) To the extent necessary to practise midwifery in an isolated practice area, a private practice endorsed midwife is authorised to—

(a) obtain a controlled drug declared by the chief health officer by

\(^{16}\) Chapter 1 (Introduction), part 4 (Packing and labelling)

\(^{17}\) A doctor may give an oral instruction to a midwife to administer or supply a controlled drug to or for a patient only if the doctor reasonably believes an emergency exists or the doctor is personally supervising the midwife. See section 97 (Dentist or doctor may instruct someone to administer or supply a controlled drug).
gazette notice to be a drug to which this subsection applies; or
(b) possess a controlled drug obtained under paragraph (a) at a place
where the person practises midwifery; or
(c) administer a controlled drug obtained under paragraph (a) on a
doctor’s oral or written instruction or under an approved drug
therapy protocol.

Nursing homes

63.(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;\(^{18}\) or
(b) possess a controlled 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.

Pharmacists

64.(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.

\(^{18}\) Part 5 (Obtaining controlled drugs on purchase order)
(2) A person who holds a degree of Bachelor of Pharmacy from an Australian university, or is enrolled in a course for the degree of Bachelor of Pharmacy at an Australian university, is authorised to dispense a controlled drug at or from a dispensary under a pharmacist’s direction and personal supervision.

(3) Subsection (2) does not apply to a person who holds a degree of Bachelor of Pharmacy but whose registration as a pharmacist has been cancelled or suspended under the Pharmacy Act 1976, section 25, or a corresponding law of another State, if the cancellation or suspension is in force.

Prisons

65.(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.

Queensland Ambulance Service

66.(1) To the extent necessary for performing ambulance duties for the Queensland Ambulance Service, an ambulance officer who has

19 Part 5 (Obtaining controlled drugs on purchase order)
successfully completed an approved course of advanced clinical training with the service is authorised to—

(a) obtain a controlled drug declared by the chief health officer by gazette notice to be a controlled drug to which this subsection applies; or

(b) possess a controlled drug obtained under paragraph (a) at a place where the officer is performing ambulance duties; or

(c) administer a controlled drug obtained under paragraph (a) to a patient on a doctor’s oral or written instruction or under an approved drug therapy protocol.\(^\text{20}\)

(2) An ambulance officer who is undergoing an approved course of advanced clinical training with the Queensland Ambulance Service is authorised to administer a controlled drug to a patient under the supervision of someone who has completed the training and is acting on a doctor’s oral or written instruction or under an approved drug therapy protocol.

**Registered nurses**

67.(1) To the extent necessary to practise nursing, a registered nurse is authorised to possess a controlled drug at a place where the person practises nursing and administer the drug—

(a) on a dentist’s or doctor’s oral or written instruction;\(^\text{21}\) or

(b) 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 an isolated practice area, an isolated practice endorsed nurse is authorised to—

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\(^\text{20}\) A doctor may give an ambulance officer an oral instruction to administer or supply a controlled drug to or for a patient only if the doctor reasonably believes an emergency exists. See section 97 (Dentist or doctor may instruct someone to administer or supply a controlled drug).

\(^\text{21}\) A dentist or doctor may instruct a registered nurse to administer or supply a controlled drug to or for a patient only if the dentist or doctor is personally supervising the nurse. Also, a doctor who reasonably believes an emergency exists may orally instruct a registered nurse to administer or supply a controlled drug to or for a patient. See section 97 (Dentist or doctor may instruct someone to administer or supply a controlled drug).
(a) obtain a controlled drug; or
(b) possess a controlled drug at a place in the isolated practice area where the person practises nursing; or
(c) administer or supply a controlled drug on a doctor’s oral or written instruction or under an approved drug therapy protocol.

**Registered nurses more than 25 km from pharmacy**

68.(1) To the extent necessary to practise nursing, a registered nurse in charge of drugs at a hospital that does not employ a pharmacist and is more than 25 km by road from a pharmacy may supply a controlled drug to a patient of the hospital on a doctor’s oral or written instruction.

(2) To the extent necessary to practise nursing at a hospital, a registered nurse is authorised to supply a controlled drug to an outpatient of the hospital on a doctor’s oral or written instruction.

(3) However, a doctor may only give an instruction to a nurse to supply a controlled drug under subsection (2) if—
   (a) the doctor reasonably believes—
       (i) an emergency exists; and
       (ii) supplying the drug is essential for the patient’s wellbeing; and
   (b) there is no doctor or pharmacist on duty at the hospital; and
   (c) there is no access to a pharmacy within 25 km by road from the hospital.

(4) A nurse supplying a controlled drug under subsection (2) must not supply more than—
   (a) for a controlled drug that is a pre-packed aerosol, cream, liquid or ointment—the minimum standard pack; or
   (b) for another controlled drug—3 days supply of the drug.

**Ship’s master**

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

**State analysts**

70. 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.

**Veterinary surgeons**

71. 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.

**Watchhouse keepers etc.**

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

(a) possess the controlled drug at the watchhouse 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**

**Other authorities may be given**

73.(1) The chief health officer may give a person written authority to administer, issue, obtain, possess, sell or use a controlled drug.

(2) The chief health officer may give a person an authority only if the chief health officer is reasonably satisfied the person—

(a) has a genuine need for the authority; and

(b) is a suitable person to be given the authority.

(3) This section has effect despite anything in division 2.

*Example*—

Under section 67(1), a registered nurse is authorised to possess a controlled drug and administer it under certain conditions. Under this section, the chief health officer may extend the nurse’s authorisation by, for example, giving the nurse a written authority to obtain or use a controlled drug in stated circumstances.

**When authority is not needed**

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

(2) Also, a carer does not need an authority under this part to help a person for whom a controlled drug was supplied as a dispensed medicine take the drug if—

(a) the person requests the carer’s help; and
(b) the carer helps the person to take the drug under the directions on the label attached to the dispensed medicine’s container.

PART 3—REGULATED CONTROLLED DRUGS

Butorphanol and carfentanyl

75. A person must not dispense, obtain, prescribe, sell or use butorphanol or carfentanyl unless the person—

(a) dispenses, obtains, prescribes, sells or uses butorphanol or carfentanyl under an approval; or

(b) for butorphanol—dispenses, obtains, prescribes, sells or uses butorphanol for the treatment of horses under an authority; or

(c) for carfentanyl—dispenses, obtains, prescribes, sells or uses carfentanyl for the treatment of animals under an authority.

Maximum penalty—80 penalty units.

Approved drugs—dextromoramide and hydromorphone

76. A person must not dispense, prescribe, sell or use dextromoramide or hydromorphone unless the person—

(a) prescribes, dispenses, sells or uses dextromoramide or hydromorphone under an approval; or

(b) is a dispenser and dispenses dextromoramide or hydromorphone on a lawful prescription; or

(c) is a controlled drug manufacturer or wholesaler and sells dextromoramide or hydromorphone; or

(d) is lawfully supplied with dextromoramide or hydromorphone for

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22 Under section 5 of the Act, “sell”, ‘so far as it relates to any poison, or to any restricted drug, or to any dangerous drug, or to any biological preparation includes supplying, exchanging, lending or giving away, and whether for consumption, or use by humans or for any other purpose whatsoever’.
medical treatment and uses it in the way directed.

Maximum penalty—80 penalty units.

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

77. 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.

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

78.(1) A person must not dispense, prescribe, sell or use a specified condition drug unless the person—

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

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

(i) narcolepsy; or

(ii) brain damage in a child at least 4 but not older than 16; or

(iii) attention deficit disorder in a child at least 4 but not older than 16; 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) 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 health officer may give an approval mentioned in subsection (1)(a) only to—

(a) a doctor; or

(b) a person who satisfies the chief health officer 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, DISPENSING AND SELLING CONTROLLED DRUGS

Division 1—Prescribing controlled drugs

Writing prescriptions

79.(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) A prescription for a controlled drug must not prescribe more than 1 item.

(3) The following particulars must appear on the front of the prescription—
(a) the prescriber’s name, professional qualifications and address;
(b) the date it is written;
(c) if the controlled drug is for human use—the name and address 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;
(h) if a doctor prescribes a dose that is more than the official dose—a direction to dispense the higher dose that is underlined and initialled by the doctor;
(i) if a doctor 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 dextromoramide, hydromorphone or 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’.

23 Under section 5 of the Act, “official dose” is defined as follows—

‘official dose’, when used with reference to any drug or other article, means the maximum dose (if any) stated in the British Pharmacopoeia.’.
(4) All particulars on the prescription (other than the prescriber’s name, professional qualifications and address) must be handwritten.

(5) However, a 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 approved way.

(6) The prescriber must sign the prescription.

(7) If the prescriber amends the prescription, the prescriber must initial and date the amendment.

Restrictions on writing prescriptions

80.(1) A prescriber must not write on a prescription in code unless the prescriber has an approval for the code.

Maximum penalty—40 penalty units.

(2) A veterinary surgeon must not write 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) write a repeat prescription for a controlled drug; or

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

Maximum penalty—60 penalty units.

Oral prescription

81.(1) If a doctor reasonably believes an emergency exists, the doctor may give a pharmacist an oral prescription for a controlled drug the doctor is authorised to prescribe.

(2) The doctor must immediately write a prescription for the drug and send the prescription to the pharmacist within 24 hours of giving the oral prescription.

Maximum penalty—40 penalty units.
(3) If the pharmacist does not receive the relevant written prescription within 72 hours after being given the oral prescription, the pharmacist must immediately give a written report about the circumstances to the chief health officer.

Maximum penalty—20 penalty units.

**Division 2—Dispensing controlled drugs**

**Conditions of dispensing**

82.(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) the drug dispensed—

(i) conforms with the prescription; or

(ii) is dispensed under section 83.\(^{24}\)

Maximum penalty—60 penalty units.

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

(a) it is written by someone the dispenser reasonably believes is not registered in the State as a dentist, doctor or veterinary surgeon; 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 has ‘cancelled’ stamped or written on it; 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) the prescription is for the controlled drug dextromoramide, hydromorphone or dronabinol—it does not have ‘approved’

\(^{24}\) Section 83 (Dispensing generic drugs)
written on it; or

(h) the prescription is for the controlled drug amphetamine, dexamphetamine, methylamphetamine, methylphenidate or phenmetrazine—it does not have ‘specified condition’ written on it.

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) If a dispenser is reasonably satisfied a prescription does not comply with division 1, the dispenser must—

(a) on the front of the prescription, sign the prescription and write ‘cancelled’, the date and the name and address of the dispensary; and

(b) send it to the chief health officer within 14 days after cancelling it.

Maximum penalty—60 penalty units.

Dispensing generic drugs

83(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 (the “generic drug”).

(2) A dispenser may dispense the generic drug in place of the specified drug 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) 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; and

(d) a determination is in force for the generic drug under section 85(6) of the National Health Act; and

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

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

(3) If a generic drug is dispensed, the dispenser must write the brand name of the generic drug on the front of the prescription and sign the prescription.

Maximum penalty—20 penalty units.

Dealing with prescriptions

84.(1) A dispenser must, when dispensing a controlled drug on prescription—

(a) write the date and, for a repeat prescription, the repeat number, on the front of the prescription; and

(b) write on the prescription—

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

(ii) cancelled; and

(c) sign the prescription.

Maximum penalty—40 penalty units.

(2) The dispenser must handwrite the date and repeat number.

Section 85 (Pharmaceutical benefits) of the National Health Act.
Maximum penalty—40 penalty units.

(3) The dispenser must send the prescription to the chief health officer within 14 days after dispensing the controlled drug.

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 health officer 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) Subsections (1)(b)(ii) and (3) apply to a repeat prescription only if the last repeat of the prescription is dispensed.

(6) Subsection (1)(b)(ii) does not apply to a duplicate of a prescription issued under the National Health Act or Veterans Entitlement Act.

**Labelling dispensed medicines**

85.(1) A person who sells a controlled 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 1.5 mm.

(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; or

(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 in appendix K26 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
(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;27 or
(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 controlled drug in the medicine; or
(e) the name of each controlled drug in the medicine as written in the prescription.

26 Appendix K (Drugs required to be labelled with a sedation warning)
27 For the definition “approved name” see part 1 of the standard.
(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.

Controlled drugs book to be kept

86.(1) The pharmacist in charge of a dispensary must keep a record book (a “controlled drugs book”), as required by this section, in the approved form at the dispensary.

Maximum penalty—40 penalty units.

(2) The controlled drugs book must be bound.

(3) Each page of the drugs book 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 book about controlled drugs returned to the pharmacist for destruction may be made on a single page in the book.

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

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

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

Maximum penalty—40 penalty units.

