**Section 3100.410 Refilling of Prescription**

a) Each refilling of a prescription of a controlled substance listed in Schedules III, IV or V:

1) shall be entered on the back of the prescription or in the electronic prescription record;

2) shall indicate the date, quantity and name or initials of the dispensing pharmacist for each prescription;

3) shall be dated by the pharmacist as of the date of dispensing; and

4) shall state the amount dispensed.

b) If the pharmacist merely signs or initials and dates the back of the prescription, he or she shall be deemed to have dispensed a refill for the full face amount of the prescription.

c) A pharmacist may contact the prescriber to refill a Schedule III, IV or V controlled substance only at the request of a patient or patient's representative. The patient's agreement to utilize a pharmacy auto-fill program, medication adherence plan or long term care or similar related care contract constitutes a request from the patient.

(Source: Amended at 39 Ill. Reg. 3656, effective February 27, 2015)