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## Board of Registration in Pharmacy

### Advisory: Controlled Substance Prescriptions

Under Massachusetts law, licensed pharmacists have a corresponding responsibility to evaluate prescriptions for appropriateness and validity. Below is a list of requirements and valuable tools for pharmacists to assist with this task.

As a reminder, [M.G.L. c. 94C § 19\(a\)](#) requires prescriptions to be issued pursuant to a valid patient / prescriber relationship and for a legitimate medical reason by a prescriber acting in the usual course of their professional practice.

- I. A National Association of Boards of Pharmacy (“NABP”) video was designed to assist pharmacists with identifying the warning signs of prescription drug misuse and diversion:  
<https://www.youtube.com/watch?v=lnnfVdRLkts>
- II. A “Red Flag” can indicate the potential for misuse and diversion but does not necessarily prohibit the filling of a prescription. When evaluating a prescription, consider the following potential red flags:
  - a. Prescriber is located at a great geographic distance from the pharmacy.
  - b. Patient lives a great geographic distance from the pharmacy or prescriber.
  - c. Patient frequently requests early refills.
  - d. Patient often runs out of or “loses” their medications.
  - e. Patient requests to bypass insurance and pay with cash.
  - f. Prescriptions written for combinations known as “cocktails” (i.e., containing an opioid, a benzodiazepine, and a muscle relaxant).
  - g. Prescriptions written for unusually large quantities for a single patient.
  - h. Prescribing pattern where patients receive the same controlled substances repeatedly with no adjustment or change in therapy.
  - i. Prescribing pattern of immediate release opioids on a routine schedule without a corresponding extended-release opioid.
  - j. Multiple prescribers for a single patient.
  - k. Multiple pharmacies used by a single patient.

- l. Groups of patients that present at the same time with the same prescriptions.
  - m. Strong analgesic prescriptions written by a prescriber that is not associated with pain management.
  - n. Prescriptions written by prescribers with federal or state regulatory actions against them.
  - o. Prescriptions that appear to be written in multiple colors or printing / writing.
  - p. Patients that use street slang and present with unusual or aggressive behavior.
  - q. Patients that rush or try to distract you while you fill their prescription.
- III. Utilize the Prescription Monitoring Program (“PMP”) when evaluating and processing controlled substance prescriptions. The Massachusetts PMP (“[MassPAT](#)”) is a tool that supports safe prescribing and dispensing and assists in identifying prescription drug misuse, abuse, and diversion. As a reminder, all pharmacy data required within [105 CMR 700.012](#) must be reported to MassPAT on the next business day following the most recent transmission.

**For more information, review the following documents:**

Controlled Substance Inventory Management Best Practices:

<https://www.mass.gov/lists/pharmacy-practice-resources>

DEA Pharmacist’s Manual:

[https://www.deadiversion.usdoj.gov/GDP/\(DEA-DC-046R1\)\(EO-DEA154R1\)\\_Pharmacist's\\_Manual\\_DEA.pdf](https://www.deadiversion.usdoj.gov/GDP/(DEA-DC-046R1)(EO-DEA154R1)_Pharmacist's_Manual_DEA.pdf)

**Please direct any questions to: [Pharmacy.Admin@mass.gov](mailto:Pharmacy.Admin@mass.gov)**