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chapter M-9, r. 13

Regulation respecting the activities contemplated in section 31 of the Medical Act which may be engaged in by classes of persons other than physicians

Medical Act (chapter M-9, s. 19, 1st par., subpar. b).

Professional Code (chapter C-26, s. 94.1).

Replaced, O.C. 84-2018, 2018 G.O. 2, 679; eff. 2018-03-08; see chapter M-9, r. 23.1.

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LIST OF CLASSES OF MEDICATIONS NURSE PRACTITIONERS SPECIALIZED IN PRIMARY CARE ENGAGED IN ADDITIONAL MEDICAL ACTIVITIES MAY PRESCRIBE

SCHEDULE IV

1. The purpose of this Regulation is to determine, among the professional activities that may be performed by physicians, those that pursuant to the terms and conditions set out in the Regulation, may be engaged in by a specialized nurse practitioner contemplated in the Regulation respecting Ordre des infirmières et infirmiers du Québec classes of specialties related to the performance of acts contemplated in section 36.1 of the Nurses Act (chapter I-8, r. 8) or another person.

O.C. 996-2005, s. 1; O.C. 344-2012, s. 7.

DIVISION I

(Replaced)

O.C. 996-2005, Div. I; O.C. 344-2012, s. 7.

2. (*Replaced*).

O.C. 996-2005, s. 2; O.C. 344-2012, s. 7.

3. (Replaced).

O.C. 996-2005, s. 3; O.C. 344-2012, s. 7.

4. (Replaced).

O.C. 996-2005, s. 4; O.C. 344-2012, s. 7.

DIVISION II

SPECIALIZED NURSE PRACTITIONER

§ 1.—*Authorized activities*

5. A nurse who holds a specialist's certificate in any of the classes of specialties stipulated in the Regulation respecting Ordre des infirmières et infirmiers du Québec classes of specialties related to the performance of acts contemplated in section 36.1 of the Nurses Act (O.C. 997-2005, 2005-10-26) may perform the following medical activities, under the terms and conditions stipulated in Subdivision 2:

- (1) prescribing diagnostic examinations;
- (2) using diagnostic techniques that are invasive or entail risks of injury;
- (3) prescribing medications and other substances;
- (4) prescribing medical treatment; and
- (5) using techniques or applying medical treatments that are invasive or entail risks of injury.

O.C. 996-2005, s. 5.

§ 2. — Terms and conditions for authorization

6. *A nurse practitioner specialized in neonatology is authorized to perform an activity stipulated in section 5, in neonatology, under the following terms and conditions:*

(1) he or she engages in that activity with a newborn infant, whether premature or full-term, who presents a pathology requiring admission to intensive care or intermediate neonatal care during the infant's stay in a

hospital centre within the meaning of the Act respecting health services and social services (chapter S-4.2) where tertiary care in neonatology is provided;

(2) this activity must be the subject of a rule governing medical care or a rule governing the use of medicines that is in force in this hospital centre, unless this involves prescribing a medication contemplated in Schedule II or III to the Regulation respecting the terms and conditions for the sale of medications (chapter P-10, r. 12) and is performed in accordance with the provisions of Division II of the Règlement sur les normes relatives aux ordonnances faites par un médecin (chapter M-9, r. 25);

(3) the nurse must maintain his or her skills in neonatal resuscitation by obtaining an attestation in resuscitation issued by the Canadian Paediatric Society.

O.C. 996-2005, s. 6; O.C. 668-2007, s. 2; O.C. 80-2014, s. 1.

7. A nurse practitioner specialized in nephrology is authorized to perform an activity stipulated in paragraphs 1, 3 or 4 of section 5, in nephrology, under the following terms and conditions:

(1) he or she engages in that activity with a patient suffering from renal failure who requires care and services in predialysis, hemodialysis, peritoneal dialysis or kidney transplantation in a hospital centre within the meaning of the Act respecting health services and social services (chapter S-4.2) where dialysis care is offered with the aid of a nephrology department;

(2) this activity must be the subject of a rule governing medical care or a rule governing the use of medicines that is in force in this hospital centre, unless this involves prescribing a medication contemplated in Schedule II or III to the Regulation respecting the terms and conditions for the sale of medications (chapter P-10, r. 12), and is performed in accordance with the provisions of Division II of the Règlement sur les normes relatives aux ordonnances faites par un médecin (chapter M-9, r. 25), with the necessary modifications.

O.C. 996-2005, s. 7; O.C. 668-2007, s. 3.

