

## Collaborative Practice Agreements

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Through collaborative practice agreements the Nevada Legislature expanded the scope of services Nevada-registered pharmacists can provide to patients, including as part of an interdisciplinary team. The requirements of a valid collaborative practice agreement are found in Nevada Revised Statutes (NRS) 639.2623 and NRS 639.2627, which allow pharmacists to engage in the collaborative practice of pharmacy and in collaborative drug therapy management pursuant to a collaborative practice agreement.

A collaborative practice agreement is a written agreement made between one or more practitioners and pharmacists that authorizes a pharmacist to perform tests to address chronic disease states or public health issues. Through a collaborative practice agreement, a pharmacist may engage in the collaborative practice of pharmacy, as defined in NRS 639.00525, or in collaborative drug therapy management, as defined in NRS 639.0051, where a pharmacist may initiate, monitor, modify, or discontinue patients' drug therapy.

To enter into a valid collaborative practice agreement, a practitioner must be licensed and in good standing in the State of Nevada. The practitioner also must maintain an ongoing relationship with the patient, who must give informed, written consent before the pharmacist may provide services to that patient pursuant to the collaborative practice agreement.

Additionally, the collaborative practice agreement must specify the disease state(s) a pharmacist may help treat, the types of decisions a pharmacist may make and the procedure(s) a pharmacist may engage pursuant to the collaborative practice agreement. The agreement must also include a description as to how a practitioner will communicate any necessary medical information and diagnosis to the pharmacist and monitor clinical outcomes. Further, the agreement must state that the practitioner is authorized to override the agreement to protect the patient and accomplish treatment goals. The pharmacist must also comply with the requirements documented in the collaborative practice agreement concerning how a pharmacist must document, maintain records, and communicate with the practitioner and patients with regards to patient care, treatment, and adverse effects. NRS 639.2623 section 3 (a), (b), and (c); NRS 639.2627 section 1 (a), (b) and (c). Of note, "a practitioner may not enter a collaborative practice agreement with a pharmacist for the management of controlled substance." NRS 639.2623 (5).

Further, collaborative practice agreements are only effective for up to one year after the effective date. To renew the agreement, all parties must review, make any necessary changes and sign an updated agreement. These agreements must be submitted to the State Board of Pharmacy for approval in both a written and electronic form before they are effective.

### Finally, Registered Pharmacist Can Now Collect Specimens!

Prior to July 1, 2017, registered pharmacists were not allowed to manipulate a patient to collect a specimen for laboratory testing. Now that practice is allowed. Do not let that detour you! Collecting specimens is not as bad as you might think. A registered pharmacist may use a fingerstick, oral or nasal swab to perform CLIA-waived tests. NRS 639.0747; NRS 652.210. For

example, a registered pharmacist can now perform blood glucose levels, INR, influenza and strep throat testing. Registered pharmacists still are not allowed to collect urine or stool specimens.