



Briefing: O24/24: Original Pack Dispensing FAQs

Introduction

1. What is Original Pack Dispensing +/- 10%?

Following a public consultation, the Human Medicines Regulations 2012 (HMRs) were amended in October 2023 to allow Original Pack Dispensing (OPD). OPD allows pharmacists the flexibility to dispense up to 10% more or less than the prescribed quantity if this means that the product can be supplied to the patient in the manufacturer's original pack (except when dispensing products outside of scope or where this would negatively affect the patient's clinical treatment regimen).

2. Why were these changes introduced?

OPD +/-10% is one of a number of legislative changes intended to transform the supply and delivery of medicines that were envisaged in the [2019, 5-year deal agreed between Department of Health and Social Care \(DHSC\) and NHS England \(NHSE\)](#). The new OPD flexibilities, where they may apply, aim to support increased patient safety by improving patient access to safety information that is included in a medicine's original packaging. DHSC's OPD consultation document also states that *"by allowing community pharmacies to dispense medicines in their original packs, we believe OPD will help them to become more efficient and to free up their time for other tasks such as providing clinical services to patients"* by allowing community pharmacies to dispense medicines in their original packs, we believe OPD will help them to become more efficient and to free up their time for other tasks such as providing clinical services to patients".

3. When do the OPD +/-10% flexibilities apply to dispensing?

For NHS prescriptions: the changes will come into force on **1 January 2025** as laid out in the Terms of Service (in the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (PLPS).

For private prescriptions: the OPD regulations came in force in Great Britain as soon as the Human Medicines Amendment Regulations came into force on **11 October 2023**.

4. When does OPD +/-10% apply to NHS dispensing in England?

When the HMRs were amended in October 2023, there was a transitional provision for OPD +/-10%, so that the flexibility to dispense 10% more or less than the prescribed quantity did not automatically apply in NHS pharmaceutical services in England. This was to allow DHSC and Community Pharmacy England to find a solution for how OPD +/-10% would apply to NHS dispensing in England.

Subject to the availability of supporting PMR systems functionality, from 1 January 2025, pharmacies will have the discretion to apply OPD +/-10% rules to NHS prescriptions. Changes to the PLPS will for NHS dispensing:

- **require the supervising pharmacist to consider** OPD +/-10% dispensing for NHS prescriptions, as appropriate, and
- **give the pharmacist the flexibility** to supply up to 10% more or less than the prescribed quantity, if that would mean the medicine could be dispensed in the manufacturer's original pack, and other prescription requirements are fulfilled.

There will be a requirement for pharmacists to exercise their professional skill and judgement and consider whether it is safe and appropriate to use these flexibilities to supply a different quantity to that ordered on a prescription, having regard to the benefits to patients, IT system readiness, whenever it may be possible to make such supplies etc.

DHSC acknowledges that IT system suppliers may not all be ready to implement OPD functionality into their systems from 1st January 2025. System suppliers had requested at least six months for IT development but were provided the information to support the changes within much shorter timelines.

5. Am I required to use OPD +/- 10% rules for NHS dispensing?

The PLPS amendments are enabling to allow **the supervising pharmacist to consider** using the OPD +/- 10% flexibility for NHS dispensing from 1 January 2025, but **there is NO requirement to use it.**

Pharmacy owners must consider OPD from 1st January, but the DHSC and Community Pharmacy England say that it is reasonable for pharmacists to opt out of using the OPD provisions until the IT systems have been fully developed to tested to support OPD functionality.

6. Under what circumstances can I choose not to use OPD +/- 10% rules?

Except where a product falls outside the scope of OPD +/-10% rules, professional judgment should be exercised to assess the suitability of applying +/- 10% quantity flexibility for dispensing as it may not be appropriate to use it in all cases.

Examples of circumstances where pharmacists may continue to dispense the prescribed quantity even if it requires splitting a pack includes:

- if the supervising pharmacist considers that the patient should be supplied with the exact quantity prescribed to be able to follow the medication regimen or to support patient safety. For example, antibiotics where it is clinically important for a patient to complete the full course of medicine as prescribed, or for certain pain relief medicines where there is a risk of reliance or addiction.

- If the pharmacy cannot obtain the whole pack with reasonable promptness or there is a patient need reason e.g. delay to patient treatment.
- Where the patient refuses to accept a lesser quantity than the quantity prescribed, e.g. where a patient is required to pay a prescription charge.