8. *A nurse practitioner specialized in cardiology is authorized to perform an activity stipulated in section 5, in cardiology, under the following terms and conditions:*

(1) he or she engages in that activity with a hospitalized or ambulatory adult clientele requiring care and services for heart failure, in secondary prevention, in post-surgery including heart transplants, in a congenital heart disease clinic, in hemodynamics, or in electrophysiology, in a hospital centre within the meaning of the Act respecting health services and social services (chapter S-4.2), where cardiology care and services are dispensed by at least 3 cardiologists, excluding locum cardiologists;

(2) this activity must be the subject of a rule governing medical care or a rule governing the use of medicines that is in force in this hospital centre, unless this involves prescribing a medication contemplated in Schedule II or III to the Regulation respecting the terms and conditions for the sale of medications (chapter P-10, r. 12), and is performed in accordance with the provisions of Division II of the Règlement sur les normes relatives aux ordonnances faites par un médecin (chapter M-9, r. 25);

(3) this nurse must maintain his or her skills in cardiovascular resuscitation by obtaining a biennial instructor's level attestation of training in cardiovascular resuscitation issued by a master instructor recognized by the Heart and Stroke Foundation of Québec according to the standards detailed in the Handbook of Emergency Cardiovascular Care: for Healthcare Providers published by Heart and Stroke Foundation.

O.C. 996-2005, s. 8; O.C. 668-2007, s. 4.

§ 2.1. — Terms and conditions for authorization of primary care

O.C. 668-2007, s. 5.

8.1. A nurse practitioner specialized in primary care is authorized to engage in an activity stipulated in section 5, in primary care, under the following terms and conditions:

- (1) he or she engages in that activity with an ambulatory clientele:
- (a) requiring the evaluation of the person's health or detection of a health problem;
- (b) presenting a common health problem;
- (c) presenting a stable chronic disease;
- (d) requiring the monitoring of a pregnancy.
- (2) he or she engages in that activity in partnership with a family physician.

When the nurse practises elsewhere than in a centre operated by an institution within the meaning of the Act respecting health services and social services (chapter S-4.2) or the Act respecting health services and social services for Cree Native persons (chapter S-5), the partnership must be recognized in a written agreement.

O.C. 668-2007, s. 5.

8.2. For the purposes of this Division, the term "common health problem" means a health problem that presents the following characteristics:

- (1) a relatively high incidence in the community;
- (2) clinical symptoms and signs usually affecting a single system;
- (3) an absence of deterioration in the general condition of the person;
- (4) usually a quick and favourable course.

O.C. 668-2007, s. 5.

8.3. For the purposes of this Division, "stable chronic disease" means a disease that has been the subject of a diagnosis by a physician and of a medical treatment plan giving the expected results.

O.C. 668-2007, s. 5.

8.4. The nurse practitioner specialized in primary care engages in his or her activities under the following terms and conditions:

- (1) he or she prescribes diagnostic examinations stipulated in Schedule I to this Regulation;
- (2) he or she uses the following diagnostic techniques:
- (a) pelvic examination;
- *(b) rectal touch;*
- (c) cervico-vaginal smear;
- (d) radial arterial puncture;

(e) puncture of olecranon bursa;

(3) he or she prescribes medications and other substances in accordance with Schedule II to this Regulation and the provisions of Division II of the Règlement sur les normes relatives aux ordonnances faites par un médecin (chapter M-9, r. 25), with the necessary modifications;

- (4) he or she prescribes the following medical treatments:
- (a) cryotherapy, except on the face and internal genital organs;
- *(b) eye irrigation;*
- (c) fluorescein staining;
- (d) irrigating ears;
- (e) oxygenotherapy;
- (f) peripheral venous access;
- (g) cleansing enema;
- (h) bladder catheterization;
- (*i*) *nasogastric tube*;

(j) immobilization of a limb using an open plaster or fibreglass splint in the absence of fracture, for a short term;

- (5) *he or she uses the following medical techniques or applies the following medical treatments:*
- (a) suture a wound, except below the fascia or in the presence of underlying lesions;
- (b) incise and drain an abscess above the fascia;
- (c) install an esophageal tracheal double cannula airway device;
- (d) partial onychectomy;
- (e) removal of superficial cutaneous lesions:
- molluscum pendulum or contagiosum;
- *keratosis with a scalpel;*
- small lipoma 1 cm;
- (f) install an IUD, except in a nulliparous woman;
- (g) remove an IUD.

O.C. 668-2007, s. 5; O.C. 1318-2011, s. 1.

8.5. The nurse practitioner specialized in primary care must request the intervention of the partner physician in the following cases:

(1) his or her evaluation does not allow the clear identification of the common health problem, the criteria to initiate the medical treatment are not clear or the situation exceeds the skills of the nurse practitioner specialized in primary care, specifically in the presence of one of the following factors:

(a) a persistent or recurrent sign or symptom to which no cause can be assigned;

(b) a sign, a symptom or a result of medical imaging or laboratory analysis suggesting the presence of an undiagnosed chronic or systemic disease;

(c) a symptom or an analysis result demonstrating the decline or alteration of the function of an organ or a system;

(d) a symptom, a sign or a laboratory analysis result suggesting a recurrent or persistent infection;

- (e) an atypical manifestation of a common disease or an unusual reaction to treatment;
- (f) a sign or a symptom of change of behaviour which cannot be attributed to a specific cause.