(6) If a person who dispenses a controlled drug at a dispensary makes an entry on a page of the drugs book on which there is no other entry, the person must record as the first entry on the page—

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

(b) a reference to the most recent entry about the class of controlled
drug.
Maximum penalty—40 penalty units.

Entries to be made in controlled drugs book

87.(1) A pharmacist, or a person who is authorised to dispense a controlled drug under the personal supervision of a pharmacist, must personally record in the controlled drugs book, 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 on the day of the transaction and, if there is more than 1 transaction on a day, in the order in which the transaction happens.

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 wrote the order or prescription;

(g) the balance of the drug in stock at the dispensary after the transaction.
s 88 65 s 88

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Maximum penalty—40 penalty units.

(4) The person who makes the entry must initial each line of the entry.

Maximum penalty—40 penalty units.

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

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 that gives the date of the correction and the correct details.

Stock to be checked

88.(1) If a pharmacist takes over the management of a dispensary for 7 days or more, 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 of the controlled drugs book and sign each 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 book for the drug, the pharmacist must immediately give written notice of the discrepancy to the chief health officer.

Maximum penalty—40 penalty units.
PART 5—OBTAINING CONTROLLED DRUGS ON PURCHASE ORDER

Authorised persons to obtain controlled drugs on purchase order

89.(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.

(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 1 of the persons appearing opposite the entity or place in column 2.

Sale of controlled drugs to authorised persons

90.(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, in duplicate, for the controlled drug; and
(c) the purchase order, and duplicate, are signed by the ship’s owner.

Maximum penalty—60 penalty units.

Delivery of controlled drugs

91.(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 acknowledgment 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 12.5 mm; and
(c) the packing slip is placed so it is visible as soon as the package is opened.

Maximum penalty—40 penalty units.
Sending controlled drugs by carrier etc

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

(a) the seller sends it by security post or a carrier or transport service under this section; and

(b) the package complies with this section.

Maximum penalty—40 penalty units.

(2) The seller may send the controlled drug by security post or a carrier or transport service only if Australia Post or the carrier or transport service gives the seller—

(a) a signed or officially receipted document acknowledging receipt of the controlled drug for delivery to the buyer; and

(b) a signed or officially receipted document from the buyer acknowledging the buyer’s receipt of the controlled drug.

(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 health officer a written report of the circumstances of the transaction.

(5) The seller must not send a controlled drug to a buyer unless the drug is in a securely closed package addressed to the buyer.

(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 letter with a face depth of at least 12.5 mm.

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

93.(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 send it to the chief health officer—

(i) for an order placed by a ship’s master—within 48 hours after selling the drug; or

(ii) in any other case—within 14 days after selling the drug.

Maximum penalty—40 penalty units.

(2) If a person (other than a person who sells a controlled drug under subsection (1)) sells a controlled drug on a purchase order, the person must—

(a) write the date the drug is sold 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.

(3) If the order is for the sale of a controlled drug to a ship’s master, the person selling the drug, whether under subsection (1) or (2), must also write on the duplicate of the order the information required under the relevant subsection.

Maximum penalty—40 penalty units.

(4) However, the person need only send 1 copy of the order to the chief health officer within 48 hours.

(5) 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

Unlawful possession of controlled drugs

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

Maximum penalty—80 penalty units.

Possession by user

95.(1) A person who is lawfully supplied with a controlled drug by a dentist, doctor, isolated practise endorsed nurse, pharmacist or veterinary surgeon may possess the drug for the time reasonably necessary for the person to use the drug for the purpose and in the way the dentist, doctor, nurse or veterinary surgeon 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 supplied.

Maximum penalty—60 penalty units.

Issue of controlled drugs within institutions

96. 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.
Dentist or doctor may instruct someone to administer or supply a controlled drug

97.(1) A dentist who is personally supervising a registered nurse may orally instruct the nurse to administer or supply a controlled drug to or for a patient.

(2) If a doctor reasonably believes an emergency exists, the doctor may orally instruct an ambulance officer, midwife or registered nurse to administer or supply a controlled drug to or for a patient.

(3) Also, a doctor who is personally supervising a registered nurse or midwife may orally instruct the midwife or nurse to administer or supply a controlled drug to or for a patient.

(4) The dentist or doctor must put the oral instruction into writing within 24 hours after giving the instruction.

Maximum penalty—40 penalty units.

(5) If a registered nurse or midwife acts on the oral instruction of a dentist or doctor and the dentist or doctor does not put the instruction in writing within 24 hours after giving the instruction, the 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.

(6) If a dentist or doctor contravenes subsection (4)—

(a) for an instruction given at a hospital—the hospital’s director of nursing must report the circumstances to the hospital’s medical superintendent or the chief health officer; 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 report the circumstances to the chief health officer; or
(c) for another case—the person given the instruction must report the circumstances to the chief health officer.

Maximum penalty—40 penalty units.

PART 7—RECORDS OF CONTROLLED DRUGS

Division 1—Definitions

Definitions for pt 7

98. 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.

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28 Section 99 (Central storer to keep main issue book for controlled drugs)
29 Section 106 (Single storer to keep single storage book for controlled drugs)
30 Section 104 (Transfer vouchers may be used for controlled drugs in certain cases)
institution.

“ward drugs book” see section 101(1).

\textit{Division 2—Records at institutions with central storage point for controlled drugs}

Central storer to keep main issue book for controlled drugs

99.(1) The central storer at an institution must keep a book (the “main issue book”), in the approved form, 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.

Details to be recorded when controlled drugs obtained by central storer

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

\textsuperscript{31} Section 101 (Unit storer to keep ward drugs book for controlled drugs)
(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 from 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.

Maximum penalty—40 penalty units.

(2) The central storer must sign the entry.

Maximum penalty—40 penalty units.

**Unit storer to keep ward drugs book for controlled drugs**

101.(1) A unit storer must keep a book (the “ward drugs book”), in the approved form, for recording transactions 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 is—

(i) 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.
Details to be recorded when controlled drugs obtained at unit

102.(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.

Details to be recorded when controlled drugs administered in unit

103.(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.

Transfer vouchers may be used for controlled drugs in certain cases

104.(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.

Main issue book and ward drugs book as 1 book

105. 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

Single storer to keep single storage book for controlled drugs

106.(1) A single storer of controlled drugs must keep a book (the “single storage book”) for recording transactions about obtaining controlled drugs into, and administering controlled drugs from, the storage point.

Maximum penalty—40 penalty units.

(2) The single storer must ensure each page of the single storage book is designed only for entries about a single class of controlled drug.

32 Section 101 (Unit storer to keep ward drugs book for controlled drugs), 102 (Details to be recorded when controlled drugs obtained at unit) and 103 (Details to be recorded when controlled drugs administered in unit)
Details to be recorded when controlled drugs obtained

107.(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.

Details to be recorded when controlled drugs administered

108.(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 date the controlled drug is administered; and
(c) the name of the person to whom the controlled drug is administered; and
(d) the date and time the controlled drug was administered; and
(e) 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

Records of controlled drugs supplied to be kept

109.(1) The director of nursing or registered nurse in charge for a hospital must keep a record, as required by this section, of all controlled drugs supplied by a nurse at the hospital under an authority under section 68(1) or (2).  

Maximum penalty—40 penalty units.

(2) The records must be made by making written entries in a bound book with consecutively numbered pages.

(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.

33 Section 68 (Registered nurses more than 25 km from pharmacy)
(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.

Responsibility for checking accuracy of records at institutions

110.(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 least once a week—
      (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 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 health officer—
      (i) a contravention of this regulation;
      (ii) an apparently excessive use of a controlled drug;
      (iii) any inconsistency between the controlled drug in stock and the drugs that the records indicate should be in stock.

Maximum penalty—40 penalty units.

(3) In this section—

“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

Records—dentists, doctors, veterinary surgeons

111.(1) A dentist, doctor 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.

Records—ambulance officers and isolated practice endorsed registered nurses

112.(1) An ambulance officer or isolated practice endorsed registered nurse who obtains a controlled drug must keep a record book.

Maximum penalty—40 penalty units.

(2) The ambulance officer or isolated practice endorsed registered 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 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, dispensed, obtained, supplied or used by the officer or nurse, but no later than the day after it is administered, dispensed, obtained, supplied or used.

Maximum penalty—40 penalty units.

(3) The ambulance officer or isolated practice endorsed registered 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 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 or nurse’s signature.

Maximum penalty—40 penalty units.

Record keeping for nursing practice in isolated practice area

113.(1) This section applies if 2 or more isolated practice endorsed registered nurses operate a practice in an isolated practice area.

(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 health officer—
(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.

Maximum penalty—40 penalty units.
Records—other authorised persons

114.(1) A person authorised under this chapter to administer, possess, obtain, sell or use a controlled drug must keep the records stated in the authority.

Maximum penalty—40 penalty units.

(2) This section does not apply to records that must be kept under another provision of this chapter.

Exemption of user from keeping records

115.(1) This part does not apply to a person for a controlled drug if—

(a) the controlled drug was lawfully prescribed for the person or the person’s animal; and

(b) the person uses the controlled drug for the dental, medical 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.

Record to be made on day of transaction

116. 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.

Records not to be changed but may be corrected

117.(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

Storage of controlled drugs at institutions

118.(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 the chief health officer is reasonably satisfied is a secure place.

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) personally possess the key or combination to the receptacle or place.

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.

Storage of controlled drugs generally

119.(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 the chief health officer is reasonably satisfied is a secure place.

Maximum penalty—60 penalty units.

(2) The authorised person must—

(a) 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

(b) personally possess the key or combination to the receptacle or 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, isolated practice endorsed registered 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, isolated practice endorsed registered 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 as a carer for another person for whom the drug is prescribed.
PART 9—LENGTHY TREATMENT WITH AND DEPENDENCE ON CONTROLLED DRUGS

Notice required if lengthy treatment with controlled drug

120.(1) This section applies if a doctor—

(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 for more than 2 months and the doctor intends to administer, dispense, prescribe or supply a controlled drug in the treatment of the patient.

(2) The doctor must immediately give the chief health officer a written report in the approved form about the circumstances of the patient’s treatment.

Maximum penalty—40 penalty units.

(3) The chief health officer may ask the doctor to give the chief health officer additional information about the treatment of the patient within a stated reasonable time.

(4) The doctor must comply with the request, unless the doctor has a reasonable excuse for not complying with it.

Maximum penalty—40 penalty units.

Controlled drugs not to be obtained unless information disclosed to dentist or doctor

121.(1) This section applies to a person who—

(a) consults a dentist or doctor (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 or doctor (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 day the person consults the other practitioner.

Maximum penalty—80 penalty units.

Approval needed for treating drug dependent person with controlled drugs

122.(1) A doctor must not, without an approval—

(a) dispense or prescribe a controlled drug for a person the doctor reasonably believes is a drug dependent person; or

(b) administer or supply a controlled drug to or for a drug dependent person.

Maximum penalty—60 penalty units.

(2) If a doctor reasonably believes that it is necessary for the doctor to treat a drug dependent person with a controlled drug, the doctor must give the chief health officer a report in the approved form about the circumstances of the person’s treatment.

Maximum penalty—40 penalty units.

(3) The chief health officer may ask the doctor to give the chief health officer stated additional information about the treatment of the drug dependent person within a stated reasonable time.

(4) The doctor must comply with the request, unless the doctor has a reasonable excuse for not complying with it.

Maximum penalty—40 penalty units.

(5) If the chief health officer is reasonably satisfied that for the welfare of the drug dependent person it is necessary for the doctor to treat the person with a controlled drug, the chief health officer may give the doctor written approval to administer, dispense, prescribe, supply or use a stated quantity or volume of the controlled drug.

(6) Also, if the chief health officer is reasonably satisfied that for the
welfare of the drug dependent person it is necessary for the chief health officer to give the doctor an oral approval to administer, dispense, prescribe, supply or use a stated quantity or volume of the controlled drug to or for the person, the chief health officer may give the oral approval.

(7) However, if the chief health officer gives the doctor an oral approval, the chief health officer must give the doctor written confirmation of the approval as soon as possible after giving the oral approval.

(8) A doctor to whom an approval has been given about a controlled drug for a drug dependent person must not administer, dispense, prescribe or supply a controlled drug to, or use a controlled drug on, the person other than under the approval.

Maximum penalty—60 penalty units.

Self-administration of controlled drugs by authorised persons prohibited

123.(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 or doctor (other than the person) prescribed the drug for, or supplied the drug to, the person; and

(b) the dentist or doctor 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.

35 Part 2 (Authorities) and part 3 (Regulated controlled drugs)
PART 10—GENERAL

Controlled drugs for animals not to be dispensed etc. for human therapeutic use

124. 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.

