

Pharmacist Checklist - Guidance for dispensing Roaccutane®



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Roaccutane[®] belongs to the retinoid class of drugs that cause severe birth defects. Fetal exposure to Roaccutane[®], even for short periods of time, presents a high risk of congenital malformations and miscarriage.

 $Roaccutane ^{@} is therefore strictly contraindicated during pregnancy and in women of childbearing potential, unless all conditions in the Roaccutane ^{@} Pregnancy Prevention Programme are fulfilled.$

A negative pregnancy test, issuing a prescription and dispensing Roaccutane[®] should ideally occur on the same day If you are aware that a pregnancy has occurred in a woman treated with Roaccutane[®], treatment should be stopped immediately and the woman should be promptly referred to the prescribing doctor.

If you are aware that a female patient has become pregnant within one month of stopping Roaccutane® she should be referred to her prescribing doctor.

As pharmacist, you should only dispense Roaccutane[®] after checking the following information:

For women of child-bearing potential:	
In order to support regular follow up, including pregnancy testing and monitoring, the prescription for Roaccutane® should ideally be limited to a 30-day supply.	
All patients should be instructed:	
Never to give the Roaccutane® to another person.	
To return any unused capsules to their pharmacist at the end of treatment.	
Not to donate blood during Roaccutane® therapy and for one month after discontinuation due to the potential risk to the foetus of a pregnant transfusion recipient.	
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Pharmacist Checklist - Guidance for dispensing Roaccutane $^{\rm @}$ | $^{\rm @}$ 2018 | Version 3