(2) he or she notes that the growth or development of a newborn, an infant or a child is abnormal or observes the presence of a sign or a symptom of disease in the newborn or the infant of 3 months old or less other than thrush, seborrheic dermatitis, diaper rash or tear duct obstruction;

(3) there is a suspicion of abuse or the presence of a sign of abuse or a symptom of a sexually transmitted infection in a child;

- (4) a chronic condition becomes worse, especially in the presence of one of the following factors:
- (a) a symptom or a result of laboratory analysis indicating deterioration of a patient;
- (b) the unexpected deterioration of the condition of a patient already treated for a diagnosed disease.
- (5) a woman more than 32 weeks pregnant;

(6) his or her evaluation allows the identification of a symptom, a sign or a result of medical imaging or laboratory analysis suggesting a risk for the pregnant woman or the unborn child.

(7) the situation imperils the life or the physical or mental integrity of a person.

Further to the intervention of the partner physician, he or she may continue the practice of the activities stipulated in section 8.4 within the limits of the medical treatment plan determined by this physician.

O.C. 668-2007, s. 5.

8.6. Besides the activities provided in section 8.4, the nurse practitioner specialized in primary care who practises in an isolated region facility may engage in the following activities:

(1) medical activities in advanced cardiac life support, advanced pediatric life support, advanced neonatal life support and advanced trauma life support including the prescription of drugs and substances;

- (2) perform an emergency delivery and treat post-partum hemorrhages;
- (3) use the following medical treatments:
- (a) gastric lavage;
- (b) posterior nasal packing;
- (c) immobilization of a fracture;

(d) reduction of a dislocation or subluxation of a closed fracture or a compound fracture or, when there is neurovascular involvement, of an open fracture.

(4) prescribe the drugs and substances listed in Schedule III.

A drug prescribed under the first paragraph is prescribed in accordance with the provisions of Division II of the Règlement sur les normes relatives aux ordonnances faites par un médecin (chapter M-9, r. 25), with the necessary modifications.

For the purpose of this subdivision, "an isolated region facility" means a primary care facility or a dispensary listed in Schedule IV.

O.C. 365-2008, s. 1.

8.7. Subparagraph 1 of the first paragraph of section 8.1 and section 8.5 do not apply to the nurse practitioner specialized in primary care who engages in the activities provided in subparagraphs 1 to 4 of the first paragraph of section 8.6 in an isolated region facility.

However, to engage in an activity provided in subparagraph 1 of the first paragraph of section 8.6, the nurse must acquire and maintain his or her skills, as appropriate:

(1) in Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS) by obtaining an attestation issued by the Heart and Stroke Foundation of Québec in accordance with the standards of the Heart and Stroke Foundation of Canada;

(2) in neonatal resuscitation by obtaining an attestation issued by the Canadian Paediatric Society;

(3) in trauma nursing care (Trauma Nursing Core Course (TNCC)) by obtaining an attestation issued by the National Emergency Nurses' Affiliation (NENA, Canada) and the Emergency Nurses Association (ENA, United States).

Besides all of the training provided in the second paragraph, the nurse, in order to engage in the activities provided in subparagraphs 1 to 4 of the first paragraph of section 8.6, must hold an attestation issued by the Ordre des infirmières et infirmiers du Québec that he or she has successfully spent a nine-week clinical training practicien structured as follows:

- (1) 5 weeks of emergency care at a hospital with a high-volume emergency ward;
- (2) 2 weeks of pediatric emergency care at a hospital with a high-volume emergency ward;
- (3) 2 weeks in the delivery room at a hospital which offers obstetric services of level II or III.

During the training period provided in the third paragraph, the nurse may, in the presence of a physician, engage in the professional activities contemplated by first paragraph of section 8.6 to the extent they are required for the purpose of completing this training practicien.

O.C. 365-2008, s. 1; O.C. 80-2014, s. 2.

§ 3. — Other authorized persons

9. A specialized nurse practitioner student contemplated in the Regulation respecting Ordre des infirmières et infirmiers du Québec classes of specialties related to the performance of certain acts contemplated in section 36.1 of the Nurses Act (chapter I-8, r. 8) may perform an activity stipulated in section 5.

Besides the terms and conditions stipulated in subdivisions 2 and 2.1, a specialized nurse practitioner student performs this activity under the following terms and conditions:

(1) the activity is performed in a determined site pursuant to the Regulation respecting Ordre des infirmières et infirmiers du Québec classes of specialties related to the performance of acts contemplated in section 36.1 of the Nurses Act under the supervision of a medical specialist of the specialty contemplated with the collaboration of a specialized nurse practitioner or, failing that, a nurse who has at least 3 years of relevant clinical experience;

(2) the activity is performed insofar as it is required to complete the program in which he or she is enrolled or, as the case may be, for the purpose of completing a training period or training for recognition of an equivalence.

O.C. 996-2005, s. 9; O.C. 668-2007, s. 6; O.C. 1318-2011, s. 2; O.C. 80-2014, s. 3.

10. A specialized nurse practitioner candidate who holds an attestation of exercise issued pursuant to the Regulation respecting the classes of specialization of the Ordre des infirmières et infirmiers du Québec for the activities referred to in section 36.1 of the Nurses Act (chapter I-8, r. 8) to be engaged in may perform an activity referred to in section 5.

