NATIONAL DRUG SCHEDULING FACTORS

SCHEDULE I
#1 The need for the drug is identifiable only by the prescribing practitioner.
#2 Use of the drug requires adjunctive therapy or evaluation.
#3 Appropriate use of the drug may produce dependency.
#4 Serious adverse drug reactions are known to occur or have a recognized potential to occur at normal therapeutic dosage levels.
#5 There is a narrow margin of safety between the therapeutic and toxic dosages of the drug, either in the general population or in identified subpopulations, or in patients with multiple medical problems.
#6 Serious drug interactions are known to occur.
#7 Use of the drug has contributed to, or is likely to contribute to, the development of resistant strains of microorganisms.
#8 The medicinal ingredient is new, or is being used for a new indication that is not amenable to self-treatment, and the consequences of widespread use are not adequately established.

SCHEDULE II
#1 The initial need for the drug is identified or confirmed by a regulated health professional.
#2 Chronic therapy or subsequent re-treatments should be monitored by a pharmacist.
#3 The drug must be readily available under exceptional circumstances when a prescription is not practical.
#4 The drug is intended for administration in a health care setting or under the direction of a regulated health professional, or is an injectable dosage form and is not otherwise included in Schedule I.
#5 There is significant potential for misuse or abuse of the drug, due to its inherent pharmacological action or chemical properties.
#6 The selection of the drug requires intervention by a pharmacist:
   - to confirm that an appropriate self-assessment has been made by the patient; or
   - for a condition that is new to patient self-assessment; or
   - for a condition that is generally not amenable to patient self-assessment.
#7 Use of the drug may delay recognition or mask the symptoms of serious disease.
#8 The drug may cause serious or significant adverse drug reactions or drug interactions that cannot be adequately addressed through product labeling.
#9 Safe and appropriate use of the drug requires intervention by a pharmacist to reinforce or expand on limited, or complex, information that appears on product labeling.
#10 The medicinal ingredient is new or is in a new drug delivery system, for self-medication.

SCHEDULE III
#1 Chronic use may delay recognition or mask the symptoms of serious disease.
#2 The drug is a new ingredient for self-selected self-medication and the availability of a pharmacist to provide advice can promote appropriate use.
#3 The drug is used to treat a persistent, chronic or recurring condition and the availability of the pharmacist to provide advice can promote appropriate use.
#4 There is potential for misuse or abuse of the drug, due to its inherent pharmacological action or chemical properties.
#5 The availability of a pharmacist to reinforce or expand on product labeling, or where product selection is likely to cause confusion, could contribute to the safe and appropriate use of the drug.