



REPUBLIC OF THE PHILIPPINES
OFFICE OF THE PRESIDENT

DANGEROUS DRUGS BOARD

**BOARD REGULATION NO. 10
SERIES OF 2025**

**SUBJECT: PREEMPTIVE RESPONSE TO EMERGING PUBLIC HEALTH CONCERNS
THROUGH TEMPORARY AUTHORIZATION OF ORDINARY
PRESCRIPTIONS FOR DANGEROUS DRUGS**

WHEREAS, the World Health Organization (WHO) declared the global mpox outbreak as a Public Health Emergency of International Concern on 14 August 2024, in view of the continued spread and growing threat posed by the disease to vulnerable populations;

WHEREAS, the United States Centers for Disease Control and Prevention (CDC) has reported mpox cases in 122 countries as of 2 June 2025, while the Department of Health (DOH) has recorded a total of 911 confirmed mpox cases in the country between 2024 and May 2025;

WHEREAS, the WHO has also reported a resurgence of COVID-19 cases in the Eastern Mediterranean, Southeast Asia, and Western Pacific regions as of February 2025, prompting the WHO Director General to extend the effectivity of the International Health Regulations (IHR) Standing Recommendations on COVID-19 until 30 April 2026;

WHEREAS, the IHR Standing Recommendations call upon State Parties, including the Republic of the Philippines, to ensure optimal clinical care for COVID-19 patients, facilitate access to evidence-based treatments and health products, and support efficient regulatory pathways for diagnostics, therapeutics, and vaccines;

WHEREAS, under Republic Act No. 11166 or the "Philippine HIV and AIDS Policy Act," the government recognizes the HIV and AIDS situation as a matter of public health concern imbued with public interest, and the Department of Health recently disclosed, on 3 June 2025, a 500% increase in HIV infections among the youth sector, signifying a grave and urgent health crisis;

WHEREAS, these concurrent public health emergencies underscore the need to address systemic barriers to access essential medicines, including those containing dangerous drugs that are critical in the clinical management of patients with mpox, COVID-19, and HIV-related complications;

WHEREAS, the current system of prescribing medicines and pharmaceutical products containing dangerous drugs through the use of DOH-issued special (yellow) prescription forms needs to enhance its accessibility, particularly on the context of emergency situations as well as the underserved or high-risk communities;

WHEREAS, part of the mitigation strategy for these public health issues is to facilitate a more efficient means of prescribing medicines and pharmaceutical products containing dangerous drugs. Thus, it is imperative to adopt responsive, science-based, and patient-centered policies that support the continuity of care, ease regulatory burdens on health professionals, and safeguard public health in times of emergency;

WHEREAS, the Board under DDB Regulation No. 1, Series of 2014 has provided for the guidelines in prescribing medicines and pharmaceutical products containing dangerous drugs both under ordinary and extraordinary circumstances, including the treatment for certain disorders such as epilepsy and dystonia;

WHEREAS, Section 40(b) of Republic Act No. 9165, as amended, otherwise known as the “Comprehensive Dangerous Drugs Act of 2002,” provides that in emergency cases, as the Dangerous Drugs Board (DDB) may specify in the public interest, prescriptions for medicines and pharmaceutical products containing dangerous drugs need not be accomplished in special (yellow) prescription forms;

WHEREFORE, the Board, by exercising its authority under Section 40(b) of Republic Act No. 9165, as amended, hereby promulgates this Regulation:

Section 1. Declaration of policy—The Board authorizes the use of ordinary prescriptions in prescribing any dangerous drug preparations to allow physicians and other medical professionals to effectively address the diseases, illnesses, infections, and symptoms associated with the global health concern on mpox; the regional increase in COVID19; and the local surge in HIV cases.

Section 2. Coverage— This Regulation applies to medical practitioners with a valid and subsisting S2 license.

Section 3. Content of the prescription—The prescribing physician shall issue the ordinary prescription in three copies. The first copy (marked as “ORIGINAL” on the face of the prescription) shall be surrendered to the dispensing drugstore or pharmacy. The second copy (marked as “DUPLICATE” on the face of the prescription) shall be kept by the patient or their authorized representative. The third copy (marked as “TRIPLICATE” on the face of the prescription) shall be retained by the prescribing physician.

The prescription issued in three copies shall contain only one dangerous drug or one preparation containing dangerous drugs. Thus, the physician shall issue as many prescriptions in triplicate copies as the number of drugs or drug preparations prescribed for the patient.

All three copies of the prescription shall contain the following information:

- (a) Full name, complete business address, and telephone/ registered mobile phone number/official email address of the prescribing physician;
- (b) Number and period of validity of the S2 license, as well as the Professional Tax Receipt, of the prescribing physician;

- (c) Full name, age, and current address of the patient;
- (d) Issuance date of the prescription;
- (e) Generic and brand name of the prescribed drug or preparation;
- (f) Dosage strength and form;
- (g) Total number of dosage units or total quantity of preparation in words and numerical equivalent;
- (h) Direction of use for the drug or drug preparation, which should be strictly specific and cannot be substituted with “TAKE AS DIRECTED,” “TAKE AS REQUIRED,” or analogous generic phrases;
- (i) Phrase “NO REFILL” on the face of the prescription;
- (j) Wet signature of the prescribing physician.

