E-PRESCRIBING GUIDE – KETAMINE

SCHEDULE III CONTROLLED SUBSTANCE — E-PRESCRIBE ONLY (EPCS)

Ketamine prescriptions cannot be faxed, phoned, or handwritten. Paper order forms are not accepted — this guide replaces them.

How to E-Prescribe

1. **Search for our pharmacy in your EPCS-enabled EHR.** Search the pharmacy directory for "Bayview Pharmacy" — or by ZIP code 02886, Warwick, RI. Your platform must be EPCS-certified with identity proofing and two-factor authentication.
2. **Verify you have the right location.** Confirm the listing matches the details in the box below before selecting it.
3. **Pick a drug entry that validates as controlled.** Your EHR's drug database does not contain compounded ketamine. Select **"Ketamine (bulk) powder"** — it must be the controlled-substance entry or EPCS will not validate the prescription. Do **not** select the brand name Ketalar® or an injectable product.
4. **Enter the formulation and transmit.** Lead with the Bayview code, then the full formulation, strength, quantity, directions, days' supply, and refills as permitted for Schedule III (up to 5 refills within 6 months, where state law allows). Include an ICD-10 diagnosis code.

IMPORTANT Put the formulation in the **sig / prescription body**, not in "Notes to Pharmacy". Some EHRs treat that field as internal and never transmit it — the prescription arrives with no formula and cannot be filled.

Pharmacy Name	Bayview Pharmacy
Address	3844 Post Road, Warwick, RI 02886
NCPDP ID	4106882
NPI	1750455143
Phone	(401) 284-4505
Fax	(401) 284-4506 (not valid for ketamine prescriptions)

PRESCRIBE WITH BAYVIEW CODES

Every validated formulation has a short Bayview code (like **KET-T100**) — listed on the validated formulations sheet on page 2. Lead with the code in your compound / free-text entry and write the strength where the formulation is custom:

> **Bayview KET-T100 — ketamine HCl 100 mg troche, strawberry, #30 — dissolve 1 troche between cheek and gum, hold 10–15 minutes, once daily as directed by the supervised treatment plan, 30-day supply. Refills: 2. ICD-10: F33.1**

Quantity: no more than **100 dosage units** per prescription (troches, tablets, or mL of nasal spray). **Refills:** maximum of 5 within 6 months of the issue date.

Nasal spray: state the concentration and the bottle size (5 or 10 mL); each spray delivers 0.1 mL. **Troches:** name the flavor (strawberry, watermelon, lemon, or flavorless). **Custom strengths:** write "Bayview KET-TC" (troche, 10–300 mg) or "Bayview KET-RC" (rapid-dissolve tablet, 10–500 mg) and the strength.

Compounded ketamine is dispensed only for use under a prescriber-supervised treatment plan. Directions should say when and where the dose is taken and that the patient must not drive for 24 hours after a dose.

Questions? Call (401) 284-4505 and one of our pharmacists will walk you through it.

Validated Formulations – Ketamine

Companion to the E-Prescribing Guide • Codes identify the form and strength — the prescriber may set a custom strength within the validated range • E-prescribe only (EPCS) • Schedule III

NASAL SPRAY — 0.1 mL per spray	dispensed per mL (5 or 10 mL bottle)
KET-NS10 Ketamine 10 mg/mL nasal spray (1 mg per spray)	5 | 10 mL
KET-NS50 Ketamine 50 mg/mL nasal spray (5 mg per spray)	5 | 10 mL
KET-NS100 Ketamine 100 mg/mL nasal spray (10 mg per spray)	5 | 10 mL
KET-NSL Ketamine 25 mg/mL + lidocaine 4% nasal spray	5 | 10 mL

TROCHE — flavor: strawberry / watermelon / lemon / flavorless	dispensed per troche
KET-T50 Ketamine 50 mg troche	30 | 60 | 90
KET-T100 Ketamine 100 mg troche	30 | 60 | 90
KET-T200 Ketamine 200 mg troche	30 | 60 | 90
KET-T300 Ketamine 300 mg troche	30 | 60 | 90
KET-TC Ketamine ____ mg troche — prescriber-set strength, validated range 10–300 mg	30 | 60 | 90

RAPID DISSOLVE TABLET — sublingual	dispensed per tablet
KET-R300 Ketamine 300 mg rapid dissolve tablet	30 | 60 | 90
KET-R400 Ketamine 400 mg rapid dissolve tablet	30 | 60 | 90
KET-R500 Ketamine 500 mg rapid dissolve tablet	30 | 60 | 90
KET-RC Ketamine ____ mg rapid dissolve tablet — prescriber-set strength, validated range 10–500 mg	30 | 60 | 90

No prescription is dispensed for more than 100 dosage units. Quantities shown are the usual dispensing counts.

Prescribing checklist: (a) Bayview code or full formulation and strength; (b) quantity in dosage units (max 100); (c) flavor for troches; (d) directions/SIG including the supervised-use plan; (e) days' supply; (f) refills (max 5 within 6 months); (g) ICD-10 diagnosis code. **Not listed?** Additional strengths may be available — call the pharmacy to confirm before prescribing.

FDA NOTICE Compounded ketamine is not FDA-approved. The FDA's October 10, 2023 alert warns of serious adverse events with compounded ketamine used at home without monitoring. Prescribe only within a supervised treatment plan.

3844 Post Road, Warwick, RI 02886 · Phone: (401) 284-4505 · NCPDP 4106882