IT system suppliers may not introduce the necessary changes to the pharmacy IT system to support OPD until after 1 January 2025.

7. Some patients are prescribed daily or weekly prescriptions, can OPD +/-10% rules be applied to those prescriptions?

Pharmacists should exercise their professional judgment to assess the suitability of applying the OPD +/-10% rules as it may not be appropriate to supply more or less than the prescribed quantity. The supervising pharmacist must consider the patient safety and suitability when applying the OPD +/- 10% rules to eligible products.

8. Are all products in scope of OPD +/-10% rules?

All POMs, non-POMs (P medicines, GSL medicines, non-medicines) and Schedule 5 Controlled Drugs (CDs) are within scope of OPD +/-10% rules for supply against NHS prescriptions. However, there are a number of products excluded from the OPD +/-10% rules for NHS dispensing. For example, all Schedules 1-4 CDs, Part IX appliances, unlicensed specials and products classed as special containers fall outside the scope of OPD +/-10% rules. See the table below for an overview of products included and excluded under the OPD provisions for NHS dispensing.

Product type	Do OPD +/- 10% rules apply?	
	Yes	No
POMs (see exceptions below)	✓	
Non-POMs including P, GSL and non-medicines (i.e. ACBS products, food supplements, cosmetics, toiletries etc)	✓	
Schedule 5 Controlled Drugs	✓	
Part IX Appliances		✓
Controlled Drugs in Schedules 1-4		✓
Special containers		✓
Unlicensed specials (Part VIII B, Part VIII D and non-Tariff specials)		✓
Products supplied in accordance with SSPs		✓
Medicines supplied in accordance with PGDs		✓

9. A prescription requests 84 tablets of a product that is only available in a pack size of 30. Do I calculate +/- 10% based on the prescribed quantity or the pack size?

The OPD +/-10% rules apply to the prescribed quantity. 10% of 84 is 8.4, and using the rounding rules a pharmacist can supply either up to 8 more or 8 less tablets (in total between 76 tablets and 92 tablets) if it would allow supply of complete pack(s) only. So, supplying 3 x 30 tablets is permissible under the OPD +/-10% rules.

10. Do the OPD +/-10% rules apply to all NHS prescriptions (electronic and FP10 paper forms)?

For NHS dispensing, the OPD +/-10% rules only apply to prescriptions issued electronically via EPS; this includes cross-border Welsh electronic prescriptions. All FP10 paper prescriptions (including any cross-border paper prescriptions issued in Northern Ireland, Scotland or Wales and dispensed in England) are excluded from OPD +/-10% rules so pharmacists will only be able to supply the prescribed quantity (unless the product is classed as a special container). DHSC's view is that even though the percentage of paper prescriptions is small, it is still a significant volume, and as such would require manual intervention and require a disproportionate amount of resource for the NHS Business Services Authority (NHSBSA) to read the quantity endorsements on paper prescriptions.

11. What quantity do I supply if OPD +/-10% rules applied to the prescribed quantity does not result in a whole number?

If when applying the OPD +/-10% rules to the prescribed quantity it does not result in a whole number, pharmacists must round up or down to the nearest whole number. Where the quantity is above halfway pharmacists should round **up** to the nearest whole number. Where the quantity is exactly halfway or less, pharmacists should round **down** to the nearest whole number.

Some examples are included in table below:

Prescribed quantity	10% of the prescribed quantity	Rounding rules explained
Solifenacin 5mg tablets x 28 tablets	2.8	2.8 can be rounded up to 3 to enable pharmacists to supply up to three more or three less tablets if it achieves whole pack dispensing. As a pack of 30 is available, the OPD +/-10% rules would allow a pharmacist to supply two extra tablets to supply and claim payment for a complete pack size of 30 tablets.
Lacosamide 50mg tablets x 15 tablets	1.5	1.5 is exactly halfway therefore it must be rounded down to 1 to enable pharmacists to supply up to one more or one less tablet if it achieves whole pack dispensing. As a pack of 14 is available, the OPD +/-10% rules would allow a pharmacist to supply one tablet less to supply and claim payment for a complete pack of 14 tablets.
Fenofibrate micronized 67mg capsules x 84 tablets	8.4	8.4 must be rounded down to 8 to enable pharmacists to supply up to eight more or eight less tablets if it achieves whole pack dispensing. As a pack of 90 is available, the OPD +/-10% rules would

		allow a pharmacist to supply six extra tablets to supply and claim for a complete pack size of 90 tablets.
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12. Do I need to notify the prescriber each time I have applied the OPD +/- 10% rules to an item ordered on a prescription?