Controlled drugs for animals not to be administered to humans

125. 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.

False, misleading or incomplete entries

126. 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.

Improper use of prescriptions for controlled drugs

127.(1) A person must not use a prescription for a controlled drug to obtain the drug if the prescription 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.

False statements—controlled drugs

128.(1) A person must not make a statement the person knows is false to
obtain a controlled drug from a person authorised under this chapter 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.
Production of documents about controlled drugs previously in authorised person’s possession

129. (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.

Unsafe disposal or use of controlled drugs

130. 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 authorised to possess it.

Maximum penalty—80 penalty units.
Advertising controlled drugs

131. (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 intended for circulation only to the wholesale drug trade or the dental, medical, pharmaceutical or veterinary professions.

Safe keeping of controlled drugs

132. 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.

Keeping records

133. 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

Types of licences

134. The chief health officer may grant or renew the following types of licences under this chapter—

(a) restricted drug manufacturer licences;

(b) restricted drug wholesaler licences.

Licence to state business premises and other particulars

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

(2) The chief health officer 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 health officer must also state in the licence—

(a) the restricted drug or drugs the licensee is authorised to 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 health officer may state in the licence the restricted drug or drugs the licensee is authorised to sell under the licence.
Division 2—Restricted drug manufacturer licence

Restrictions on grant of restricted drug manufacturer licences

136. The chief health officer may grant a restricted drug manufacturer licence to a person only if the chief health officer 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.

Restricted drug manufacturer licence

137. A restricted drug manufacturer—

(a) may manufacture only the restricted drugs stated in the manufacturer’s licence; and

(b) is taken to hold a restricted drug manufacturer licence.

General conditions that apply to restricted drug manufacturer licence

138. 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.

**Offence to manufacture restricted drug without licence**

139. 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 who manufactures a restricted drug for the analyst’s official duties.

Maximum penalty—60 penalty units.

**Division 3—Restricted drug wholesaler licence**

**Restrictions on grant of restricted drug wholesaler licence**

140. The chief health officer may grant a restricted drug wholesaler licence to a person only if chief health officer 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.

**Restricted drug wholesaler licence**

141.(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).

### General conditions that apply to restricted drug wholesaler licence

142. (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 supplying a restricted drug to the wholesaler’s representative for display or supply, as samples, to a dentist, doctor or veterinary surgeon.

(3) 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.\(^{36}\)

Maximum penalty—60 penalty units.

### Offence to wholesale restricted drug without licence

143. 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.

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\(^{36}\) The Code is issued by the Commonwealth department in which the *Therapeutic Goods Act 1989* is administered and is available from the Commonwealth Government Bookshop, Adelaide Street, Brisbane.
Records of transactions to be kept by licensee

Section 144(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, in an approved form, 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, in an approved form, of each restricted drug supplied to the licensee’s wholesale representative; and

(b) a copy of each return supplied to the licensee by the representative.

Maximum penalty—40 penalty units.

(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.
Supply of samples

145. A licensee must not supply 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—AUTHORITIES

Division 1—Preliminary

Authority needed for restricted drugs

146.(1) A person must not have in the person’s possession a restricted drug unless the person is, under this chapter, authorised to possess the drug.

Maximum penalty—60 penalty units.

(2) A person must not obtain a restricted drug for someone else unless the person is, under this chapter, authorised to obtain the drug for the other person.

Maximum penalty—60 penalty units.

(3) A person must not dispense, prescribe or sell a restricted drug unless the person is, under this chapter, authorised to dispense, 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 chapter, authorised to administer the drug to the other person.

Maximum penalty—60 penalty units.

(5) If a person may only administer, dispense, obtain, possess, prescribe or sell a restricted drug at a stated place or under stated conditions, the
person must not administer, dispense, obtain, possess, prescribe or sell the
drug at another place or in contravention of the conditions.
Maximum penalty—60 penalty units.

Division 2—Wholesale representatives

Wholesale representative authority

147.(1) The chief health officer may grant wholesale representative
authorities under this division.

(2) The chief health officer may grant a wholesale representative
authority to a person only if the chief health officer is satisfied the person—

(a) is employed by a licensee in a capacity requiring the person to
possess restricted drugs for display or supply, as samples, to
dentists, doctors or veterinary surgeons; and

(b) is a suitable person to be allowed to possess restricted drugs.

Wholesale representative may obtain restricted drugs

148. A wholesale representative is authorised to obtain a restricted drug
from a restricted drug wholesaler and possess it for display or supply, as
samples, to a dentist, doctor or veterinary surgeon.

Storage etc. of samples

149.(1) When a wholesale representative is not displaying or supplying
restricted drugs to a dentist, doctor or veterinary surgeon, 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 supplies a restricted drug to a dentist, doctor or
veterinary surgeon, the representative must give the person an invoice that
complies with subsection (4) for the drug and send a copy to the
representative’s employer within 7 days after the day of supply.
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 the day of supply.

Maximum penalty—40 penalty units.

(4) The invoice must—

(a) have a unique number; and

(b) state—

(i) the date of the supply or return of the sample; and

(ii) if the sample is supplied to a dentist, doctor or veterinary surgeon—the name and address of the person to whom the drug is supplied; and

(c) describe the drug and the amount of the drug supplied or returned.

(5) The representative must also keep a record of each restricted drug the representative—

(a) supplies to a dentist, doctor or veterinary surgeon; or

(b) returns to the representative’s employer.

Maximum penalty—40 penalty units.

Returns of transactions

150.(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 received or supplied to, or returned by, the representative and the invoice number for the supply or return.

(3) The wholesale representative must keep a copy of the return.

Maximum penalty—40 penalty units.

Loss or theft of samples to be reported

151. 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.

Production of documents about restricted drugs previously in wholesale representative’s possession

152. (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.

Supply of samples

153.(1) A wholesale representative is authorised, for the representative’s employer, to supply a sample of a restricted drug to a dentist, doctor or veterinary surgeon at a place other than the employer’s business premises.

(2) The representative must not supply a sample of a restricted drug to someone who is not a dentist, doctor or veterinary surgeon.
Maximum penalty—40 penalty units.

Division 3—Particular authorities

Aboriginal and Torres Strait Islander health programs

154. A person employed as a health worker in an Aboriginal or Torres Strait Islander health program is authorised to possess a restricted drug while practising in an Aboriginal or Torres Strait Islander community in an isolated practice area, and administer the drug, under an approved drug therapy protocol, on a doctor’s instruction if the person—

(a) has been assessed by an accredited training provider under the Vocational Education, Training and Employment Act 1991 as being a person who is competent under the National Aboriginal and Torres Strait Islander Skills and Competency Standards to possess the restricted drug; or

(b) has the chief health officer’s written approval to practise in an Aboriginal or Torres Strait Islander community in an isolated practice area.

Anaesthetic assistants and enrolled nurses

155.(1) This section 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 authorised by the Queensland Nursing Council to assist in anaesthetic procedures.

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

**Authorised dispensers**

156. If the chief health officer is reasonably satisfied a person who is employed as a pharmacist’s assistant has had satisfactory training and experience in dispensing restricted drugs, the chief health officer may authorise the person, in writing, to dispense a restricted drug at a dispensary under a pharmacist’s direction and personal supervision.

**Bases and outposts of Royal Flying Doctor Service**

157.(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 instruction.

**Carriers**

158. 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.

Dentists

159. 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) administer a restricted drug to a person while treating the person; or
(d) prescribe a restricted drug for a person’s dental treatment.

Detention centres

160. 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;\(^{37}\) 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.

\(^{37}\) Part 5 (Obtaining restricted drugs on purchase order)
Doctors

161. 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 instruction to administer or supply the drug.

Enrolled nurses

162. To the extent necessary to practise nursing, an enrolled nurse endorsed for the administration of restricted drugs 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, on a doctor’s instruction and under the supervision of a registered nurse or a doctor;\(^38\) or
(c) administer a restricted drug to a person for whom it has been dispensed and under the supervision of a registered nurse or a doctor.

\(^{38}\) An enrolled nurse is authorised to possess a restricted drug that is an anaesthetic only if the nurse is authorised by the Queensland Nursing Council to assist in anaesthetic procedures. See section 155 (Anaesthetic assistants and enrolled nurses).
Environmental health officers

163. 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.

Hospitals

164.(1) This section applies to the following persons—
   (a) the medical superintendent of a hospital;
   (b) the pharmacist in charge of a hospital’s dispensary;
   (c) the director of nursing of a hospital.
(2) A person to whom this section applies is authorised to—
   (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.
(3) However, subsection (2)(c) does not authorise the director of nursing of a hospital to issue restricted drugs for treatment of the hospital’s outpatients.

Inspectors

165. 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.

Restricted drug manufacturer or wholesaler

166.(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;\(^{39}\) 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 restricted drug obtained under paragraph (a) at the manufacturer’s business premises.

Midwives

167.(1) To the extent necessary to practise midwifery, a midwife is authorised to possess a restricted drug at the place where the person practises midwifery and administer the drug—
(a) on a doctor’s instruction;\(^{40}\) or

\(^{39}\) Chapter 1 (Introduction), part 4 (Packing and labelling)

\(^{40}\) A doctor may instruct a midwife to administer or supply a restricted drug to a person only if the doctor reasonably believes an emergency exists or the doctor personally supervises the midwife administering or supplying the drug. See section 206 (Dentist or doctor may instruct someone to administer or supply a restricted drug)
(b) to the person for whom it has been dispensed under the instructions stated by the dispenser.

(2) To the extent necessary to practise midwifery in an isolated practice area, a private practice endorsed midwife is authorised to—

(a) obtain a restricted drug declared by the chief health officer by gazette notice to be a drug to which this subsection applies; or

(b) possess a restricted drug obtained under paragraph (a) at a place where the person practises midwifery; or

(c) administer a restricted drug obtained under paragraph (a) on a doctor’s instruction or under an approved drug therapy protocol.

Mine sites etc.

168.(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) supply 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).
Nursing homes

169.(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.

Optometrists

170. To the extent necessary to practise optometry, an optometrist who has successfully completed an approved 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
(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.

41 Part 5 (Obtaining restricted drugs on purchase order)
Pharmacists

171.(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.

(2) A person who holds a degree of Bachelor of Pharmacy from an Australian university, or is enrolled in a course for the degree of Bachelor of Pharmacy at an Australian university, is authorised to dispense a restricted drug at or from a dispensary under a pharmacist’s direction and personal supervision.

(3) Subsection (2) does not apply to a person who holds a degree of Bachelor of Pharmacy but whose registration as a pharmacist has been cancelled or suspended under the Pharmacy Act 1976, section 25, or a corresponding law of another State, if the cancellation or suspension is in force.

Podiatrists

172. To the extent necessary to practise podiatry, a podiatrist is authorised to—

(a) obtain lignocaine and prilocaine of a strength of 1% or less, other than when combined or used together with adrenalin or another vaso-constrictor drug; or

(b) administer a restricted drug obtained under paragraph (a); or

(c) possess a restricted drug obtained under paragraph (a) at the place where the podiatrist practices podiatry.

Prisons

173.(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.

Queensland Ambulance Service

174.(1) To the extent necessary for performing ambulance duties for the Queensland Ambulance Service, an ambulance officer is authorised to obtain, possess or use the following restricted drugs—

(a) box jellyfish antivenom;

(b) glucagon;

(c) lignocaine;

(d) methoxyflurane;

(e) salbutamol;

(f) a substance containing a mixture of equal volumes of nitrous oxide and oxygen for the maintenance of analgesia.

(2) However, an ambulance officer is authorised to obtain, possess or use a drug mentioned in subsection (1) only if the officer has successfully completed an approved training course in the use of the drug.

(3) To the extent necessary for performing ambulance duties for the Queensland Ambulance Service, an ambulance officer who has successfully completed an approved course of advanced clinical training with the service is authorised to—
(a) obtain a restricted drug declared by the chief health officer by gazette notice to be a drug to which this subsection applies; or

(b) possess a restricted drug obtained under paragraph (a) at a place where the officer is performing ambulance duties; or

(c) administer a restricted drug obtained under paragraph (a) to a patient on a doctor’s instruction or under an approved drug therapy protocol.

(4) An ambulance officer who is undergoing an approved course of advanced clinical training with the Queensland Ambulance Service is authorised to administer a restricted drug to a patient under the supervision of someone who has completed the training and is acting on a doctor’s instruction or under an approved drug therapy protocol.

