

## Attachment 1 – Checklist for prescribing specials<sup>1-4</sup>

This checklist will support prescribers and pharmacists when considering prescribing or supplying a special. It can also support discussions with specialists who initiate specials and request prescribing is continued in primary care.

### Establish clinical need

Specials should only be prescribed when the patient has a special clinical need which cannot be met by a licensed medicine of established safety, quality and efficacy.

- Why is the patient being prescribed a Special?

- Does the patient need a medicine? Is it essential for this patient? Y / N
- Is the prescriber / specialist aware that the prescription is for a special? Y / N
- Is there a licensed preparation which could meet the patient's needs? Y / N
- Would an alternative formulation be appropriate, for example soluble tablets, liquid formulations, or patches? Y / N
- Could a licensed product be used in an unlicensed manner, for example crushing tablets, opening or administering a solution for injection via a feeding tube? Y / N

### Ensure effective prescribing governance

Prescribers understand the rationale for using a special and the practical implications of prescribing before initiating, transferring, or taking over responsibility for prescribing.

If initiating prescribing:

- How long is the patient expected to need this medicine?

If asking the prescriber to continue prescribing:

- Has all necessary information been communicated to them? Y / N
- Do you need to involve pharmacy colleagues? Y / N

If continuing the prescribing of a Special:

- Do prescribers know the formulation and source of the initial supply? Y / N
- Is there a need to ensure consistency of dose by specifying the formulation? Y / N

### Understand the patient's experience and make a shared decision

Prescribers should discuss the patient's needs, values and preferences to ensure that the implications and practicalities of treatment options are understood by the patient. When a special is prescribed this is a shared decision and patients are supported to adhere to their medicines.

- If the patient has not had the special before are there any specific patient requirements (e.g. special containers, measuring devices)?

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- What are the practical implications of prescribing - Do you need to consult with pharmacy colleagues? Y / N
  - Will the patient be taking or using the medicine themselves? Y / N
  - Will the medicine be administered by someone else? Y / N
- If **YES** then how will it be administered and are there any implications for the choice of product?

- Is there a need to discuss with the patient:
  - Likely timescales for the supply and the need to request a repeat prescription in good time? Y / N
  - How and when to order repeat prescriptions from their GP? Y / N
  - The shelf life/in-use shelf life of the special? Y / N
  - Quantities they need to order? Y / N
  - Why specials are different to licensed products? Y / N
  - Changes to the supplier or formulation that may alter the way the special is taken or used (e.g. a change in concentration)? Y / N

### Identify medicines and preparations

The risks and benefits of taking or using a special will differ for different patient groups, different medicines and in individual clinical circumstances. Prescribers need to take into account the safety, efficacy, quality and cost of the different specials available to patients.

- What is the rationale for using a Special?
- Is there evidence or accepted practice to support usage? Y / N

- Is the dose critical (e.g., narrow therapeutic index medication)? Y / N
- Is the patient a child? Y / N
- Does the medicine have a narrow therapeutic window? Y / N
- Is there a requirement to specify the exact formulation (e.g., do preparations vary widely in bioavailability)? Y / N
- Does the formulation and suppliers need to be discussed with the community pharmacy / hospital? Y / N
- Given the patient's clinical needs, what is the most appropriate special?

- Will the special be supplied from a community pharmacy or a hospital?

- Is there any local or national guidance (e.g. specialist or local formularies)? Y / N
- Do you need to discuss alternatives with your local community pharmacist? Y / N

### Monitor and review

This checklist has been authored and published by [PrescQIPP](#). Primary care colleagues can access all PrescQIPP resources for free after registering and creating a login.

Prescribers should have systems in place to ensure the need for the special is regularly reviewed, both in terms of the patient's continued clinical need for a special and in the context of the need for a medicine overall.

- How often will the patient be reviewed?

- Who will undertake the review?
- Is there any cause for concern about the patient's treatment, for example any adverse events or indication of treatment failure? Y / N

- **Once the checklist is completed, to ensure effective governance and patient informed decisions, add the checklist to patient's record, document the patient understanding and consent if given.**
- **Provide the patient with a copy of this check list.**

## References

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4. Royal Pharmaceutical Society of Great Britain. Prescribing specials. April 2016.  
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