There is no requirement to do so. However, if a patient is receiving up to 10% less than the prescribed quantity on a repeatable prescription item, the patient may need to re-order their next prescription earlier the following month. Good communication between the pharmacist, the GP and the patient will help to avoid any disruption to the patient's treatment.

13. Do the OPD +/- 10% rules apply to prescriptions issued in Scotland, Wales or Northern Ireland and dispensed in England?

The +/-10% OPD rules can be applied to **electronic prescriptions** issued in Wales and dispensed in England. Reimbursement arrangements for Welsh prescriptions will be in line with EPS prescriptions dispensed in England. All NHS paper prescriptions from England, Wales, Scotland and Northern Ireland are excluded from OPD arrangements.

14. Can a patient refuse to accept a smaller quantity if the OPD +/-10% rules mean that the quantity supplied as a complete pack is less than original quantity prescribed?

Yes, a patient may refuse a supply under OPD +/-10% rules if it means that they are supplied with lesser quantity than that prescribed. In this case, the patient can be supplied the exact quantity ordered. For example, if the patient is prescribed 30 tablets and refuses to accept 28 tablets in a manufacturer's original pack, the pharmacist can continue to supply the prescribed quantity.

15. Does a patient still pay prescription charges if OPD +/-10% rules mean that the quantity dispensed as a complete pack is less than the original quantity prescribed?

Unless the patient holds a valid exemption reason or the item is free-of-charge on the NHS, prescription charges are payable for supplies made under +/-10% OPD rules even if this means that a patient is supplied with a smaller quantity of a medicine than was originally prescribed. It is only with **quantity restriction** Serious Shortage Protocols (SSPs) where a patient is exempted from paying prescription charges for receiving less than the original quantity prescribed.

16. Can OPD +/-10% rules be used for prescriptions that are sent to an intra company hub?

A pharmacy company that owns a hub pharmacy can apply the OPD +/-10% rules to prescriptions that are sent to the hub (currently, the hub must be part of the same legal entity as the pharmacy).



Products not covered by OPD +/-10% rules

17. Are all Controlled Drugs excluded from OPD arrangements?

The OPD +/-10% rules can be applied to prescriptions for Schedule 5 Controlled Drugs (CDs), where appropriate. However, the rules do not apply to any CDs in Schedules 1 to 4 Schedules of the Misuse of Drugs Act and Regulations. Any prescriptions for Schedule 1 to 4 CDs will need to be supplied as the exact quantity ordered.

18. Do the OPD +/-10% rules apply to prescriptions for unlicensed medicines?

The +/-10% OPD rules do not apply to unlicensed medicines commonly known as “specials”. These must continue to be supplied in the exact quantity ordered (unless the product is classed as a special container).

19. Do the OPD +/-10% rules extend to any supplies made in accordance with a Serious Shortage Protocol (SSP) and Patient Group Directions (PGDs)?

For the time being, the OPD +/-10% rules only extend to supplies made against NHS prescriptions. Pending further legislative amendments, products supplied in accordance with Serious Shortage Protocols (SSPs) and Patient Group Directions (PGDs) remain outside the scope of OPD +/-10% rules. Community Pharmacy England will issue any further updates once the necessary changes to legislation are in place to enable pharmacists to apply the OPD +/-10% rules for supplies made against SSPs and PGDs.

20. Do the OPD +/-10% rules apply to prescriptions for valproate-containing products?

Following amendments to the Human Medicines Regulations 2012, valproate-containing products are subject to separate dispensing rules which came into force in October 2023. Subject to certain exceptions, the changes mandate whole pack dispensing of all valproate-containing products after they were **reclassified as special containers**. More information on special containers can be found on our [special containers](#) page.

Reimbursement arrangements

21. How will I be reimbursed for supplies made using the OPD +/- 10% rules for NHS dispensing?

Where the OPD +/-10% rules are applied to an eligible prescription item to enable whole pack dispensing, NHS reimbursement will be calculated as follows:

- where the dispensed quantity matches the prescribed quantity, reimbursement will be calculated based on the prescribed quantity.
- where the dispensed quantity is within +/-10% of the prescribed quantity, reimbursement will be calculated based on the dispensed quantity.