Registered nurses

175.(1) To the extent necessary to practise nursing, a registered nurse is authorised to possess a restricted drug at the place where the person practises nursing and administer the drug—

(a) on a dentist’s or a doctor’s instruction; or

(b) 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 an isolated practice area, an isolated practice endorsed nurse is authorised to—

(a) obtain a restricted drug; or

(b) possess a restricted drug at a place in the isolated practice area where the person practices nursing; or

(c) administer or supply a restricted drug on a doctor’s instruction or under an approved drug therapy protocol.

42 A dentist or doctor may orally instruct a registered nurse to administer or supply a restricted drug to or for a patient only if the dentist or doctor is personally supervising the nurse. Also, a doctor who reasonably believes an emergency exists may orally instruct a registered nurse to administer or supply a restrictive drug to or for a patient. See section 206 (Dentist or doctor may instruct someone to administer or supply a restricted drug)
(3) To the extent necessary to practise nursing under an immunisation program, a registered nurse endorsed to practice in an immunisation program is authorised to—

(a) possess a vaccine or other restricted drug at a place where the nurse practises under the immunisation program; or

(b) administer a vaccine or other restricted drug—

(i) under the supervision of a doctor, on the doctor’s oral instruction; or

(ii) under an approved drug therapy protocol.

(4) To the extent necessary to practise nursing under a sexual health program, a registered nurse endorsed to practice in a sexual health program is authorised to—

(a) possess a restricted drug at a place where the program is conducted; or

(b) administer or supply a restricted drug—

(i) under the supervision of a doctor, on the doctor’s oral instruction; or

(ii) under an approved drug therapy protocol.

Registered nurses more than 25 km from pharmacy

176.(1) To the extent necessary to practise nursing, a registered nurse in charge of drugs at a hospital that does not employ a pharmacist, and is more than 25 km by road from a pharmacy, may supply a restricted drug to a patient of the hospital on a doctor’s instruction.

(2) To the extent necessary to practise nursing at a hospital, a registered nurse is authorised to supply a restricted drug to an outpatient of the hospital on a doctor’s instruction.

(3) However, a doctor may only give a nurse an instruction under subsection (2) if—

(a) the doctor reasonably believes—

(i) an emergency exists; and

(ii) supplying the drug is essential for the patient’s wellbeing;
(b) there is no doctor or pharmacist on duty at the hospital; and
(c) there is no access to a pharmacy within 25 km by road from the hospital.

(4) A nurse supplying a restricted drug under subsection (2) must not supply more than—
(a) for a restricted drug that is a pre-packed aerosol, cream, liquid or ointment—the minimum standard pack; or
(b) for another restricted drug—3 days supply of the drug.

School dental therapists

177. A school dental therapist performing prescribed duties under the Dental By-Law 1988 is authorised to use 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.

Ship’s master

178. To the extent necessary to comply with the Navigation Act 1912 (Cwlth) or the Transport Operations (Marine Safety) Act 1994, the master of a ship in the State is authorised to—
(a) obtain a restricted drug for use on the ship; or
(b) possess a restricted drug on the ship.

State analysts

179. 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.

Veterinary surgeons

180. 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.

Watchhouse keepers etc.

181. To the extent necessary for ensuring a person held at a watchhouse or police establishment receives a restricted drug lawfully prescribed or supplied for the person as a dispensed medicine, the watchhouse keeper, or a person performing the duties of watchhouse keeper at a police establishment, is authorised to—

(a) possess the restricted drug at the watchhouse 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.
Other authorities may be given

182.(1) The chief health officer may give a person a written authority to administer, issue, obtain, possess, sell or use a restricted drug.

(2) The chief health officer may give a person an authority only if the chief health officer is reasonably satisfied the person—

(a) has a genuine need for the authority; and

(b) is a suitable person to be given the authority.

(3) This section has effect despite anything in division 3.

Example—

Under section 175, a registered nurse is authorised to possess a restricted drug and administer it under certain conditions. Under this section, the chief health officer may extend the nurse’s authorisation by, for example, giving the nurse a written authority to obtain or use a restricted drug in stated circumstances.

When authority not needed

183.(1) A person does not need an authority under this part merely to deliver a restricted drug to a person for whom it has been dispensed, or the person’s agent.

(2) Also, a carer does not need an authority under this part to help a person for whom a restricted drug was supplied as a dispensed medicine take the drug if—

(a) the person requests the carer’s help; and

(b) the carer helps the person to take the drug under the directions on the label attached to the dispensed medicine’s container.
PART 3—REGULATED RESTRICTED DRUGS

Possession etc. of certain regulated restricted drugs

184.(1) A person must not dispense, obtain, possess, prescribe, sell or use a regulated restricted drug unless the person—

(a) dispenses, obtains, possesses, prescribes, sells or uses the regulated restricted drug under an approval; or
(b) for carnidazole—dispenses, obtains, possesses, prescribes, sells or uses carnidazole for the treatment of pigeons; or
(c) for oxolinic acid—dispenses, obtains, possesses, prescribes, sells or uses oxolinic acid for the treatment of fish; or
(d) for a regulated restricted drug other than carnidazole or oxolinic acid—dispenses, obtains, possesses, prescribes, sells or uses the drug for the treatment of animals.

Maximum penalty—80 penalty units.

(2) In this section—

“regulated restricted drug” means 4-aminopyridine, atipamezole, carnidazole, ceftiofur, cephadroxil, 2-(4-chlorophenyl)-(1,2,4) triazolo[5,1-A] isoquinoline, clanobutin, clenbuterol, cloprostenol, deslorelin, detomidine, fenprostalene, flunixin meglumine, fluprostenol, medetomidine, metergoline, milbemycin oxime, nicergoline, oxolinic acid, prostianol, romifidine, sulphamonomethoxine, sulphatroxazole, tiletamine or zolazepam.

Dinoprost and dinoprostone

185. 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 in obstetrics and gynaecology; or
(c) is a registrar in obstetrics and gynaecology working directly under
the supervision of a specialist in obstetrics and gynaecology.

Maximum penalty—80 penalty units.

**Acitretin, etretinate, isotretinoin and thalidomide**

186. A person must not dispense, prescribe, sell or use acitretin, etretinate, isotretinoin or thalidomide for human therapeutic use unless the person—

(a) dispenses, prescribes, sells or uses the acitretin, etretinate, isotretinoin or thalidomide for human therapeutic use under an approval; or

(b) is a specialist in dermatology or internal medicine.

Maximum penalty—80 penalty units.

**Clomiphene, cyclofenil, luteinising hormone and urofollitrophin**

187.(1) A person must not dispense, prescribe, sell or use a regulated restricted drug for human therapeutic use unless the person—

(a) dispenses, prescribes, sells or uses the regulated restricted drug mentioned in subsection (1) under an approval; or

(b) is a specialist in obstetrics and gynaecology or internal medicine.

Maximum penalty—80 penalty units.

(2) In this section—

“**regulated restricted drug**” means any of the following restricted drugs—

(a) clomiphene, cyclofenil or another substance specifically prepared to stimulate ovulation;

(b) luteinising hormone;

(c) urofollitrophin (human follicle stimulating hormone).

**Clozapine**

188. 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 psychiatrist; or

(c) is a registrar in psychiatry working directly under the supervision of a specialist psychiatrist.

Maximum penalty—80 penalty units.

**Exemptions for some acts involving certain regulated restricted drugs**

189.(1) This part does not prevent—

(a) a person dispensing a regulated restricted drug on a lawful prescription written by someone who may prescribe the drug; or

(b) a restricted drug manufacturer or wholesaler selling a regulated restricted drug; or

(c) a person under medical treatment who is lawfully supplied with a regulated restricted drug using the drug in the way directed.

(2) In this section—

“regulated restricted drug” means any of the following 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.
PART 4—PRESCRIBING, DISPENSING AND SELLING RESTRICTED DRUGS

Division 1—Prescribing restricted drugs

Writing prescriptions

190.(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 the prescription—

(a) the prescriber’s name, professional qualifications and address;
(b) the date it is written;
(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 words and 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 doctor prescribes a dose that is more than the official dose—a direction to dispense the higher dose that is underlined and initialled by the doctor;
(i) if a doctor or veterinary surgeon intends that the restricted drug be dispensed more than once—a direction stating the number of

43 Under section 5 of the Act, “official dose” is defined as follows—

‘“official dose”, when used with reference to any drug or other article, means the maximum dose (if any) stated in the British Pharmacopoëia.’.
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’.

(3) All particulars on the prescription (other than the prescriber’s name, professional qualifications and address) must be handwritten.

(4) However, a 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 approved way.

(5) The prescriber must sign the prescription.

(6) If the prescriber amends the prescription, the prescriber must initial and date the amendment.

**Restrictions on writing prescriptions**

191.(1) A prescriber must not write on a prescription in code unless the prescriber has an approval for the code.

Maximum penalty—20 penalty units.

(2) A veterinary surgeon must not write 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 write a prescription for more than the official dose.

Maximum penalty—40 penalty units.

**Oral prescription**

192.(1) If a doctor reasonably believes an emergency exists, the doctor may give a pharmacist an oral prescription for a restricted drug the doctor is authorised to prescribe.
(2) The doctor must immediately write a prescription for the drug and send the prescription to the pharmacist within 24 hours of giving the oral prescription.

Maximum penalty—40 penalty units.

(3) If the pharmacist does not receive the relevant written prescription within 72 hours after being given the oral prescription, the pharmacist must immediately give a written report about the circumstances to the chief health officer.

Maximum penalty—20 penalty units.

**Division 2—Dispensing restricted drugs**

**Conditions of dispensing**

193.(1) A dispenser must not dispense a restricted drug unless—

(a) the drug is dispensed on a prescription that complies with division 1;\(^{44}\) and

(b) the drug dispensed—

(i) conforms with the prescription; or

(ii) is dispensed under section 195.\(^{45}\)

Maximum penalty—60 penalty units.

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

(a) it is written by someone the dispenser reasonably believes is not registered in the State as a dentist, doctor or veterinary surgeon;\(^{46}\) or

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

(c) it appears to the dispenser to have been changed by someone

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\(^{44}\) Division 1 (Prescribing restricted drugs)

\(^{45}\) Section 195 (Dispensing generic drugs)

\(^{46}\) However, see section 196 (Interstate prescriptions).
other than the prescriber; or

(d) it has ‘cancelled’ stamped or written on it; 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 be written on it under section 190 because it is a regulated restricted drug—it does not have ‘approved’ written on it.

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) If a dispenser is satisfied a prescription does not comply with division 1, the dispenser must—

(a) on the front of the prescription, sign the prescription and write ‘cancelled’, the date and the name and address of the dispensary; and

(b) send it to the chief health officer within 14 days after cancelling it.

Maximum penalty—40 penalty units.
Emergency sale of restricted drugs by pharmacist

194.(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 pre-packed 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 sans serif capital letters with a face depth of at least 1.5 mm; and

(ii) ‘emergency supply’ in a colour contrasting with the background colour and in bold sans serif capital letters with a face depth of at least 1.5 mm; and

(iii) the name of the person for whose treatment it is intended; and

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

(v) the date of sale; and

(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.

47 Section 193 (Conditions of dispensing)
(3) The pharmacist in charge of a dispensary must keep a record book (the “emergency supply book”) at each dispensary of which the person is in charge as an owner or employee.

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 who last prescribed the drug.

Maximum penalty—40 penalty units.

Dispensing generic drugs

195.(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 (the “generic drug”).

(2) A dispenser may dispense the generic drug in place of the specified drug 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) 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; and

(d) a determination is in force for the generic drug under section 85(6) of the National Health Act.48 and

48 Section 85 (Pharmaceutical benefits) of the National Health Act.
(e) it is lawful to dispense the generic drug on prescription; and
(f) the person to whom it is dispensed asks for, or agrees to, the dispensing of the generic drug in place of the specified drug.

(3) If a generic drug is dispensed, the dispenser must write the brand name of the generic drug on the front of the prescription and sign the prescription.

Maximum penalty—20 penalty units.

Interstate prescriptions

196.(1) A dispenser may dispense a restricted drug on a prescription that—
(a) reasonably appears to be written by a person who, under the law of another State, is a dentist, doctor or veterinary surgeon; and
(b) otherwise complies with this regulation.

(2) However, this section does not apply to the following restricted drugs—
(a) a regulated restricted drug;
(b) anabolic steroids;
(c) diethylpropion;
(d) ephedrine;
(e) flunitrazapam;
(f) phentermine.

(3) Also, this section applies despite sections 193 to 195.49

Dealing with prescriptions

197.(1) A dispenser must, when dispensing a restricted drug on prescription—
(a) write the date and, for a repeat prescription, the repeat number, on

49 Sections 193 (Conditions of dispensing), 194 (Emergency sale of restricted drugs by pharmacist) and 195 (Dispensing generic drugs)
the front of the prescription; and
(b) write on the prescription—
   (i) the name and address of the dispensary; and
   (ii) cancelled; and
(c) sign the prescription.

