

Medication Prescribing Policy

Last updated 7th April 2026

1. Policy

Prescribing Policy

2. Purpose

To ensure safe, compliant, and high-quality prescribing practices within AVA Orthopaedics, consistent with **AHPRA standards**, applicable Commonwealth and State/Territory legislation, and best-practice orthopaedic care in a telehealth-first model.

3. Scope

This policy applies to all AVA Orthopaedics clinicians involved in prescribing medications, including:

- Medical Practitioners
- Nurse Practitioners

4. Definitions

- **RTPM (Real Time Prescription Monitoring):** State and territory-based systems (e.g. QScript, SafeScript, ScriptCheck) that provide real-time information on prescribing and dispensing of monitored medicines.
- **Schedule 8 (S8) Medicines:** Controlled drugs with a high risk of dependence (e.g. opioids).
- **Schedule 4 (S4) Medicines:** Prescription-only medicines.
- **Telehealth Consultation:** A clinical consultation conducted via video or telephone.

5. Policy Statement

AVA Orthopaedics is committed to responsible prescribing practices that prioritise patient safety, minimise harm, and comply with all regulatory and professional obligations.

Prescribing within a telehealth environment requires heightened clinical diligence, particularly in relation to high-risk medications.

6. Principles of Prescribing

All prescribing must:

- Be **clinically indicated and evidence-based**
- Be **appropriate to the telehealth setting**
- Consider patient-specific risk factors (including medication history and comorbidities)
- Support **continuity of care**, with involvement of the patient's usual healthcare provider where appropriate
- Be clearly **documented and justifiable**

7. Real Time Prescription Monitoring (RTPM)

Clinicians must comply with RTPM requirements as follows:

A review of the relevant State or Territory Real Time Prescription Monitoring (RTPM) system (e.g. QScript, SafeScript, ScriptCheck) is mandatory prior to prescribing Schedule 8 medicines, and should be undertaken for high-risk Schedule 4 medicines where clinically indicated.

- RTPM findings must be incorporated into clinical decision-making
- Any identified risks (e.g. multiple prescribers, high-risk combinations) must be documented
- Where RTPM access is unavailable, **Schedule 8 prescribing must not proceed**

8. Schedule 8 (S8) Medicines

Prescribing of Schedule 8 medicines within AVA Orthopaedics is **restricted**.

8.1 General Requirements

Schedule 8 medicines may only be prescribed where:

- There is a clear, evidence-based clinical indication
- RTPM has been reviewed
- A documented risk assessment indicates low risk of harm

8.2 Restrictions

- Not routine practice within AVA Orthopaedics
- No repeat prescriptions

- No initiation of long-term therapy
- Preference for **face-to-face assessment prior to initiation**
- If S8 medications are prescribed, **a record must be kept** (initials of patient only, reason for prescription and prescriber) in the S8 prescription register in SharePoint folder.
Click for link here: [S8 Prescription Register](#)
This is to allow for auditing purposes within AVA Orthopaedics.

8.3 Telehealth Limitation

- Schedule 8 prescribing via telehealth should be avoided where possible
- Where adequate clinical assessment cannot be achieved, prescribing must not proceed

8.4 Escalation

Where **significant** analgesia is required:

- The patient should be referred to their **General Practitioner**, or
- Directed to an **Emergency Department** or appropriate in-person service

9. Telehealth Prescribing Requirements

Prior to prescribing via telehealth, clinicians must:

- Confirm **patient identity**
- Confirm **patient location (must be within Australia)**
- Determine that the condition is **appropriate for telehealth management**

Prescribing must not proceed where:

- There is clinical uncertainty or inadequate assessment
- There are identified safety concerns
- The medication is high-risk and requires in-person review

10. Clinical Risk and Escalation

Prescribing must not proceed where there is:

- Suspected drug-seeking behaviour
- Inconsistent or unreliable history
- Concerning RTPM findings
- Inability to adequately assess the patient

In these circumstances, clinicians must:

- Provide a clear explanation to the patient

- Arrange appropriate escalation (GP, Emergency Department, or specialist review)
- Document the rationale for decision-making

11. Documentation Requirements

The following must be recorded in the clinical record:

- Medication name, dose, and duration
- Clinical indication
- RTPM review (where applicable)
- Risk assessment and clinical reasoning
- Patient advice and follow-up plan
- Record of patient's initials, reason for prescription and prescriber in S8 register in Sharepoint. [S8 Prescription Register](#)

12. Continuity of Care

- AVA Orthopaedics does **not provide ongoing prescribing for chronic conditions**
- Patients requiring ongoing or repeat prescriptions must be referred to their:
 - General Practitioner, or
 - Treating specialist

13. Compliance and Governance

Failure to comply with this policy may constitute a breach of:

- AHPRA professional standards
- Relevant State/Territory legislation
- AVA Orthopaedics clinical governance requirements

14. Links to RTPM sites	RTPM System (Link)
State / Territory	
Queensland	https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/medicines/qscript
New South Wales	https://www.health.nsw.gov.au/safescript
Victoria	http://www.safescript.vic.gov.au
Western Australia	https://www.health.wa.gov.au/articles/s t/scriptcheckwa
South Australia	https://www.scriptcheck.sa.gov.au
Tasmania	https://www.tasscript.health.tas.gov.au
Australian Capital Territory	https://www.canberrascript.act.gov.au
Northern Territory	https://www.ntsript.nt.gov.au/