- where the dispensed quantity is less than that prescribed, reimbursement will be calculated based on the dispensed quantity – this may be over 10% less (e.g. 50% less than that prescribed).
- where the quantity supplied is greater than 10% (outside of HMR OPD provisions) of the prescribed quantity, reimbursement will be calculated based on the prescribed quantity.
- where the product is classed as a special container, reimbursement will continue to be based on the nearest sub-pack/complete pack size.

This is summarised below:

Scenario	Reimbursed for
If the dispensed quantity is the same as the prescribed quantity	Prescribed quantity
If the dispensed quantity is up to and including 10% more than the prescribed quantity	Dispensed quantity
If the dispensed quantity is more than 10% of the prescribed quantity	Prescribed quantity
If dispensed quantity is lower than the prescribed quantity	Dispensed quantity

22. How will the NHSBSA know what quantity I supplied in order to calculate reimbursement?

For EPS prescriptions dispensed from 1 January 2025, NHSBSA will utilise the existing quantity field in the Electronic Reimbursement Endorsement Message (EREM) or EPS claim message to check for the quantity supplied and reimburse accordingly (provided OPD +/-10% rules have been followed correctly).

Before utilising OPD +/-10% rules for NHS dispensing, pharmacy owners are advised to await confirmation from your IT system supplier regarding the availability of OPD functionality in their system.

Your PMR system will need to be able to reflect the correct quantity dispensed value, which is per your input and expectation, into the EPS claim message (EREM), so that NHSBSA receive the correct dispensed quantity information and reimburse accordingly.

IT system suppliers have been encouraged to communicate to their users once the systems are OPD-ready (additional information can be found within the IT FAQs section below).

23. Are any additional dispenser endorsements required on electronic prescriptions to notify NHSBSA of any supplies made using OPD +/- 10% rules?

No additional dispenser endorsements are required on electronic prescriptions to indicate to the NHSBSA if OPD +/-10% rules have been utilised. NHSBSA will use the existing quantity field in the Electronic Reimbursement Endorsement Message (EREM) or EPS claim message to check for

the quantity supplied and reimburse accordingly (provided OPD +/-10% rules have been followed correctly).

However, other existing prescription endorsement requirements remain unchanged. Pharmacy teams must continue to endorse prescriptions as per Clause 9B, Part II of the Drug Tariff for example, to endorse the supplier/brand and/or invoice price if a product is not listed in the Drug Tariff or to specify the pack size of a Category C product if more than one pack size is listed in the Tariff. For more information on prescription endorsements please refer to our [Endorsement Guidance](#).

24. If I do not utilise the OPD +/- 10% rules to supply a complete pack size, can I still make a claim for broken bulk if I need to split a pack to supply the exact quantity ordered?

The broken bulk ('BB') endorsement enables pharmacy teams to claim payment for a complete pack of an eligible product where only a part-pack has been dispensed and assuming the remaining quantity is unlikely to be dispensed again within the next 6 months. Broken bulk claims (in line with Clause 11, Part II of the Drug Tariff) can carry on as usual for non-OPD supplies. However, broken bulk claims would not be accepted if the dispensed quantity is +/- 10% of the prescribed quantity as this would imply that a complete pack was supplied to the patient.

25. Will the 10p container allowance continue to be paid once the OPD arrangements are implemented?

Following the introduction of OPD, pharmacies will no longer receive the 10p container allowance if an original pack is supplied following OPD +/-10% rules. For example, if the dispensed quantity is +/- 10% of the prescribed quantity, then it will be assumed that an original pack was supplied, in which case the container allowance will not be paid. However, the 10p allowance will continue to be paid for all non-OPD supplies – where a split pack quantity is dispensed because the quantity ordered does not correspond to an available pack size.

26. Where a price concession is granted for an item supplied as a complete pack following OPD +/-10% rules, will the improved price apply to the dispensed quantity or the original prescribed quantity?

If the OPD +/-10% rules have been correctly applied to an eligible prescription item to enable whole pack dispensing, any monthly price concession granted for this item will be applied to the dispensed quantity.

27. How can I check if the NHSBSA has reimbursed me for the quantity dispensed for supplies made using the OPD +/- 10% rules?

