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DIVISION OF PUBLIC HEALTH

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**MEMORANDUM 2017-03**

To: Directors of Nursing, Nursing Supervisors and Public Health Nurses and DPH Nurse Consultants

From: Phyllis M. Rocco, MPH, BSN, RN  
Chief Public Health Nurse

Subject: Distribution of Over the Counter (OTCs) Meds by Registered Nurses (RNs)

Date: Sept. 20, 2017

This memo is to clarify the rules regarding recommendation and distribution of over the counter meds by registered nurses.

- Based on the NC BON Position Statement it is within the RN scope of practice to recommend OTC pharmaceutical products and non-prescriptive devices for an identified health-related need of an individual or client provided the agency's policies/procedures permit the RN to perform this activity, and the nurse has the knowledge to make such nursing decisions safely according to accepted standards and to monitor the outcomes of her/his actions.
- Based on the NC BON Position Statement it is **not** within the LPN scope of practice to recommend OTC pharmaceutical products and non-prescriptive devices for an identified health-related need of an individual or client.

However, when it comes to the question "May the RN distribute an OTC drug?" neither the Board of Pharmacy (BOP) nor the NC Board of Nursing (BON) regulate the distribution of OTCs. After consultation with the NC BON, the DPH Pharmacist and the NC BOP, our best practice recommendation is to:

- a) develop a policy and procedure re: which meds you have on site for distribution and guidelines re: to whom they should be offered and for what purposes.

- b) develop a "distribution log", just in case there is ever a drug recall. Do not merge with the dispensing log. Labeling of OTC meds is not required if they are distributed as packaged nor do you need to have the client sign for the OTC.
- c) Document in the medical record that an OTC was distributed due to xxxx. Use per manufacturer's instructions.
- d) Store all OTC meds in a safe place away from children. There is no law that requires OTC meds to be locked however Accreditation will want to see that all meds are secured from client access.

Examples:

- A common side effect of immunizations is a local reaction at the injection site, including running a low-grade fever. A RN should know this information if he/she is the nurse administering immunizations and based on his/her knowledge should be able to safely recommend and provide a client with an unopened package of ibuprofen, acetaminophen or naproxen sodium with the recommendation to take this OTC following the manufacturer's instructions for soreness and fever.
- Client comes in for birth control pill pickup. Reports having some cramps around the time of her periods. The nurse should have the knowledge that cramping is a normal experience for some females with menses, and can recommend taking an OTC pain reliever such as naproxen sodium or ibuprofen and provide the client with a bottle of one or the other if the agency chooses to stock that med.
- Prenatal Vitamins
  - OTC prenatal vitamins may be distributed to pregnant clients by a RN because the nurse has the understanding and knowledge that pregnant women often are deficient in getting all the daily vitamin and iron requirements through food intake alone.
  - Prescription prenatal vitamins must be ordered for the client either individually by the provider or through a standing order and must be DISPENSED by the RN.

**Remember:** Any re-packaging or re-labeling of an OTC med would be considered "dispensing" and a Standing Order would be required and all BOP rules re: labeling and dispensing must be followed. Only RNs who have taken the nurse dispensing course may dispense medications from the approved formulary.

Cc: Amanda Fuller Moore