Maximum penalty—40 penalty units.

(2) The dispenser must handwrite the date and repeat number.

Maximum penalty—40 penalty units.

(3) If the prescription is for a regulated restricted drug to which sections 185 to 188
apply, the dispenser must send the prescription to the chief health officer within 14 days after dispensing the drug.

Maximum penalty—40 penalty units.

(4) If a dispenser is asked to dispense more of a restricted 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 health officer a written notice about—
   (a) the circumstances in which the dispenser has been asked to dispense the restricted drug; and
   (b) the quantity or volume of the drug dispensed or when it has been dispensed for the person.

(5) Subsections (1)(b)(ii) and (3) apply to a repeat prescription only if the last repeat of the prescription is dispensed.

(6) Subsection (1)(b)(ii) does not apply to a duplicate of a prescription issued under the National Health Act or the Veterans Entitlements Act.

Labelling dispensed medicines

198.(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

50 Sections 185 (Dinoprost and dinoprostone), 186 (Approved drugs—acitretin, etretinate, isotretinoin and thalidomide), 187 (Clomiphene, cyclofenil, luteinising hormone, urofollitrophin) and 188 (Clozapine)
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 1.5 mm.

(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 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

51 Appendix K (Drugs required to be labelled with a sedation warning)
(j) if the medicine’s expiry date is not visible—the medicine’s expiry date; and

(k) for the following restricted drugs, the warning statements given for the drug, printed on a background of contrasting colour and in bold faced sans serif capital letters with a face depth of at least 1.5 mm—

(i) acetretin, adapalene, etretinate, isotretinoin, thalidomide or tretinoin for oral use—‘Warning—causes birth defects. Do not use if pregnant or likely to become pregnant’;

(ii) levocabastine—‘Do not use if pregnant’

(iii) misoprostol—‘Warning—causes birth defects’.

(4) The dispensed medicine must be described by—

(a) its approved name;\(^{52}\) or

(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 restricted drug in the medicine; or

(e) the name of each restricted drug in the medicine as written 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.

Records of restricted drugs dispensed to be kept

199.(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 records must be kept in 1 of the following ways—

\(^{52}\) For the definition “approved name” see part 1 of the standard.
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(a) written entries in a bound book with consecutively numbered pages, made in the order in which the transactions happen;

(b) entries stored in a computer system that has enough capacity and backup capability for the purpose;

(c) another approved way.

(3) Each entry 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 written 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, 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) 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.
PART 5—OBTAINING RESTRICTED DRUGS ON PURCHASE ORDER

Authorised persons to obtain restricted drugs on purchase order

200.(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.

(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.

(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.

Sale of restricted drugs to authorised persons

201.(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
drugs—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, in duplicate, for the restricted drug; and

(c) the purchase order, and duplicate, are signed by the ship’s owner.

Maximum penalty—60 penalty units.

(3) Despite subsection (1), a purchase order or an approval is not needed for the sale of a restricted drug (other than a regulated restricted drug) to a dentist, doctor, pharmacist or veterinary surgeon.

Delivery of restricted drugs

202.(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.

Dealing with purchase orders

203.(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—

(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 send it to the chief health officer within 14 days after selling the drug.

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) However, the person need only send 1 copy of the order to the chief health officer within 48 hours.

(6) 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

Unlawful possession of restricted drugs

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

Maximum penalty—60 penalty units.

Possession by user

205.(1) A person who is lawfully supplied with a restricted drug by a person authorised to supply the 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 supplied.

Maximum penalty—40 penalty units.

Dentist or doctor may instruct someone to administer or supply a restricted drug

206.(1) A dentist who is personally supervising a registered nurse may instruct the nurse to administer or supply a restricted drug to or for a patient.

(2) If a doctor reasonably believes an emergency exists, the doctor may instruct an ambulance officer, midwife or registered nurse to administer or supply a restricted drug to or for a patient.

(3) Also, a doctor who is personally supervising a midwife or registered nurse may instruct the midwife or nurse to administer or supply a restricted drug to or for a patient.
Records of restricted drugs supplied to be kept

207.(1) The director of nursing or registered nurse in charge for a hospital must keep records, as required by this section, of all restricted drugs supplied by a nurse at the hospital under section 176(1) or (2). Maximum penalty—40 penalty units.

(2) The records must be kept in 1 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 approved 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 as written in the prescription; and
   (e) the name and address of the prescriber; 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

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53 Section 176 (Registered nurses more than 25 km from pharmacy)
(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.

**Records—other authorised persons**

208.(1) A person authorised under this chapter to administer, obtain, possess, sell or use a restricted drug must keep the records stated in the authority.

Maximum penalty—20 penalty units.

(2) This section does not apply to records that must be kept under another provision of this chapter.

**Exemption of user from keeping records**

209.(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 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.

**Records not to be changed but may be corrected**

210.(1) A person must not cancel, change or obliterate an entry in a record kept under this section.

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

Storage of restricted drugs generally

211.(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, isolated practice endorsed registered nurse, midwife 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, isolated practice endorsed registered nurse 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—LENGTHY TREATMENT WITH AND DEPENDENCE ON RESTRICTED DRUGS OF DEPENDENCY

Restricted drugs of dependency not to be obtained unless information disclosed to dentist or doctor

212.(1) This section applies to a person who—

(a) consults a dentist or doctor (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 or doctor (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.

Approval needed for treatment of drug dependent person with restricted drugs of dependency

213.(1) A doctor must not, without an approval—

(a) dispense or prescribe a restricted drug of dependency for a person the doctor 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 doctor reasonably believes that it is necessary for the doctor to treat a drug dependent person with a restricted drug, the doctor must give the chief health officer a report in the approved form about the circumstances of the person’s treatment.

Maximum penalty—40 penalty units.

(3) The chief health officer may ask the doctor to give the chief health officer stated additional information about the treatment of the drug dependent person within a stated reasonable time.

(4) The doctor must comply with the request, unless the doctor has a reasonable excuse for not complying with it.

Maximum penalty—20 penalty units.

(5) If the chief health officer is reasonably satisfied that for the welfare of the drug dependent person it is necessary for the doctor to treat the person with a restricted drug of dependency, the chief health officer may give the doctor written approval to administer, dispense, prescribe, supply or use a stated quantity or volume of the restricted drug.
Also, if the chief health officer is reasonably satisfied that for the welfare of the drug dependent person it is necessary for the chief health officer to give the doctor 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 health officer may give the oral approval.

However, if the chief health officer gives the doctor an oral approval, the chief health officer must give the doctor written confirmation of the approval as soon as possible after giving the oral approval.

A doctor to whom an approval has been given about a restricted drug of dependency for a person must not administer, dispense, prescribe or supply a restricted drug to, or use a restricted drug on, the person other than under the approval.

Maximum penalty—60 penalty units.

PART 10—GENERAL

Restricted drugs for animals not to be dispensed etc for human therapeutic use

214. 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.

Restricted drugs for animals not to be administered to humans

215. 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.
False, misleading or incomplete entries

216. 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.

Improper use of prescriptions for restricted drugs

217.(1) A person must not use a prescription for a restricted drug to obtain the drug if the prescription 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 in ink 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

False statements—restricted drugs

218.(1) A person must not make a statement the person knows is false to obtain a restricted drug from a person authorised under this chapter 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.

Unsafe disposal or use of restricted drugs

219. 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 authorised to possess it.

Maximum penalty—60 penalty units.

Advertising of restricted drugs

220.(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 intended for circulation only to the wholesale drug trade or the dental, medical, pharmaceutical or veterinary professions.

Safe keeping of restricted drugs

221. 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.

Keeping records

222. 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

Types of licences

223. The chief health officer may grant or renew the following types of
licences under this chapter—
   (a) poison manufacturer licences;
   (b) poison wholesaler licences;
   (c) general poison licences;
   (d) licences to sell S7 poisons for other than human therapeutic use.

**Licence to state business premises and other particulars**

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

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

(3) For a poison manufacturer licence, the chief health officer 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.

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**Division 2—Poison manufacturer licence**

**Restrictions on grant of poison manufacturer licence**

225. The chief health officer may grant a poison manufacturer licence to a person only if the chief health officer 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.
Poison manufacturer licence

226. 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.

Offence to manufacture S2, S3 or S7 poisons without licence

227. 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 who manufactures the poison for the analyst’s official duties.

Maximum penalty—60 penalty units.

Division 3—Poison wholesaler licence

Restrictions on grant of poison wholesaler licence

228. The chief health officer may grant a poison wholesaler licence to a person only if the chief health officer 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.

Poison wholesaler licence

229.(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).

**Offence to wholesale poisons without licence**

230.(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**

**Restrictions on grant of general poison licence**

231. The chief health officer may grant a general poison licence to a person only if the chief health officer is reasonably satisfied the person—

(a) is a suitable person to sell S2 and S7 poisons; and

(b) intends to sell the poisons at a place more than 25 km by road from a pharmacy.

**General licence**

232. The holder of a general poison licence may sell S2 and S7 poisons.
Section 233
The chief health officer may grant a licence to sell S7 poisons other than for human therapeutic use to a person only if the chief health officer is reasonably satisfied the person is a suitable person to sell the poisons.

Section 234
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

Wholesale and retail sales by manufacturers and wholesalers

Section 235.(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 or S3 poison to—

(i) a dentist, doctor, pharmacist or veterinary surgeon; or
(ii) the director of nursing of an institution; or
(iii) the vice-chancellor of a university; or
(iv) the principal of a college, educational establishment, scientific or public institution; or
(v) a person who uses the poison in a technical process connected with the person’s business, industry or trade; or
(vi) an isolated practice endorsed nurse or private practice endorsed midwife; or

(b) selling an S7 poison by retail—
(i) to a person mentioned in paragraph (a); or
(ii) if a primary producer reasonably satisfies the wholesaler that
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 50 kg or more—to a
corporation holding a mining lease under the Mineral
Resources Act 1989.

(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 written order for the poison before the
sale.
Maximum penalty—40 penalty units.

Other restrictions on sale of poisons

236.(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.

Records of transactions

237.(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 must have 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

Division 1—Preliminary

Types of permits

238. The chief health officer may grant the following permits under this part—

(a) cyanide permits;

(b) strychnine permits.

Division 2—Cyanide

Permits for cyanide purchased outside the State

239. If a person obtains cyanide from someone outside the State, the person—

(a) must apply for a permit immediately after the cyanide comes into the person’s possession in the State; and
(b) may possess the cyanide for the time reasonably necessary to obtain a cyanide permit under this part.

Maximum penalty—40 penalty units.

Permit conditions

240.(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 a quantity of cyanide that is more than the quantity stated in the permit; or

(v) possess cyanide after the permit expires.

Maximum penalty—40 penalty units.

Division 3—Strychnine

Permits for strychnine purchased outside the State

241. If a person obtains strychnine from someone outside the State, the person—

(a) must apply for a permit immediately after the strychnine comes into the person’s possession in the State; and
(b) may possess the strychnine for the time reasonably necessary to obtain a strychnine permit under this part.

Maximum penalty—40 penalty units.

Permit conditions

242.(1) The holder of a strychnine permit must keep the permit with the person while the person possesses strychnine.

Maximum penalty—20 penalty units.

(2) Also, the holder of a strychnine permit—

(a) must keep the strychnine 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 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 a quantity of strychnine that is more than the quantity stated in the permit; or

(v) possess strychnine after the permit expires.

Maximum penalty—40 penalty units.
PART 3—AUTHORITIES

Division 1—Preliminary

Authority needed for S2, S3 or S7 poison

243.(1) A person must not dispense, prescribe or sell an S2, S3 or S7 poison unless the person is, under this chapter, authorised 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 chapter, authorised to administer the poison.

Maximum penalty—40 penalty units.

(3) If a person may only administer, dispense, prescribe or sell a poison in a stated place or under stated conditions, the person must not administer, dispense, prescribe or sell the poison in another place or in contravention of the conditions.

Maximum penalty—40 penalty units.

Division 2—Particular authorities

Aboriginal and Torres Strait Islander health programs

244. A person employed as a health worker in an Aboriginal or Torres Strait Islander health program is authorised to administer an S2 or S3 poison under an approved drug therapy protocol, on a doctor’s instruction while practising in an Aboriginal or Torres Strait Islander community in an isolated practice area, if the person—

(a) has been assessed by an accredited training provider under the *Vocational Education, Training and Employment Act 1991* as being a person who is competent under the National Aboriginal and Torres Strait Islander Skills and Competency Standards to possess the restricted drug; or

(b) has the chief health officer’s written approval to practise in an
Aboriginal or Torres Strait Islander community in an isolated practice area.