Pharmacy owners are encouraged to sign-up and access their prescription item report through NHSBSA's Information Services Portal. The prescription item report is a monthly data report showing reimbursement and remuneration for each item submitted for payment. The report allows a pharmacy owner to identify any payment discrepancies or endorsements errors. The pharmacy can sign up to access the prescription item report by following the steps in our [How](#)

[to access your Prescription Item Reports](https://cpe.org.uk/reconciling) factsheet. It would be sensible to consider spot checking that reimbursement is as expected for supplies made using OPD +/-10% rules. See: <https://cpe.org.uk/reconciling>.

IT systems functionality

28. Is there a deadline for IT systems to have functionality in place to support OPD +/- 10% rules?

There is no fixed deadline for IT system suppliers to have functionality in place for PMR systems to support utilisation of OPD +/-10% rules. Therefore, all IT system suppliers may not be ready to implement OPD functionality into their systems from 1st January 2025. System suppliers had requested at least six months for IT development but were provided the information to support the changes very late.

29. Should I continue to supply the exact quantity ordered if my system does not yet support 10% +/- OPD rules?

Pharmacists must consider OPD but do not have to utilise it if for example, IT systems do not have the functionality in place for allow claiming payment for up to 10% more or less than the prescribed quantity.

30. How will I know once my system supplier has enabled OPD +/- 10% changes?

Community Pharmacy England has encouraged all IT system suppliers to inform their customers once OPD functionality has been fully tested and enabled for use by pharmacies.

31. Does my PMR system need to put in place validation to prevent inadvertent selection of products outside the scope of OPD +/-10% rules or a quantity that exceeds 10% of the prescribed quantity (except for special containers)?

The EPS dispensing system specification encourages suppliers to introduce validation support, such as warnings for unusual dispensed quantities being input. To help pharmacy teams apply the OPD +/- 10% rules correctly, IT systems can prompt users if the product or quantity selected falls outside the scope of the OPD arrangements. There may be variation in the level of built-in validation offered by different IT systems to support pharmacies in applying the OPD +/- 10% rules correctly. Some IT suppliers may seek to introduce functionality immediately whereas others may choose a later date to release the changes across their estate.

32. How can I check that the correct dispensed quantity values are being submitted in the EPS claim message submitted to the NHSBSA?

Line-by-line reconciliation is possible and can be checked on an ad hoc basis by checking the PMR input vs the detailed pricing information available in the [Prescription Item Reports](#). Some pharmacy owners use software to automate this process. More information is available at:

cpe.org.uk/reconciling – see related FAQs regarding reconciliation of payments for electronic and paper prescriptions, which references use of the [Prescription Item Reports](#).

33. Do I need to manually input the dispensed quantity each time into the EPS claim message or is the quantity field automatically populated either when I generate the dispensing label or select the product from the dropdown picking list?

Many PMR systems do not require for the dispensed quantity to be manually input every time – given the workload implications. Suppliers are aware that most prescriptions (estimates indicate over 95% of prescriptions) the dispensed quantity value will default to the prescribed quantity. However, pharmacy teams will be given the option to manually override this by allowing an input of an alternative dispensed quantity.

34. How would I escalate an EPS or PMR issue regarding OPD?

For information on escalation processes of any PMR issues please see our one-page [NHS IT/EPS escalation guide](#).



Annex A – Worked examples

Products outside the scope of OPD +/- 10% rules

- 35. I have received a prescription for unlicensed Flunarizine 10mg tablets x 28, however the specials supplier can only supply in pack sizes of 30. Can I use the OPD +/-10% rules to supply and claim for a complete pack of 30 tablets?**

Flunarizine 10mg tablets is an unlicensed medicine listed in Part VIII D of the Drug Tariff. The OPD +/-10% rules do not apply to any specials. Unlicensed medicines must continue to be supplied in the exact quantity ordered (unless the product is classed a special container).

