



Private Prescriptions for NHS Patients

Contracts and Regulations

Patients not travelling abroad

You may write a private prescription for a NHS patient who is not travelling abroad provided it is for a drug that is not available on the NHS. These are normally drugs on the old Black List which is now included in NHS (GMS Contracts) (Prescription of Drugs etc.) Regulations 2004 Statutory Instrument 2004 No. 629.

Schedule 5 (Fees and Charges) of the NHS (GMS Contracts) Regulations 2004, and the parallel PMS Regulations, preclude you from making a charge for providing the prescription, but you are entitled to supply the drug to the patient provided you correctly label the drug. You may charge a dispensing fee on top of the price you have paid for the drug (including VAT). VAT cannot be reclaimed by a doctor unless registered for VAT.

Patients not travelling abroad

Patients travelling abroad may require medication to treat their continuing medical condition or as prophylaxis against tropical diseases. They may be travelling for holiday purposes or may be working abroad for a period of time.

It is reasonable for you to decide how best to supply medication, and if you normally provide three month prescriptions, then that is reasonable but a one month prescription is the national norm. Essentially, the NHS stops at the “White Cliffs of Dover” and patients would therefore be entitled to a one month repeat prescription when they attend in the UK but any drugs that are supplied for use when they are “resident” abroad should be provided through a private prescription. The patient would have to purchase the drugs from a chemist or from a doctor. Most computer prescription programmes have a facility for printing private prescriptions on the right hand side of the prescription form, so that generation of a private prescription is a simple procedure.

Clinical Responsibility

It is important to remember, when a doctor prescribes any drug, he/she is clinically and legally responsible for the sequelae. It might not be considered good clinical practice for a doctor to prescribe large amounts of drugs for patients going abroad for an extended period of time where the GP cannot monitor the patient’s condition until they return.

If patients travel to a EU country or other country with reciprocal arrangements to use a social security health system, they may be able to obtain drugs cheaper from a doctor abroad, but normally the reciprocal arrangements specifically apply to emergency treatment and for illnesses that begin while the patient is away. Chronic illness might not be covered. Patients can always consult a private doctor whilst away from home.

Clinical Responsibility

Again, Schedule 5 (Fees and Charges) of the NHS (GMS Contracts) Regulations 2004, and the parallel PMS Regulations, precludes you from making a charge for the prescription but you may supply the medication as long as you follow the labelling regulations. As dispensing private medication is outside the framework of the NHS, any doctor can supply

medication under provisions of the Medicines Act by virtue of being a registered medical practitioner.

All medication should be:

- dispensed in a proper container
- properly labelled with:
 - the name of the patient,
 - the name of the drug,
 - date of dispensing and,
 - the name of the doctor who dispensed the medication.
 - the batch number of the medicine
- have clear instructions on how to take the medication.

Doctors are unable to reclaim VAT on medicines that they dispense privately and therefore this has to be passed on to the patient. Provision of medicines by chemists is an exempt supply and they will reclaim VAT and not pass it on to the patient.

The batch number of dispensed medicines should be recorded in the patient record or other folio.

The preferred method of charging for private dispensing is:

- Net cost of the drug (incl VAT)
- + 50% of the net cost of the drug.

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