In addition to the terms and conditions provided for in subdivisions 2 and 2.1, a specialized nurse practitioner candidate performs the activity under the following terms and conditions:

(1) in a centre operated by an institution within the meaning of the Act respecting health services and social services (chapter S-4.2) or by an institution within the meaning of the Act respecting health services and social services for Cree Native persons (chapter S-5) where a director of nursing care is appointed;

(2) in a medical office, medical clinic, dispensary or other facility offering primary care, to the extent that the nurse is employed by an institution within the meaning of the Act respecting health services and social services or the Act respecting health services and social services for Cree Native persons where a director of nursing care is appointed and where supervision of nursing care provided by the specialized nurse practitioner candidate is under the responsibility of the director of nursing care of the institution;

(3) the medical activities are performed under the supervision of a physician of the specialty referred to, with the collaboration of a specialized nurse practitioner or, failing that, a nurse who has at least 3 years of relevant clinical experience;

(4) the medical activities are performed during the period in which the nurse is eligible for the examination prescribed for the speciality.

O.C. 996-2005, s. 10; O.C. 668-2007, s. 7; O.C. 80-2014, s. 4.

DIVISION III

FINAL

11. This Regulation replaces the Regulation respecting the activities contemplated in section 31 of the Medical Act which may be performed by classes of persons other than physicians (O.C. 769-2004, 2004-08-10).

O.C. 996-2005, s. 11.

12. (*Omitted*).

O.C. 996-2005, s. 12.

SCHEDULE I

- (s. 8.4, par. 1)
- (1) RADIOLOGICAL EXAMINATIONS

(1) head and neck

- \cdot mandibula
- · nasal bone

(2) *chest*

- · lungs
- thorax (rib cage)

(3) *spine*

- · cervical spine
- · dorsal spine
- · lumbosacral spine

(4) upper limbs

- \cdot scapula
- · shoulder
- \cdot clavicle
- humerus
- \cdot elbow
- · forearm
- wrist
- \cdot hand
- · fingers

(5) *lower limbs*

- · hip
- femur
- · knee and patella
- · leg
- \cdot ankle

• foot

 \cdot toes

· heel bone (calcaneum)

(6) abdomen

 \cdot abdomen

(7) miscellaneous

mammography

osteodensitometry

(2) ULTRASOUND EXAMINATIONS

(1) breast (thorax)

· breast ultrasonography as part of an abnormal screening mammogram

 \cdot ultrasonography of the breast of a woman who is nursing, a woman who is pregnant and a woman under 30 years of age presenting a palpable mass in her breast

(2) abdomen

· abdominal ultrasound

• pelvic ultrasound

(3) obstetrics

· obstetrical ultrasound

(4) genital organs

• ultrasound of scrotum

(5) surface ultrasound

· peripheral venous system

(3) OTHER DIAGNOSTIC TESTS

· Resting electrocardiogram

· Pulmonary function tests (spirometry, peak expiratory flow, FEV1)

· Ambulatory monitoring of blood pressure (ABPM)

(4) LABORATORY ANALYSES

(1) microbiology

(a) fresh vaginal state

(b) cultures

· expectorations

- \cdot throat
- · urine
- · cervical
- \cdot urethral
- \cdot stools
- purulent discharge

(c) specimens for viral testing

• flu

• herpes simplex

• rotavirus

· respiratory synctyial virus

(d) testing

- · for C. Difficile
- · for BK in expectoration (tuberculosis)
- · for pinworms
- for parasites in stools

(e) serologie

- · hepatitis A, B, C antigens or antibodies
- · Elisa syphilis test
- non-syphilis test: VDRL
- · HIV antibody
- · herpes and chlamydia by immunofluorescence method
- · C-reactive protein excluding ultrasensitive
- · mono test
- · skin or nail mycosis
- (2) biochemistry/blood
- \cdot amylase
- prostatic specific antigen (PSA)

- · apolipoprotein B (Apo-B)
- · bilirubin, direct and total
- \cdot calcium
- · chlorides
- · creatine phosphor-kinase (CPK)
- \cdot creatinine
- · assays of phenobarbital, lithium, carbamazepine, theophylline, digoxin, dilantin, valproic acid
- · hormonal assays:
- -follicle-stimulating hormone (FSH)
- luteinizing hormone (LH)
- thyreotropic hormone (TSH)
- vitamin assays:
- vitamin B12
- —folic acid
- · gamma glutamyl transferase (GGT)
- · glycaemia
- · orally provoked hyperglycemia
- glycated aemoglobin HbA1c
- · iron binding capacity
- · iron, ferritin
- · lactose tolerance test
- · presence of lead in the blood
- \cdot lipase
- \cdot lipid check-up
- · arterial and capillary gas
- · alkaline phosphatase
- \cdot phosphorous
- · electrolytes
- total protein

- · prealbumin and albumine
- transaminase
- · uric acid
- · sweat test
- street and date-rape drugs and blood alcohol level testing
- · occult blood in stools
- · *βhCG (qualitative)*
- · *βhCG (quantitative)*
- magnesium