The required information on the prescription may be typewritten or printed, except the direction of use and the signature which should be affixed by the prescribing physician by hand.

Section 4. Duration of the prescription— In all cases, the physician may issue a prescription of drug or drug preparation with a supply for up to thirty (30) days.

Except for the treatment of epilepsy and dystonia, considering these are lifelong conditions, the physician may prescribe a supply which can last for sixty (60) days of drugs or drug preparations under Schedule 4 of the Philippine schedule for controlled substances.

Section 5. Supplemental prescription— If the condition of the patient requires a longer medication than originally assessed, the physician may issue a supplemental prescription within thirty (30) days of the initial prescription. Such supplemental prescription can indicate a supply of drug or drug preparation for thirty (30) days.

Section 6. Multi-month prescriptions— If the clinically required duration of medication exceeds thirty (30) days, the physician may also opt to issue up to three (3) prescriptions simultaneously (i.e., same issuance date)—each prescription not exceeding a 30-day supply—for drugs or drug preparations listed in Schedule IV of the 1971 Convention on Psychotropic Substances.

In such instances of multiple prescriptions issued simultaneously, the physician shall—in addition to the required content under Section 3 of this Regulation—indicate the sequence number on the face of each prescription (e.g., “1ST OF 3,” “2ND OF 3,” “3RD OF 3”) and provide specific instructions regarding when the drug or drug preparation covered by each subsequent prescription may be taken, following the completion of the previous prescription’s dosage.

Section 7. Duty of the dispensing pharmacist— When the full quantity of the prescribed drug or drug preparation is dispensed, the pharmacist shall write, type, or stamp “USED IN FULL” in bold print across the face of both the original and duplicate copies of the prescription. The pharmacist shall also affix their wet signature to both copies.

If the full quantity is not dispensed, the pharmacist shall write, type, or inscribe “USED FOR [number of doses/units dispensed] ONLY;” clearly indicate the remaining balance of the undispensed drug or drug preparation in both words and numbers on the face of the prescription; and affix their wet signature on both the original and duplicate copies.

The dispensing pharmacists remain governed by Board Regulation No. 1, series of 2014.

Section 8. Duty of the licensed medical practitioners—The prescribing physician shall keep file of the triplicate copy and record the same in a register with the following information using the attached template¹ during the effectivity of this Regulation. Such record shall be made available upon inspection by PDEA at all times.

Section 9. Implementation— This Regulation shall remain in force until June 30, 2026, unless earlier repealed by the Board upon the abatement of the public health concerns which warranted its issuance.

Section 10. Criminal and administrative sanctions— Any physician who issues an unnecessary prescription shall be criminally liable under Section 18 of Republic Act No. 9165, as amended. Any person, who, unless authorized by law, shall make or issue a prescription or any other writing purporting to be a prescription for any dangerous drug, shall be criminally liable under Section 19 of the same law. Any person, who, unless authorized by law, shall dispense any dangerous drugs shall be criminally liable under Section 5 thereof. All other violations of this Regulation, such as illegal diversion of prescribed drugs or drug preparations, shall be prosecuted under Section 32 of Republic Act No. 9165, as amended.

Criminal prosecution of offenders does not preclude the imposition of administrative sanctions by the Philippine Drug Enforcement Agency (PDEA) under Section 51 of Board Regulation No. 1, series of 2014.

Section 11. Inconsistent regulations—The contrary provisions of Board Regulation No. 1, series of 2014, as well as other regulations, issuances, and rules inconsistent with this Regulation, are hereby suspended during the effectivity of this Regulation.

Section 12. Separability—If any provision or part of this Regulation is declared unauthorized, unconstitutional, or invalid by any court of law, those provisions not affected by such declaration shall remain valid and effective.

Section 13. Effectivity—These guidelines shall take effect fifteen (15) days after its publication in two (2) newspapers of general circulation and after its registration with the Office of the National Register (ONAR), UP Law Center, Quezon City.

¹ Annex A

APPROVED and **ADOPTED** via *ad referendum*, this 26th day of June, in the year of our Lord, 2025, in Quezon City, Philippines.


Secretary OSCAR F. VALENZUELA
Chairperson



Attested by:


Undersecretary EARL P. SAAVEDRA, CESO I
Board Secretary / Executive Director V

ANNEX “A”

NAME OF PHYSICIAN _____

S2 LICENSE NUMBER _____

ADDRESS _____

VALIDITY _____

Date Prescribed	Patients Name	Age	Address	Generic/Brand Name Dosage Strength & Form	Diagnosis	Quantity Prescribed	SIGNA	Remarks