- 36. I have received a prescription for a Schedule 2 Controlled Drug, Dexamfetamine 10mg tablets x 28 tablets. As this product is only available in packs of 30, can I supply and claim for a complete pack of 30 tablets following OPD +/-10% rules?**

No, a pharmacist can only supply and claim for 28 tablets in accordance with quantity stated on the prescription. This is because Dexamfetamine is a Schedule 2 CD and the OPD +/-10% rules do not apply to any CDs in Schedules 1 to 4 of the Misuse of Drugs Act and Regulations. The OPD +/-10% rules can be applied to prescriptions for Schedule 5 Controlled Drugs (CDs), where appropriate

- 37. I have received a prescription for BD Viva hypodermic insulin needles for pre-filled / reusable pen injectors screw on 4mm/32gauge x 100 needles. As this product is only available in packs of 90 needles, can I use OPD +/-10% rules supply a complete pack of 90 needles?**

No, this is because any appliance listed in Part IX A in the Drug Tariff falls outside the scope of OPD arrangements. The OPD +/-10% rules do not apply to Part IX appliances so these must continue to be supplied in the exact quantity ordered, unless the product is classed as a special container. As BD Viva hypodermic insulin needles for pre-filled / reusable pen injectors screw on 4mm/32gauge is not a special container, the pharmacy should supply and be reimbursed for supplying 100 needles as ordered on the prescription.

Supplying the exact quantity ordered on the prescription

- 38. I have received a prescription for Estradiol 500microgram transdermal gel sachets x 14 sachets. As this products come in packs of 28, can I supply and claim for a complete pack of 28 tablets?**

No, this would fall outside of the OPD +/- 10% rules. Following the rounding down rules a quantity of 14 would only allow for the supply of 1 more or 1 less sachet. This is because 10% of 14 sachet works out to 1.4 tablets and following rounding rules a pharmacist can supply up to 1 more sachet or 3 less sachet than the prescribed quantity if it allows whole pack dispensing. As Estradiol 500microgram transdermal gel sachets are only available in a pack of 28 and the item is not

classed as a special container, pharmacists should dispense 14 sachets as prescribed and will be reimbursed accordingly.

Supplying up to 10% less of the prescribed quantity

- 39. I have received a prescription for Paroxetine 40mg tablets x 30. This product comes in packs of 28 and 30. Can I supply a complete pack of 28 tablets using OPD +/- 10% rules?**

If a prescription is received for a pack a 30 x Paroxetine 40mg tablets, the pharmacy should supply this pack size if it is readily available. If the 30 pack size is not readily available, a pharmacist can use the +/-10% OPD rules to supply two less tablets in order to provide a complete pack of 28 tablets. Reimbursement would be calculated based on the dispensed quantity using the Part VIII price listed in the Drug Tariff. In some cases where a much lower quantity is supplied (i.e. more than 10% less than the prescribed quantity), for example the patient only needed 14 tablets out of 28 ordered, the pharmacy would be reimbursed for 14 tablets dispensed. Please note, a patient receiving less than the prescribed quantity may need to re-order their next prescription earlier the following month. Good communication between the pharmacist, the GP and the patient will help to avoid any disruption to the patient's treatment.

- 40. I have received a prescription for Levothyroxine 50microgram tablets x 30. The only available pack size is 28 tablets. Can I use the OPD +/- 10% rules to supply the patient with a complete pack of 28 tablets?**

Yes, as a pack of 28 is the only pack size available, the OPD +/-10% rules would allow you to supply and claim for a complete pack size of 28 tablets against a prescription ordering 30 tablets. This is because 10% of 30 tablets works out to 3 tablets to enable a pharmacist to supply up to 3 more tablets or 3 less tablets than the prescribed quantity if it allows whole pack dispensing. Please note, a patient receiving up to 10% less than the prescribed quantity may need to re-order their next prescription earlier the following month. Good communication between the pharmacist, the GP and the patient will help to avoid any disruption to the patient's treatment.

Supplying up to 10% more of the prescribed quantity

- 41. I have received a prescription for Co-careldopa 12.5mg/50mg tablets x 84. The only available pack size is 90. Can I use the OPD +/-10% rules to supply the patient with a complete pack of 90 tablets?**

Yes, the OPD +/-10% rules would allow you to supply 6 more tablets and claim for a complete pack size of 90 tablets against a prescription ordering 84 tablets. This is because 10% of 84 tablets works out to 8.4 tablets, which once rounded down would enable a pharmacist to supply up to 8 more tablets or 8 less tablets than the quantity prescribed if it allows whole pack dispensing.