(3) biochemistry/urine

- \cdot urinanalysis
- · microalbuminuria on urination or 24-hour urine collection
- · pregnancy test
- · 24-hour creatinine clearance
- · street and date-rape drugs
- enzyme technique testing:
- chlamydia
- gonorrhoea

(4) cytology

- · cervico-vaginal smear
- · spermogram
- test for sperm, post-vasectomy or in vaginal fluid
- (5) *hematology*
- · haemogram
- · coagulogram
- · prothrombin time (PT RNI)
- activated partial thrombin time (PPT or APPT)
- · reticulocytes countocytes
- \cdot sedimentation rate

- · blood group determination (crossmatch test)
- (6) antenatal screening
- · anticytomegalovirus antibody
- toxoplasmosis antibody
- · B-19 parvovirus
- \cdot rubeola antibody
- · anti-varicella antibody
- · alpha-fetoprotein, estradiol
- trisomy 21
- (7) pathology
- · superficial cutaneous lesions
- D. 668-2007, a. 8; O.C. 365-2008, s. 2; O.C. 1318-2011, s. 3.

SCHEDULE II

(s. 8.4, subpar. 3)

LIST OF CLASSES OF MEDICATIONS NURSE PRACTITIONERS SPECIALIZED IN PRIMARY CARE MAY PRESCRIBE WITH OR WITHOUT RESTRICTION

This list is based on the classification used by the Régie de l'assurance maladie du Québec to establish the list of medications.

Specifications

Р	Can be prescribed, renewed or stopped for a 12-month period unless there is a limit indicated.
D	Car be manually according to the original data to maintain
R	Can be prescribed according to the original dose to maintain treatment, provided that the medication in question has already been prescribed for the patient by the partner physician (renewal). Maximum duration of 12 months. Cannot be ceased.
А	Can be prescribed as dose adjustment provided that the medication in question had been prescribed for the patient by the partner physician and the physician has established a medical treatment plan (as part of joint follow-up). Cannot be ceased.

Specifications

4: 00	Antihistamine Drugs	Р	
8: 00	Anti-infective Agents		
8: 08	Mebendazole	Р	(orally only)
8: 12.06	Cephalosporins	Р	(orally only)
	Ceftriaxone sodium	Р	(IM single dose only)
8: 12.07 only)	Cefoxitin		P (IM single dose
8: 12.12	Macrolides	P	(orally only)
8: 12.16	Penicillins	Р	(orally only)
	Penicillin G (Benzathine)	Р	(orally or IM)
8: 12.18	Quinolones	P	(orally only) (14 days or less)

8: 12.20	Sulfonamides	R	(orally only)
	Trimethoprim/	Р	(orally only)
	Sulfamethoxazole		
3: 12.24	Tetracyclines	Р	(orally only)
3: 12.28	Antibacterials,		
	Miscellaneous		
	Clindamycin	Р	(orally only)
	Erythromycin/	Р	(pediatrics only)
	Acetylsulfisoxazole		(orally only)
8: 14.08	Fluconazole	Р	(orally only)
			(single dose only)
8: 14.28	Nystatin	Р	(orally only)
8: 16.04	Antituberculosis Agents	R	(orally only)
8: 18.04	Adamantanes	Р	(orally only)
			(7 days or less)
8: 18.32	Nucleosides and Nucleotides	Р	(orally only)
5. 10.52	Nucleosides and Nucleotides	Ľ	(10 days or less)
8: 30.08	Antimalarials	Р	(orally only)
			(for prevention)
3: 30.92	Metronidazole	Р	(orally only)
3: 36	Urinary anti-infectives	Р	(orally only)
10: 00	Antineoplastic Agents		
	Methotrexate as Antirhumatismal Agent	R	
	Internancessiar Agent		
	Tamoxifen	R	

12: 00	Autonomic Drugs		
12: 08.08	Antimuscarinics/ Antispasmodics		
	Ipratropium (bromide)	R	(aerosol)
	Tiotropium (bromide monchydrate)	R	(inhalator)
12: 12.08	Beta-Adrenergic Agonists		
	Formoterol (fumarate)	R and A	(inhalation powder)
	Indacaterol (maleate)	R and A	
	Salbutamol (sulfate)	P and	(14 days or less for 1 treatment)
		R	(including expired prescription)
	Salmeterol	R and A	(inhalator)
	Terbutaline	P and	(14 days or less for 1 treatment)
		R	(including expired prescription)
12: 12.12	Alpha and Beta - Adrenergic Agonists		
	Epinephrine (hydrochloride)	Р	(in an emergency)
	Epinephrine	Р	(auto-injector)
12: 16.04	Alpha-Adrenergic Blocking Agents		
	Alfuzosin (hydrochloride)	R	
	Dihydroergotamine (mesylate)	R	
	Tamsulosin (hydrochloride)	R	
12: 20.04	Cyclobenzaprine (hydrochloride)	Р	(7 days)