**Authorised dispensers**

245. If the chief health officer is reasonably satisfied a person who is employed as a pharmacist’s assistant has had satisfactory training and experience in dispensing poisons, the chief health officer may authorise the person, in writing, to do the following at a dispensary—

(a) dispense an S2, S3 or S7 poison under a pharmacist’s direction and personal supervision;
(b) sell an S3 poison under a pharmacist’s direction and personal supervision;
(c) sell an S2 or S7 poison.

**Bases and outposts of Royal Flying Doctor Service**

246. The person in charge of an outpost of the Royal Flying Doctor Service of Australia outpost may administer or supply an S2 or S3 poison at the outpost under a doctor’s instruction.

**Cane Protection and Productivity Board**

247. A Cane Protection and Productivity Board under the *Sugar Industry Act 1991* is authorised to sell an S7 poison for—

(a) the control of plant diseases in sugar cane; or
(b) the destruction of insect pests, vermin or weeds.

**Dental hygienists**

248. A dental hygienist performing prescribed duties under the *Dental By-law 1988* is authorised to use fluorides that are S3 poisons and the following S2 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.

Dentists

249. To the extent necessary to practise dentistry, a dentist is authorised to administer, prescribe or supply an S2 or S3 poison.

Detention centres

250.(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.

Doctors

251. 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 instruction to administer or supply the poison.

Enrolled nurses

252. To the extent necessary to practise nursing, an enrolled nurse endorsed to administer an S2 or S3 poison is authorised to administer an S2 or S3 poison under the supervision of a registered nurse or a doctor.

Inspectors

253. 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.

Local governments

254. A local government is authorised to—

(a) under the Act or the Rural Lands Protection Act 1985—sell an S7 poison for use for disinfection or weed or vermin destruction; or

(b) sell sodium fluoride tablets of a concentration not more than 2.2 mg of sodium fluoride per tablet.

Midwives

255.(1) To the extent necessary to practise midwifery, a midwife is authorised to—

(a) administer an S2 or S3 poison; or

(b) supply, on a doctor’s instruction, an S2 or S3 poison to a patient of a hospital more than 25 km by road from a pharmacy.

(2) To the extent necessary to practise midwifery, a private practice endorsed midwife is authorised to supply an S2 or S3 poison to a person under the care of the midwife in an isolated practice area.

Optometrists

256. To the extent necessary to practise optometry, an optometrist is authorised to administer an S2 poison.

Pharmacists

257.(1) To the extent necessary to practise pharmacy, a pharmacist is authorised to dispense or sell an S2, S3 or S7 poison at a dispensary.

(2) A person who holds the degree of Bachelor of Pharmacy of an Australian university, or is a student enrolled in the course leading to the degree of Bachelor of Pharmacy of an Australian university, is authorised to, at a dispensary—
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(a) dispense an S2, S3 or S7 poison under a pharmacist’s direction and personal supervision; or

(b) sell an S3 poison under a pharmacist’s direction and personal supervision; or

(c) sell an S2 or S7 poison.

(3) Subsection (2) does not apply to a person whose registration as a pharmacist has been cancelled or suspended under the Pharmacy Act 1976, section 25, or a corresponding law of another State if the cancellation or suspension is still in force.

Pharmacy assistants

258. A competent adult employee of a pharmacist is authorised to sell an S2 or S7 poison at a dispensary.

Physiotherapists

259. To the extent necessary to practise physiotherapy, a physiotherapist is authorised to administer an S2 poison.

Podiatrists

260. To the extent necessary to practise podiatry, a podiatrist is authorised to administer an S2 poison.

Prisons

261.(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.
Queensland Ambulance Service

262. 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.

Registered nurses

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

(a) administer an S2 or S3 poison; or

(b) supply, on a doctor’s instruction, an S2 or S3 poison to a patient of a hospital that is more than 25 km by road from a pharmacy.

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

(a) obtain a S2 or S3 poison; or

(b) supply a S2 or S3 poison to or for a person requiring treatment in the isolated practice area.

(3) To the extent necessary to practise nursing at a hospital, a registered nurse is authorised to supply an S2 or S3 poison to an outpatient of the hospital on a doctor’s instruction.

(4) However, a doctor may only give a nurse an instruction under subsection (3) if—

(a) the doctor reasonably believes—

(i) an emergency exists; and

(ii) supplying the poison is essential for the patient’s wellbeing; and

(b) there is no doctor or pharmacist on duty at the hospital; and

(c) there is no access to a pharmacy within 25 km by road from the hospital.

(5) A nurse given an instruction under subsection (3) must not supply more than—

(a) for an S2 or S3 poison that is a pre-packed aerosol, cream, liquid
or ointment—the minimum standard pack; or
(b) for another S2 or S3 poison—3 days supply of the poison.

School dental therapists

264. A school dental therapist performing prescribed duties under the Dental By-Law 1988 is authorised to use fluorides that are S3 poisons and the following S2 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.

State analysts

265. To the extent necessary to perform an analyst’s official duties, a State analyst is authorised to—
(a) manufacture a poison; or
(b) use a poison or destroy it.

Veterinary surgeons

266. 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.

Watchhouse keepers etc.

267. To the extent necessary for ensuring a person held at a watchhouse or police establishment receives an S2 or S3 poison lawfully prescribed or supplied for the person, the watchhouse keeper, or the person performing the duties of watchhouse keeper at a police establishment, is authorised to issue 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.
Employees and other persons authorised

268. 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.

Other authorities for an S2 or S3 poison may be given

269.(1) The chief health officer may give a person a written authority to administer, supply or use an S2 or S3 poison.

(2) The chief health officer may give a person a written authority only if the chief health officer is reasonably satisfied the person—

(a) has a genuine need for the authority; and

(b) is a suitable person to be given the authority.

(3) This section has effect despite anything in division 2.

Example—

Under section 267,\textsuperscript{54} a registered nurse is authorised to administer a poison. Under this section, the chief health officer may extend the nurse’s authorisation by, for example, giving the nurse a written authority to supply or use a poison under stated conditions.

When authority is not needed

270. Also, a carer does not need an authority under this part to help a person for whom an S2 or S3 poison was supplied as a dispensed medicine take the poison if—

(a) the person requests the carer’s help; and

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

\textsuperscript{54} Section 267 (Registered nurses)
PART 4—REGULATED POISONS

Prohibition on dispensing etc. regulated poisons

271.(1) A person must not dispense, obtain, possess, prescribe, sell or use a regulated poison unless the person—

(a) dispenses, obtains, possesses, prescribes, sells or uses the regulated poison under an approval; 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 permit for cyanide; or

(d) is a pharmacist and obtains or possesses strychnine for sale to a person who has a permit for strychnine; or

(e) obtains or uses cyanide or strychnine under a permit.

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 that is registered by the National Registration Authority under the Agricultural and Veterinary Chemicals Act 1994 (Cwlth) for use as a pesticide, for its registered purpose.

Fluoroacetic acid in baits

272.(1) The following persons may supply prepared baits to another person (the “user”) to control declared animals under the Rural Lands Protection Act 1985—

(a) an inspector; or

(b) an authorised person under the Rural Lands Protection Act 1985.

(2) The baits must not contain more than 0.03% fluoroacetic acid.

(3) The user may possess and use the baits only under the written conditions given to the user by the inspector or authorised person.
(4) 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.

(5) 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 (5)—80 penalty units.

Prohibition on possession etc. of certain poisons

273. A person must not dispense, obtain, possess, prescribe, sell or use the following poisons in preparations for external application for human therapeutic use—
   (a) tetrachlorosalicylanilide;
   (b) 5-bromo-4-chlorosalicylanilide;
   (c) fenticlor.

Maximum penalty—80 penalty units.

PART 5—DISPENSING OR SELLING POISONS

Licence or authority needed for dispensing, prescribing or selling S2, S3 or S7 poisons

274.(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 275.55

Maximum penalty—40 penalty units.

55 Section 275 (Dispensing generic poisons)
(2) Also, a pharmacist must not sell an S3 poison to a ship’s master unless the pharmacist—

(a) is satisfied it is necessary to comply with the *Navigation Act 1912* (Cwlth) or the *Transport Operations (Marine Safety) Act 1994*; and

(b) receives a purchase order for the poison signed by the ship’s master and the ship’s owner.

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.

**Dispensing generic poisons**

275.(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 (the “generic poison”).

(2) The dispenser may dispense the generic poison in place of the specified poison 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) the schedule of pharmaceutical benefits issued by the Commonwealth department within which the National Health Act is administered states that the specified poison and the generic poison are equivalent; and

(d) a determination is in force under section 85(6) of the National Health Act for the generic poison; and

(e) it is lawful to dispense the generic poison on prescription; and

(f) the person for whom the poison is prescribed, or for whose

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56 *Section 85 (Pharmaceutical benefits) of the National Health Act.*
(3) If the poison dispensed is the generic poison, the dispenser must write the brand name of the generic poison on the front of the prescription and sign the prescription.

Maximum penalty—20 penalty units.

Labelling dispensed medicines

276.(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 1.5 mm.

(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

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

(4) The dispensed medicine must be described by—

(a) its approved name; or

(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.

Sale of S3 poisons

277.(1) A pharmacist, or a person who is authorised to dispense a poison under a pharmacist’s direction and personal supervision, (the “seller”) must not sell an S3 poison unless the seller is reasonably satisfied—

(a) of the purchaser’s identity; and

(b) the purchaser has a therapeutic need for the poison.

57 Appendix K (Drugs required to be labelled with a sedation warning)
58 For the definition “approved name” see part 1 of the standard.
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 medicine 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 letter with a face depth of at least 1.5 mm 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) the name and address of the dispensary; 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 an S3 poison to a ship’s master for use for first aid on the ship.
Restrictions on packs of organo-phosphorus compounds

278.(1) A person must not sell a liquid or emulsive preparation in a container containing less than 500 mL 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 750 gm of an S7 organo-phosphorus compound.

Maximum penalty—60 penalty units.

Restriction on paraquat preparations

279.(1) A person must not sell a preparation containing paraquat in a container of less than 5 L of the preparation.

Maximum penalty—80 penalty units.

(2) A person must not or 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.

Obtaining, possession or use of cyanide

280. A person must not obtain, possess or use cyanide unless the person—

(a) is authorised, under this regulation, to obtain, possess or use cyanide; or

(b) holds a cyanide permit.\(^59\)

Maximum penalty—80 penalty units.

\(^59\) See part 2.
Restriction on sale of cyanide

281.(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 poison manufacturer or wholesaler who sells cyanide to another licensed seller of poisons or a pharmacist.

(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 authority to obtain cyanide.

Obtaining, possession or use of strychnine

282. A person must not obtain, possess or use strychnine unless the person—
   (a) is authorised, under this regulation, to obtain, possess or use strychnine; or
   (b) holds a strychnine permit.

Maximum penalty—80 penalty units.
Restriction on sale of strychnine

283. (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 poison manufacturer or wholesaler who sells strychnine to another licensed seller of poisons or a pharmacist.

(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 authority to obtain strychnine.

PART 6—STORAGE OF POISONS

Storage of poisons

284. (1) A person must not store a poison for sale within reach of children.
(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 health officer 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 150°C at 101–103 kPa 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

Records of sales of poisons

285.(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 an invoice that has a unique number.
(2) The person selling the S7 poison must include the following particulars in the poisons sale book or invoice—

(a) the date of the sale;
(b) the name and quantity or volume of the poison sold;
(c) the purpose for which the poison is required;
(d) the purchaser’s name and address;
(e) the purchaser’s signature;
(f) if the order for the poison was a telephone or written order—a note about the way the order was placed.

Maximum penalty—20 penalty units.

(3) The person must not use the poisons sales book for another purpose.

Maximum penalty—20 penalty units.

PART 8—GENERAL

Prohibition on dispensing or supplying poisons to child under 16

286.(1) A person (the “supplier”) must not dispense or supply an S2, S3, S6 or S7 poison to a child under 16 unless the supplier—

(a) is a doctor; or
(b) a pharmacist acting on a prescription or a doctor’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 unless the supplier is a doctor, nurse or veterinary surgeon who, under this chapter, may supply an S2 or S3 poison.

Maximum penalty—40 penalty units.

(3) A nurse must not supply an S2 or S3 poison to a child under 16
unless the nurse has a doctor’s instruction to supply the poison to the child. Maximum penalty—40 penalty units.

