

Calling on Pharmacists to Improve NC's Public Health Needs

Did you know...
North Carolina ranks in the **bottom one-half to one-third** of the nation on many measures of public health and welfare

S575/H512: Pharmacists Improve Public Health Needs is designed to address this problem by allowing pharmacists to have limited prescriptive authority for medications pursuant to statewide protocols

Naloxone, epinephrine, glucagon

Life-saving medications prescribed to those patients at risk for opioid overdose, severe allergic reaction or hypoglycemia



Post Exposure Prophylaxis (PEP)

Within 72 hours after possible HIV exposure



Immunizations

Approved by the FDA and in accordance with the ACIP for individuals age 6 years and older



Test & Treat

Pharmacists may initiate treatment based upon point of care testing or screening for minor, nonchronic health conditions



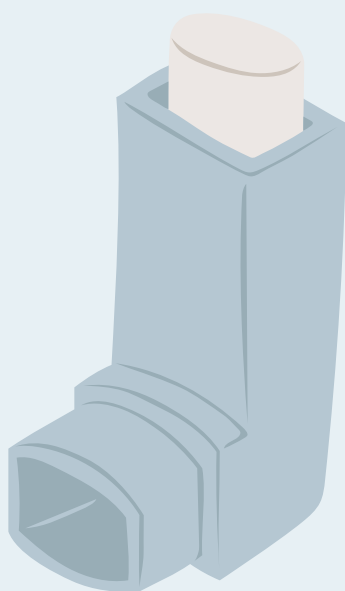
Tobacco Cessation Medications

With current FDA approval to increase accessibility



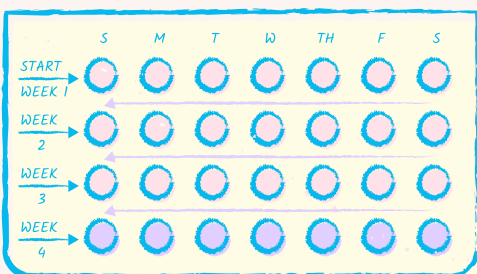
Short-acting bronchodilators

Prescribed to those patients with established respiratory disease, in need of access to a rescue inhaler



Hormonal Contraceptives

Injectable or self administered, provided the patient completes an assessment consistent with the United States Medical Eligibility Criteria for Contraceptive Use



And More..

Including prenatal vitamins, dietary fluoride supplements, preventative travel medications (not requiring a diagnosis), spacers and peak flow meters