12: 92 Drugs A.N.S., Miscellaneous

	Nicotine	P	
	Varenicline (tartrate)	P	
20: 00	Blood Formation, Coagulation and Thrombosis		
20: 04.04	Iron Preparations	P (orally only)	
20: 12.04	Anticoagulants	R and A (orally only)	
24: 00	Cardiovascular Drugs		
24: 04.08	Cardiotonic Agents	R	
24: 06.04	Bile Acid Sequestrants	R	
24: 06.06	Fibric Acid Derivatives	R	
24: 06.08	HMG-CoA Reductase Inhibitors	R and A	
24: 06.92	Niacin	R	
24: 08.16	Central Alpha- Adrenergic Agonists	R and A	
24: 08.20	Direct Vasodilators	R and A	
24: 12.08	Nitrates and Nitrites	R	
24: 12.92	Vasodilating Agents, Miscellaneous	R	
24: 20	Alpha - Adrenergic Blocking Agents	R and A	
24: 24	Beta - Adrenergic Blocking Agents	R and A	

24: 28.08	Dihydropyridines	R and A	A
24: 28.92	Calcium-Channel Blocking		
	Agents, Miscellaneous	R and A	A
24: 32.04	Angiotensin-Converting	R and A	A
	Enzyme Inhibitors (A.C.E.I.)		
24: 32.08	Angiotensin II Receptor	R and A	A
	Antagonists		
24: 32.20	Aldosterone Receptor	R	
	Antagonists		
28: 00	Central Nervous System Agents		
28: 08.04	Non-Steroidal Anti-inflammatory	P and	(14 days or less)
	Agents	R	(once)
28: 08.08	Codeine	Р	(28 tablets only)
28: 08.92	Acetaminophen	Р	
28: 12.04	Phenobarbital	R	(epilepsy)
20. 12.04	Filehobalbitai	IX IX	(ерттерзу)
00 10 00		_	
28: 12.08	Benzodiazepines (Clobazam and Clonazepam)	R	(epilepsy)
28: 12.12	Hydantoins	R	
2.7. 12.12		11	
20. 12 22	net i comu locato	Ð	
28: 12.92	Anticonvulsants, Miscellaneous	R	
28: 16.04	Antidepressants	R	
20. 10.04	Antiuepiessallts	Λ	
00 10 00		_	
28: 16.08	Antipsychotics	R	
20. 20 1	There had a set of a set		

28: 20.4 Amphetamines

	Dexamphetamine (sulfate)	R	
		IN	
28: 20.92	Other stimulants C.N.S.		
	Methylphenidate (hydrochloride)	R	
28: 24.08	Benzodiazepines Lorazepam	R P	(12 tablets only)
28: 24.92	Hydroxyzine (hydrochloride)	Р	
28: 28	Lithium	R	
28: 32.28	5-HT1 Receptor Agonists	R	
28: 36.08	Anticholinergics	R	
28: 36.12	Catechol-o-methyltransferase Inhibitors	R	
28: 36.16	Dopamine Precursors	R	
28: 36.20	Dopamine Agonists	R	
28: 36.92	Antiparkinsonian Agents	R	
28: 92	Central Nervous System Agents, Miscellaneous	R	
36: 00	Diagnostic Agents		
36: 26	Diabetes Mellitus		
	Quantitative Blood Ketone Reagent	Р	
	Quantitative Blood Glucose Reagent	Р	

36: 88 Urinalysis Р 40: 00 Electrolytic, Caloric, and Water Balance Р 40: 12 Replacement Preparations 40: 28 Diuretics R and A 40: 28.16 Potassium-sparing Diuretics 40: 36 Irrigating Solutions Р 48: 00 Antitussives, Expectorants and Mucolytic Agents 48: 10.24 Leukotriene Receptor Antagonists R 48: 10.32 Mast Cell Stabilizers R and A 48: 24 Mucolytic Agents R 52: 00 Eye, Ear, Nose, and Throat (EENT) Preparations 52: 02 E.E.N.T. Antiallergic Agents Р Sodium Cromoglycate 52: 04.04 Antibacterials Ρ except: Chloramphenicol Gentamicin Tobramycin 52: 08.08 *E*.*E*.*N*.*T*. Ρ Corticosteroids except:

	Ophtalmic Pomade, Solution and Suspension		
52: 16	Local Anesthetics	Р	
52: 92	EENT Drugs, Miscellaneous		
	Ipratropium (bromide)	Р	
	Sodium (chloride)	Р	
56: 00	Gastrointestinal Drugs		
56: 04	Antacids-adsorbents	Р	
56: 16	Digestants Lactase	Р	
56: 22.92	Antiemetics, Miscellaneous		
	Doxylamine/Pyridoxine	Р	
56: 28.12	Histamine H2-Antagonists		
	Famotidine Ranitidine	R P	
56: 28.28	Prostaglandins Misoprostol	R	
56: 28.32	Protectants Sucralfate	Р	(for breastfeeding only)
56: 28.36	Proton-Pump Inhibitors	Р	(30 days or less)
56: 32	Prokinetic Agents Domperidone	Р	(for breastfeeding only)
56: 36	Gastrointestinal Anti-inflammatories	R	