**False, misleading or incorrect entries**

287. 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.

**Poisons for animals not to be dispensed etc. for human therapeutic use**

288. 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.

**Poisons for animals not to be administered to humans**

289. 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.

**Unsafe disposal of poisons**

290.(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, water course 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 authority granted by the chief health officer or a local government; or

(b) under the Rural Lands Protection Act 1985; or

(c) for a Cane Protection and Productivity Board—under the Sugar Industry Act 1991.

(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 authorised to possess it.

Maximum penalty—40 penalty units.

Labels and containers

291.(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.

Advertising of poisons

292.(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 intended for circulation only in the dental, medical, pharmaceutical or veterinary professions or the wholesale poison trade.

(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 licensed.
or authorised under this chapter 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.

Safe keeping of poisons

293. (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.

Embalming

294. 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.

Hawking of poisons

295. 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.

Samples of poisons

296. A person must not distribute a sample of a poison in a street or from place to place.

Maximum penalty—40 penalty units.
**Colouring of grain baits**

297. 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 way approved by the chief health officer.

Maximum penalty—40 penalty units.

**Vaporisers and other devices**

298.(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 approved 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 1 gm per day when fully charged with the poison; and

(b) is approved for the purpose by the chief health officer.

Maximum penalty—40 penalty units.

**Prohibition of sale of chalk etc containing poison**

299. 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.
Use of food or drink containers for poisons prohibited

300. A person must not use, or allow to be used, a food or drink container to hold a poison.

Maximum penalty—40 penalty units.

Fireworks

301. A person must not manufacture or sell fireworks containing arsenic.

Maximum penalty—20 penalty units.

Keeping records

302. 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—INSPECTORS

Inspector not required to deliver portion of drug or poison seized

303.(1) This section applies if, under section 132(1)(g) of the Act, an inspector seizes a controlled drug, restricted drug or poison.

(2) The inspector must—

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60 Section 132 (Powers of officers) of the Act.
(a) immediately seal the drug or poison and label it for identification; and

(b) for—

(i) a controlled drug—deliver or send it to a State analyst as soon as practicable; or

(ii) a restricted drug or poison—deliver or send it to a State analyst as soon as practicable or keep it in a secure place.

(3) Section 132 of the Act, so far as it relates to the dividing, marking, sealing, fastening up or delivery, does not apply to the drug or poison.

(4) This section expires 1 year after it commences.

Inspector may serve notice to comply

304.(1) If an inspector believes, on reasonable grounds, that a person has contravened this regulation, the inspector may give the person a written notice (a “notice to comply”) under this section.

(2) A notice to comply must state—

(a) the act or omission comprising the contravention; and

(b) the action the person must take to rectify the alleged contravention; and

(c) the day or time by which the person must take the action (the “due date”).

(3) The time between when the notice to comply is given to the person and the due date must be reasonable, having regard to the action the person must take.

(4) The person must comply with the notice, unless the person has a reasonable excuse for not complying with it.

Maximum penalty—40 penalty units.

(5) A person who receives a notice to comply may not be prosecuted for the alleged contravention unless the person does not comply with the notice by the due date.

(6) A person may be prosecuted for a contravention of this regulation
even though the person has not received a notice to comply in relation to the contravention.

PART 2—GENERAL

Language of documents

305.(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.

False or misleading information

306.(1) A person must not—

(a) state anything to an inspector that the person knows is false or misleading in a material particular; or

(b) omit from a statement made to an inspector anything without which the statement is, to the person’s knowledge, misleading in a material particular.

Maximum penalty—60 penalty units.

(2) It is enough for a complaint against a person for an offence against subsection (1) to state that the document was to the person’s knowledge false or misleading, without stating which.
False, misleading or incomplete documents

307.(1) A person must not give to an inspector a document containing information that the person knows is false, misleading or incomplete in a material particular.

Maximum penalty—60 penalty units.

(2) Subsection (1) does not apply to a person who, when giving the document—

(a) informs the inspector of the extent to which the document or record is false, misleading or incomplete; and

(b) gives the correct information to the inspector if the person has, or can reasonably obtain, the correct information.

(3) A complaint against a person for an offence against subsection (1) is sufficient if it states that the document was false, misleading or incomplete to the person’s knowledge, without stating which.

Attempts to commit offences

308.(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 461, applies to subsection (1).

PART 3—TRANSITIONAL AND REPEAL PROVISIONS

Definitions for pt 3

309. In this part—

“existing approval” means an approval under the repealed regulation and in force immediately before the commencement.

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61 The Criminal Code, section 4 (Attempts to commit offences)
“existing authority” means an authority, licence or permit under the repealed regulation and existing in force immediately before the commencement.

“repealed regulation” means the *Poisons Regulation 1973*.

**Reference to repealed regulation**

310.(1) A reference in an Act or instrument to the repealed regulation may be taken to be a reference to this regulation.

(2) Subsection (1) is a law to which the *Acts Interpretation Act 1954*, section 20A applies.

**Transitional provision about approvals and authorities**

311.(1) An application for an approval or authority made under the repealed regulation that is not dealt with before the commencement is taken to have been made under this regulation.

(2) An approval given under the repealed regulation, and in force immediately before the commencement, is taken to have been given under this regulation.

(3) A person who holds an existing authority mentioned in column 1 of the following table, immediately before the commencement, is taken to hold the corresponding licence under this regulation set out opposite in column 2 of the table.

<table>
<thead>
<tr>
<th>column 1</th>
<th>column 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>licence to manufacture dangerous drugs</td>
<td>controlled drug manufacturer licence</td>
</tr>
<tr>
<td>licence to sell dangerous drugs by wholesaler</td>
<td>controlled drug wholesaler licence</td>
</tr>
<tr>
<td>licence to manufacture restricted drugs</td>
<td>restricted drug manufacturer licence</td>
</tr>
<tr>
<td>licence to sell restricted drugs by wholesale</td>
<td>restricted drug wholesaler licence</td>
</tr>
<tr>
<td>licence to manufacture poisons</td>
<td>poison manufacturer licence</td>
</tr>
</tbody>
</table>
licence to sell poisons by wholesale
  general licence
licence to sell poisons for other than
  human therapeutic use
wholesale representative’s authority
  permit to obtain, be in possession
  of, and use cyanide
permit to obtain, be in possession
  of, and use strychnine

Records

312. A record book or other record of transactions in controlled drugs, restricted drugs or poisons (however described) kept by a licensee or other person holding an authority under the repealed regulation, is taken to be a record book or record of transactions under this regulation.

Legal proceedings

313.(1) A legal proceeding started under the repealed regulation, but not finished before the commencement, may be continued and finished under this regulation.

(2) Subsection (1) is a law to which the Acts Interpretation Act 1954, section 20A applies.

Repeal

314. The Poisons Regulation 1973 is repealed.

Expiry

315. This part expires on the day it commences.
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 prescriptions)
section 86 (Controlled drugs book to be kept)
section 87 (Entries to be made in controlled drugs book)
section 89 (Authorised persons to obtain controlled drugs on purchase order)
section 90 (Sale of controlled drug 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 AUTHORITIES AND RENEWAL FEES FOR LICENCES**

section 17

<table>
<thead>
<tr>
<th>Application Description</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Application for, or renewal of, controlled drug manufacturer licence</td>
<td>$235.00</td>
</tr>
<tr>
<td>2. Application for, or renewal of, restricted drug manufacturer licence</td>
<td>$235.00</td>
</tr>
<tr>
<td>3. Application for, or renewal of, controlled drug wholesaler licence</td>
<td>$235.00</td>
</tr>
<tr>
<td>4. Application for, or renewal of, restricted drug wholesaler licence</td>
<td>$235.00</td>
</tr>
<tr>
<td>5. Application for, or renewal of, poison manufacturer licence</td>
<td>$116.00</td>
</tr>
<tr>
<td>6. Application for, or renewal of, poison wholesaler licence</td>
<td>$116.00</td>
</tr>
<tr>
<td>7. Application for, or renewal of, general licence</td>
<td>$65.00</td>
</tr>
<tr>
<td>8. Application for, or renewal of, licence to sell poisons for purposes other than human therapeutic use</td>
<td>$45.00</td>
</tr>
<tr>
<td>9. Application for wholesale representative authority</td>
<td>$50.00</td>
</tr>
</tbody>
</table>
APPENDIX 3

PERSONS AUTHORISED TO OBTAIN
CONTROLLED OR RESTRICTED DRUGS ON
PURCHASE ORDER

PART 1—CONTROLLED DRUGS

sections 89 and 200

<table>
<thead>
<tr>
<th>column 1</th>
<th>column 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. ambulance officer</td>
<td>the Commissioner of the Queensland Ambulance Service</td>
</tr>
<tr>
<td>2. controlled drug manufacturer or wholesaler</td>
<td>the licensee or an adult employee authorised by the licensee to sign</td>
</tr>
<tr>
<td></td>
<td>purchase orders for controlled drugs</td>
</tr>
<tr>
<td>3. Royal Flying Doctor Service of Australia base or</td>
<td>the person in charge of the base or outpost</td>
</tr>
<tr>
<td>outpost in Queensland</td>
<td></td>
</tr>
<tr>
<td>4. a ship in Queensland</td>
<td>the ship’s master</td>
</tr>
<tr>
<td>5. person who has an authority under section 74</td>
<td>the authorised person or a competent adult authorised by the person to</td>
</tr>
<tr>
<td>(Other authorities may be given)</td>
<td>sign the order</td>
</tr>
<tr>
<td>6. a person who has an approval under chapter 2, part</td>
<td>the person</td>
</tr>
<tr>
<td>3 (Regulated controlled drugs)</td>
<td></td>
</tr>
<tr>
<td>7. detention centre</td>
<td>the detention centre’s manager</td>
</tr>
<tr>
<td></td>
<td>the detention centre’s director of nursing or medical superintendent</td>
</tr>
<tr>
<td></td>
<td>the pharmacist in charge of the</td>
</tr>
</tbody>
</table>
APPENDIX 3 (continued)

8. hospital

   detention centre’s dispensary

   the hospital’s medical superintendent

   the hospital’s director of nursing

   the pharmacist in charge of the hospital’s dispensary

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 or medical superintendent

    the pharmacist in charge of the prison’s dispensary

11. university

    the university’s vice-chancellor

PART 2—RESTRICTED DRUGS

<table>
<thead>
<tr>
<th>column 1</th>
<th>column 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>ambulance officer</td>
</tr>
<tr>
<td>2.</td>
<td>restricted drug manufacturer or wholesaler</td>
</tr>
<tr>
<td>3.</td>
<td>Royal Flying Doctor Service of Australia base or outpost in Queensland</td>
</tr>
<tr>
<td>No.</td>
<td>Description</td>
</tr>
<tr>
<td>-----</td>
<td>------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>4.</td>
<td>a ship in Queensland</td>
</tr>
<tr>
<td>5.</td>
<td>mine</td>
</tr>
<tr>
<td></td>
<td>petroleum well</td>
</tr>
<tr>
<td></td>
<td>petroleum field production facility</td>
</tr>
<tr>
<td></td>
<td>petroleum pipeline transport facility</td>
</tr>
<tr>
<td>6.</td>
<td>person who has an authority under section 183 (Other authorities may be given)</td>
</tr>
<tr>
<td>7.</td>
<td>person who has an approval under chapter 3, part 3 (Regulated restricted drugs)</td>
</tr>
<tr>
<td>8.</td>
<td>detention centre</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>hospital</td>
</tr>
<tr>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>nursing home</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>prison</td>
</tr>
</tbody>
</table>
APPENDIX 3 (continued)

the prison’s medical superintendent
or director of nursing

the pharmacist in charge of the
prison’s dispensary

12. university  the university’s vice-chancellor
APPENDIX 4

COMPUTER GENERATED PRESCRIPTIONS

sections 79(5) and 190(4)

PART 1—PRELIMINARY

Prescription form must be preprinted

1.(1) A computer generated 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.

Only prescriber may generate prescription

2. The computer program must allow only the prescriber to generate a computer generated prescription.

Changes not to be made

3. A computer generated prescription for a controlled or restricted drug must be produced without changes.

Requirements on generation of prescription

4.(1) When a 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
APPENDIX 4 (continued)

record for the person, or the person’s animal, for whom it is written to be matched;

(d) the particulars mentioned in section 79(3)(a) printed at the bottom of 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.

PART 2—CONTROLLED DRUGS

System messages

5.(1) The computer program must generate a message that tells the prescriber that the prescriber must write the particulars mentioned in section 79(3)(e) to (m) on the prescription form in ink.

(2) The computer system must also tell the prescriber that only 1 item may appear on the prescription form.