- 42. I have received a prescription for Evra® transdermal patches x 8 patches. Can I use OPD +/-10% rules to supply and claim for a complete pack size of 9 patches?**

Yes, as Evra® patches are available in packs of 9, the OPD +/-10% rules would allow pharmacists to supply 1 more patch and claim for a complete pack of 9 patches. 10% of 8 patches works out to 0.8 and following the rounding rules, pharmacists can supply up to 1 more or less patch if it allows whole pack dispensing.

- 43. I have received a prescription for a Schedule 5 Controlled Drug (CD), Dihydrocodeine 30mg tablets x 28 tablets. Can I apply OPD +/-10% rules to supply and claim for a complete pack size of 30 tablets?**

Yes, the OPD +/-10% rules can be applied to prescriptions for Schedule 5 Controlled Drugs (CDs), where appropriate. If a prescription orders 28 tablets, the pharmacy should supply this pack size if it is readily available. If the 28 pack size is not readily available, the pharmacist could apply OPD +/-10% rules to provide 2 extra tablets and claim for a complete pack size of 30 tablets. This is because 10% of 28 tablets works out to 2.8 tablets and following the rounding rules, pharmacists can supply up to 3 more tablets or 3 less tablets if it allows whole pack dispensing. For supplying a pack of 30, the pharmacy would be reimbursed based on Part VIII price listed in the Tariff. Please note as Dihydrocodeine is a Schedule 5 CD, pharmacists must apply their professional judgement to decide if it is clinically appropriate for the patient to receive more than the prescribed quantity particularly if there are any concerns of reliance or addiction.

- 44. I have received a prescription for Aspirin 300mg tablets x 128. This product comes in packs of 30 and 100. Can I use OPD +/-10% rules to supply and claim payment for a total of 130 tablets using a combination of the two different pack sizes available?**

Yes, OPD +/-10% rules would allow you to claim for 130 tablets (by supplying two different pack sizes of 30 and 100) against a prescription ordering 128 tablets. This is because 10% of 128 tablets works out to 12.8 tablets, which once rounded up would enable a pharmacist to supply up to 13 more or 13 less tablets than the quantity prescribed if it allows whole pack dispensing.

Supplying greater than 10% of the prescribed quantity

- 45. I have a received prescription for Colecalciferol 10,000units/ml oral drops sugar free x 15ml. This product is a special container in a pack size of 10ml. Can I apply OPD +/-10% rules to supply and claim payment for two complete packs of 10 ml?**

No, as the prescription orders 15ml x Colecalciferol 10,000units/ml oral drops sugar free, the pharmacy would only be reimbursed for one complete pack of 10ml. This is because Colecalciferol 10,000units/ml oral drops sugar free in 10ml pack size is listed as a special container in Part VIIIA of the Drug Tariff. For Colecalciferol 10,000units/ml oral drops sugar free, payment is based on the 10ml pack size because the quantity ordered of 15ml falls exactly halfway between the two pack sizes. If 16ml was ordered, this would allow a pharmacist to round up to the nearest pack size (or multiples of) to provide 20ml (2 packs of 10ml). Products classed as special containers are excluded from the OPD +/-10% rules so pharmacy owners can supply

and will be reimbursed for the nearest pack size (complete pack or sub pack) or combination of containers nearest to the quantity ordered.

46. I have received a prescription for Pyridostigmine bromide 60mg tablets x 168 tablets. This product is a special container in a pack size of 200 tablets. Can I supply and claim payment for a complete pack of 200 tablets against a prescription ordering 168 tablets?

Pyridostigmine bromide 60mg tablets in a pack size of 200 is listed as a special container in Part VIIIA of the Drug Tariff. If a prescription orders 168 x Pyridostigmine bromide 60mg tablets, the pharmacy would be reimbursed for a complete pack of 200 tablets. This is because products classed as special containers are excluded from the OPD +/-10% rules so pharmacy owners can supply and will be reimbursed for the nearest pack size (complete pack or sub pack) or combination of containers nearest to the quantity ordered.

For more information on special containers, please see our page [Special containers and products requiring reconstitution](#).

Original Pack Dispensing (OPD) Webinar

Community Pharmacy England hosted a webinar on the introduction of Original Pack Dispensing (OPD) on Monday, 25th November, at 7:30 pm.

The webinar featured in-house experts explaining these regulatory changes, their practical implications, and potential adjustments to dispensing processes.

- cpe.org.uk/original-pack-dispensing-opd-webinar/