68: 00	Hormones and Synthetic Substitutes	
68: 04	Corticosteroids	P (inhalator) (28 days or less)
	Prednisone	P (orally for asthma and COPD) (10 days maximum)
68: 12	Contraceptives	Р
68: 16.04	Estrogens	R and A
68: 16.12	Estrogen Agonists - Antagonists	R
68: 20.02	Alpha-Glucosidase Inhibitors	R and A
68: 20.04	Biguanides	R and A
68: 20.08	Insulins	R and A
68: 20.20	Sulfonylureas	R and A
	except: Chlorpropamid	
<u>68: 22.12</u>	Glycogenolytic Agents	R
68: 24	Parathyroid	R
68: 28	Desmopressin (DDAVP)	R
68: 32	Progestins except: Depot Medroxyprogesterone Acetate	R and A P (injectable)
68: 36.04	Thyroid Agents	R and A

	except:			
	Liothyronine Sodium			
84: 00	Skin and Mucous Membrane Agents			
84: 04.04	Antibacterials	Р		
84: 04.08	Antifungals	P		
84: 04.12	Scabicides and Pediculicides	P		
84: 04.92	Local Anti-infectives, Miscellaneous	P		
	MISCEIIANEOUS	P		
84: 06	Anti-inflammatory Agents	Р	(medium and low strength)	
84: 28	Keratolytic Agents	Р		
84: 32	Keratoplastic Agents	R		
84: 92	Skin and Mucous Membrane Agents, Miscellaneous except: Fluorouracil	P		
86: 00	Smooth Muscle Relaxants			
86: 12	Genitourinary Smooth Muscle Relaxants	R		
86: 16	Respiratory Smooth Muscle Relaxants			
	Aminophylline	R		
	Theophylline	R		
88: 00	Vitamins			

PHYSICIANS —	ACTS PERFORMED	BY PERSONS OTHER	THAN PHYSICIANS
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88: 08	Vitamin B Complex	Р	(orally only)
	except: Cyanocobalamin	R	(including injectable)
88: 16	Vitamin D	Р	(orally only)
		2	
88: 28	Multivitamin Preparations A, D and C	Р	(orally only)
92: 00	Miscellaneous Therapeutic Agents		
92: 00.02	Miscellaneous, Others	R	
92: 08	5- Alpha Reductase		
52.00	Inhibitors		
	Finasteride	R	
92: 16	Antigout Agents	R	
92: 24	Bone Resorption Inhibitors		
	Alendronate monosodium	R	
	Etidronate disodium Risedronate sodium	R R	
	Risedionale soalum	R	
	Other medications		
	and substances		
	Combined Medications:		
	Medications consisting of		
	more than one substance or		
	medication listed in Schedule II of this		
	Regulation	P, R	
		and A	(the most restrictive specification)
	Over-the-Counter Medications:		
	Medications or substances		
	listed in Schedules II and III of the Regulation		
	respecting the terms and		

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conditions for the sale of

medications (chapter P-10, r. 12)	P
Vaccines	P
Non RAMQ formulary medication	
Local/Topical Anesthetic Agents	
Topical lidocaine-prilocain	P (patch, cream)
Lidocaine hydrochloride with or without parenteral epinephrine	P (local infiltration)
Tetracaine hydrochloride	P (ophtalmic solution)
Intravenous solutions	Р
Zanamivir	Р
Oseltamivir	Р
Zopiclone	P (10 days only)
Metformin hydrochloride	R and A
Neomycin, sulfate-polymyxin B sulfate-hydrocortisone	P (otic solution, 7 days)
Ciprofloxacin, hydrochloride hydrocortisone	P (otic solution, 7 days)
Exenatide	R and A
Liraglutide	R and A

	Roflumilast	R
	EXCEPTION DRUGS	
	Generic Name	Specifications
1.	Amphetamine (mixed salts of)	R
2.	Atomoxetine (hydrochloride)	R
3.	Betahistine (dihydrochloride)	R
4.	Bisacodyl	P
5.	Donepezil	R and A
6.	Estradiol	R and A(skin patch)
7.	Formoterol (fumarate	R and A
	dihydrate) /budesonide	
8.	Galantamine (hydrobromide)	R and A
9.	Gliclazide	R and A
10.	Glimepiride	R and A
11.	Mineral oil	Р
12.	Insulin detemir	R and A
13.	Insulin glargine	R and A
14.	Magnesium (hydroxide)	P
15.	Memantine (hydrochloride)	R and A

16.	Methylphenidate (hydrochloride)	R	
17.	Metronidazole	Р	(vaginal gel)
18.	Absorbent dressing - sodium chloride	Р	
19.	Absorbent dressing - fibre gelling	Р	
20.	Absorbent dressing - hydrophilic foam alone or in association	Р	
21.	Absorbent dressing border - fibre gelling	Р	
22.	Absorbent dressing border - rayon and polyester fibres	Р	
23.	Absorbent dressing border - hydrophilic foam alone or in association	Р	
24.	Anti-odour dressing - activated charcoal	Р	
25.	Antimicrobial dressing - iodized	Р	
26.	Antimicrobial dressing border - silver	Р	
27.	Moisture absorption dressing - hydrocolloid or polyurethane	Р	
28.	Moisture absorption dressing border – hydrocolloid or polyurethane	Р	