Particulars in a prescription that a computer may generate

6. The particulars mentioned in section 79(3)(b), (c) and (d) may, for a computer generated prescription for a controlled drug, be generated by the computer.
APPENDIX 4 (continued)

PART 3—RESTRICTED DRUGS

Particulars in a prescription that a computer may generate

7. The particulars mentioned in section 190(2)(b) to (l) may, for a computer generated 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”

Aramac, Aurukun, Balonne, Bamaga, Barcoo, Bendemere, Bouli, Bulloo, Burke, Calliope, Carpentaria, Cloncurry, Cook, Croydon, Diamantina, Doomadgee, Etheridge, Herberton, Hinchinbrook, Hopevale, Isisford, Jericho, Kowanyama, Lockhart River, Mareeba, McKinlay, Millmerran, Mornington Island, Mount Isa, Murweh, Napranum, Perry, Pormpuraaw, Tara, Torres, Warroo, Woorabinda, Wujalwujal
APPENDIX 6

MINIMUM REQUIREMENTS FOR CONTROLLED DRUG RECEPTACLES

sections 118(1)(a) and 119(1)(a)

PART 1—CABINETS

Body requirements

1.(1) The body of a cabinet must be constructed of a single layer of mild steel plate at least 10 mm 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.

Door requirements

2.(1) The door of a cabinet must be constructed of mild steel plate at least 10 mm thick.

(2) When the cabinet door is closed, the door must—

(a) fit flush with the body of the cabinet; and
APPENDIX 6 (continued)

(b) have a clearance around the door of not more than 1.5 mm.

(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).

Lock requirements

3.(1) A cabinet lock must be—

(a) a 6 lever pick-proof key lock; or

(b) a lock mechanism of a level of security equal to, or greater than a 6 lever pickproof 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.

Hinge requirements

4. 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.
Mounting requirements

5.(1) The cabinet must be mounted by 1 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 health officer may approve another way of mounting that is of equal or greater security.

Type 1 mounting

6.(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 12.7 mm 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.

Type 2 mounting

7.(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 12.7 mm diameter; and
   
   (b) be fixed as far into the concrete or brickwork as is practicable.

Type 3 mounting

8.(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
APPENDIX 6 (continued)

wall.

(2) The bolts and screws must be of at least 12.7 mm diameter.

Type 4 mounting

9.(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 12.7 mm diameter.

PART 2—IN–FLOOR SAFES

Application of part

10.(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.

In-floor safe

11. An in-floor safe must—

(a) have a body constructed—

(i) of mild steel plate that is continuously welded to prevent
APPENDIX 6 (continued)

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 pickproof lock; or

(ii) a lock mechanism that gives a level of security equal to, or greater than a 6 lever pickproof lock; or

(iii) a tamper-proof combination lock; and

(c) be embedded in reinforced concrete at least 100 mm thick.

PART 3—ABOVE GROUND SAFES

Certain safes taken to be a secure place

12.(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 305 kg, is taken to be a secure place.

(2) An above ground safe weighing less than 305 kg is taken to be a secure place only if it complies with this part.

Body of safe

13.(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 12.7 mm 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.

Safe door

14. The door of an above ground safe must—
   (a) be constructed of steel plate at least 10 mm 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.

Safe lock

15. The lock of an above ground safe—
   (a) must be—
       (i) a 6 lever pickproof lock; or
       (ii) a lock mechanism that gives a level of security equal to, or greater than a 6 lever pickproof 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.

Anchoring

16.(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.
APPENDIX 6 (continued)

(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 12.7 mm diameter.

(5) If the floor is a timber floor, the safe must be anchored by cup-head bolts of at least 12.7 mm diameter, penetrating through the timber framework of the floor, steel cyclone type washers measuring 50 mm x 50 mm, 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 12.7 mm 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
   • 4,4’-methylenebis [2-chloroaniline]
   • mirex
   • phospides, metallic
   • 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 approved research purposes)—
   • acrolein
   • allyl alcohol
APPENDIX 7 (continued)

- ethylene oxide
- HCB
- methyl bromide
- nicotine
- orthe-tolidine
- propylene oxide
- tetrachloroethane
- vinyl chloride.

4. The following S7 poisons (other than for use for industrial or manufacturing purposes or for analytical or approved 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
- captan
- 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
- dinitroresol
- dinitrophenol
APPENDIX 7 (continued)

- dinoseb
- folpet
- hydrocyanic acid and cyanide
- maduramicin
- mercury
- methacrifos
- phosphorus
- strychnine
- 2, 2’, 6, 6’-tetraisopropyl-diphenyl-carbodiimide (stabaxol)
- trichloroisocyanuric acid.

5. The following S7 poisons (other than for use for analytical or approved 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 health officer)
- halogenated dibenzofurans (other than as a contaminant in proportions not greater than a proportion fixed by the chief health officer)
- nitrofen
- pyrinuron.

6. The following S7 poisons (other than for use for industrial or
APPENDIX 7 (continued)

manufacturing purposes)—

- brodifacoum
- bromadioline
- calciferol
- cholecalciferol
- coumatetralyl
- difenacoum
- epichlorohydrin
- halofuginone
- hydrofluoric acid
- hydrosilicofluoric acid
- methoxyethylmercuric acetate
- methoxyethylmercuric chloride
- phenylmercuric acetate
- sulcofuron.

7. The following S7 poisons (other than for use by an authorised person under the Rural Lands Protection Act 1985)—

- fluoroacetamide
- fluoroacetic acid (other than for use in prepared baits containing 0.03% of 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. S9 poisons.

9. A poison included in appendix C of the standard.
APPENDIX 8

RESTRICTED DRUGS OF DEPENDENCY

appendix 9, definition “restricted drugs of dependency”

acetyldihydrocodeine
adiphenine
alprazolam
amyl nitrite
amylobarbitone
apomorphine
barbiturates
benzhexol
benzdiazepine
bromazepam
chloral hydrate
chlordiazepoxide
clobazam
clonazepam
clorazepate
codeine
dexfenfluramine
dextromethorphan
dextropropoxyphene
dextroprphan
diazepam
APPENDIX 8 (continued)

diethylproprion
dihydrocodeine
ephedrine
ethylene
fenfluramine
flunitrazepam
ketamine
lorazepam
mazindol
medazepam
meprobamate
midazolam
nitrazepam
oxazepam
pentobarbitone
phentermine
pholcodine
propylhexedrine
temazepam
triazolam
zolazepam
APPENDIX 9

DICTIONARY

section 3

“administer”, for a controlled or restricted drug or a poison, means give a person a single treatment dose of the drug or poison.

“ambulance officer” see Ambulance Service Act 1991.

“approval” means an approval given in writing by the chief health officer.

“approved” means approved in writing by the chief health officer.

“authorised person” means a person who may perform a stated act involving—

(a) a controlled drug—under chapter 2, part 2; or
(b) a restricted drug—under chapter 3, part 2; or
(c) a regulated controlled drug—under chapter 2, part 3; or
(d) a regulated restricted drug—under chapter 3, part 3; or
(e) a poison—under chapter 4, part 3; or
(f) a regulated poison—under chapter 4, part 4.

“authority” see section 14.

“business premises”, of a licensee or holder of an authority, means the premises stated in the relevant licence or authority under chapter 2, 3 or 4 as the business premises of the licensee or authority holder.

“carer” means a person who is under a lawful duty to provide someone else with the necessaries of life and includes someone working for a person under a lawful duty to provide someone else with the necessaries of life.

“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.62

“controlled drug wholesaler” means a person who holds a controlled drug wholesaler licence.63

“controlled drugs book” see section 86.

“controlled drugs register” see section 50.

“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.


“dispensary” see 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

62 Controlled drug manufacturer licences are granted under chapter 2 (Controlled drugs).

63 Controlled drug wholesaler licences are granted under chapter 2 (Controlled drugs).
APPENDIX 9 (continued)

(b) supplied for human therapeutic use by a doctor who may supply
the medicine while practising medicine; 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 document approved by the chief health
officer and 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.

“endorsed”, for an enrolled or registered nurse or a midwife, means
endorsed under the Nursing Act 1992 for a purpose.

“expiry day” see section 19.

“immunisation program” means—
(a) an immunisation program carried out by a district health service; or
(b) an immunisation program carried out by a local government; or
(c) an approved immunisation program.

“inspector” means an inspector appointed under section 27 of the Act.64

64 Section 27 (Appointment of officers)
“institution” means a detention centre, hospital, nursing home or prison.

“isolated practice area” means—

(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 endorsed”, for a registered nurse or midwife, means a nurse or midwife who may, under the Nursing Act 1992, practise nursing or midwifery in an isolated practice area.

“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 manufacturer; 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.
APPENDIX 9 (continued)

“manufacture” see section 4.


“midwife” see Nursing Act 1992.

“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.

“nursing home” means a nursing home licensed under the Act.65

“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.

“opium” means any form of opium, other than the alkaloids noscapine and papaverine.

“optometrist” see Optometrists Act 1974.

“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.

“pharmacist” see Pharmacy Act 1976.

“pharmacy” see Pharmacy Act 1976.

“podiatrist” see Podiatrists Act 1969.

“poison” means an S2, S3, S5, S6, S7 or S9 substance, and includes a substance 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

65 Nursing homes are licensed under part 3, division 11A of the Act.
APPENDIX 9 (continued)

(d) a licence to sell S7 poisons for other than human therapeutic use.

“poison manufacturer” means a person who holds a poison manufacturer licence.66

“poison wholesaler” means a person who holds a poison wholesaler licence.67

“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.

“prescribe” means make a written direction (other than a purchase order) authorising a dispenser to dispense a stated controlled or restricted drug or a stated poison.

“prescriber” means a person who, under this regulation, is authorised to prescribe a controlled or restricted drug or a poison.

“prescription” means a prescriber’s direction (other than a purchase order) 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.

“private practice endorsed midwife” means a midwife authorised under the Nursing Act 1992 to practise midwifery in a private practice.

“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).

66 Poison manufacturer licences are issued under chapter 4 (Poisons).

67 Poison wholesaler licences are issued under chapter 4 (Poisons).
APPENDIX 9 (continued)

“prison” see Corrective Services Act 1988.

“purchase order” means an order for the supply of a controlled or restricted drug or a poison, placed by an authorised person under chapter 2, 3 or 4.

“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” see Nursing Act 1992.

“regulated drug” means—
(a) a controlled drug to which chapter 2, part 3 applies; or
(b) a restricted drug to which chapter 3, part 3 applies.

“regulated poison” means a poison in appendix 7 of this regulation.

“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—
(a) an S4 substance other than solasodine; and
(b) alkaloids and alkaloidal glycosides of plants of the genus solanum for human therapeutic use.

“restricted drug manufacturer” means a person who holds a restricted drug manufacturer licence.68

“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

68 Restricted drug manufacturer licences are issued under chapter 3 (Restricted drugs).
APPENDIX 9 (continued)

wholesaler licence.69

“S2” to “S9” see section 5.

“sell” includes offer to sell.

“sexual health program” means—

(a) sexual or reproductive health program carried out by a district health service; or

(b) an approved sexual or reproductive health program.


“specialist” see Medical Act 1939.

“standard” means the Standard for the Uniform Scheduling of Drugs and Poisons prepared by the Australian Health Ministers’ Advisory Council and published by the Commonwealth.70

“State analyst” means an analyst appointed under section 27 of the Act.71

“strychnine”, for chapter 4, part 2, means strychnine as an S7 poison.

“supply”, for a controlled or restricted drug or a poison, does not include administering, dispensing or prescribing the drug or poison but does include offer to supply.

“transaction” see section 6.

“university” includes a university college.

“Veterans Entitlements Act” means the Veterans Entitlements Act 1990 (Cwlth).

“wholesale” means sell for resale.

“wholesale representative” means a person who holds a wholesale

69 Restricted drug wholesaler licences are issued under chapter 3 (Restricted drugs).

70 A copy of the standard may be purchased at the Australian Government Bookshop, Adelaide Street, Brisbane.

71 Section 27 (Appointment of officers) of the Act.
APPENDIX 9 (continued)

representative authority.72

“written instruction” includes any of the following documents signed and dated by a doctor, but does not include a purchase order—

(a) a written direction or instruction (other than a prescription);
(b) a written entry on a patient’s medical records;
(c) a standing order.

ENDNOTES

1. Made by the Governor in Council on 19 December 1996.
2. Notified in the gazette on 20 December 1996.
3. Laid before the Legislative Assembly on . . .
4. The administering agency is the Department of Health.

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72 Wholesale representative authorities are issued under chapter 3 (Restricted drugs)