29.	Low adherent wound contact layer dressing - polyamide or silicone	P
30.	Monobasic sodium phosphate/ dibasic sodium phosphate	P
31.	Pioglitazone (hydrochloride)	R and A
32.	Micronized progesterone	R
33.	Quantitative reagent for measuring prothrombin time in blood	Р
34.	Repaglinide	R and A
35.	Rivastigmine	R and A(orally and patch)
36.	Salmeterol/Fluticasone	R and A
37.	Saxagliptin	R and A
38.	Sennosides A and B	Р
39.	Sitagliptin	R and A
40.	Sitagliptin/Metformin	R and A
41.	Tolterodine	R
42.	Tretinoin	P
43.	Aliskiren	R
44.	Aliskiren Hydrochlorothiazide	R
45.	Amlodipine/Atorvastatin	R

46.	Sodium Carboxymethyl Cellulose	P
47.	Sodium Carboxymethyl Cellulose/Prurite	P
48.	Clopidogrel Bisulfate	R
49.	Dabigatran etexilate	R
50.	Estradiol-17B/Norethindrone	R and A (skin patch)
51.	Estradiol-17B/Levonorgestrel	R and A (skin patch)
52.	Ezetimibe	R
53.	Nutritional formulas-lipid emulsion (infants and children)	R
54.	Nutritional formulas-glucose polymer	R
55.	Nutritional formulas-fractionated coconut oil	R
56.	Nutritional formulas-coconut oil	R
57.	Nutritional formulas-caseine hydrolysates (infants and children)	R
58.	Nutritional formulas-monomeric	R
59.	Nutritional formulas-monomeric with iron (infants or children)	R
60.	Nutritional formulas-polymeric with residue	R
61.	Nutritional formulas-polymeric with low residue	R

62.	Nutritional formulas-follow-up preparations for premature	
	infants (infants)	R
63.	Nutritional formulas-proteins	R
64.	Nutritional formulas-semi-elementary	R
65.	Insulin aspart/Insulin aspart protamine	R and A
66.	Insulin lispro/lispro protamin	R and A
67.	Linagliptin	R and A
68.	Lisdexamfetamine (dimesylate)	R
69.	Oxybutynin	R
70.	Oxybutynin (chloride)	R
71.	Rivaroxaban	R
72.	Salbutamol (sulfate)	R

O.C. 668-2007, s. 8; O.C. 365-2008, s. 3; O.C. 1318-2011, s. 4; O.C. 80-2014, s. 5; I.N. 2014-04-01.

SCHEDULE III

(s. 8.6, 1st par., subpar. 4)

LIST OF CLASSES OF MEDICATIONS NURSE PRACTITIONERS SPECIALIZED IN PRIMARY CARE ENGAGED IN ADDITIONAL MEDICAL ACTIVITIES MAY PRESCRIBE

Class of medications	Name of medication
Opiate agonists	Fentanyl Morphine
Opiate antagonists	Naloxon
Benzidiazepine antagonists	Flumazenil (Anexate)
Antacids-absorbents	Activated charcoal
Local anesthetics	Mepivacine (Carbocaine)
Topical coagulant	Thrombin
Ocytoxins	Oxytocin (Syntocinon and Pitocin)
Prostaglandins	Carboprost (Hemabate)
Anticonvulsants	Magnesium sulfate, inj.
Sedative - minor tranquilizers	Lorazepam i/v, i/m, i/r

O.C. 365-2008, s. 4; O.C. 80-2014, s. 6.

SCHEDULE IV

(s. 8.6, 3rd par.)

1. A primary care facility located in the Basse-Côte-Nord territory and managed by the Centre de santé et de services sociaux de la Basse-Côte-Nord.

2. A primary care facility located in the territory of Nunavik and managed by the Inuulitsivik Health Centre or the Tulattavik Health Centre.

3. A primary care facility located in the James Bay territory and managed by the Cree Board of Health and Social Services of James Bay.

4. A dispensary serving First Nations communities and located in the following regions:

(1) Basse-Côte-Nord;

(2) Moyenne-Côte-Nord;

(3) *Schefferville*;

(4) *Haute-Mauricie*.

5. A dispensary managed by the First Nations and Inuit Health Branch of Health Canada and located in the following regions:

(1) Haute-Gatineau (Algonquins of Barrière Lake);

(2) Témiscamingue (Long Point First Nation).

O.C. 365-2008, s. 4.

UPDATES O.C. 996-2005, 2005 G.O. 2, 4813 O.C. 668-2007, 2007 G.O. 2, 2439 O.C. 365-2008, 2008 G.O. 2, 1250 O.C. 1318-2011, 2011 G.O. 2, 3748 O.C. 344-2012, 2012 G.O. 2, 1137 O.C. 80-2014, 2014 G.O. 2, 399