

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 19 PHARMACISTS
PART 20 CONTROLLED SUBSTANCES

16.19.20.1 ISSUING AGENCY: Board of Pharmacy.
[16.19.20.1 NMAC - Rp 16.19.20.1 NMAC, 6/26/2018, A, 12/15/2020]

16.19.20.2 SCOPE: All persons or entities that manufacture, distribute, dispense, administer, prescribe, deliver, analyze, or conduct research using controlled substances.
[16.19.20.2 NMAC - Rp 16.19.20.2 NMAC, 6/26/2018]

16.19.20.3 STATUTORY AUTHORITY: Section 30-31-11 of the Controlled Substances Act, 30-31-1 through 30-31-42 NMSA 1978, authorizes the board of pharmacy to promulgate regulations and charge reasonable fees for the registration and control of the manufacture, distribution and dispensing of controlled substances. Paragraph (2) of Subsection B of Section 61-11-6 authorizes the board to provide by regulation for the electronic transmission of prescriptions.
[16.19.20.3 NMAC - Rp 16.19.20.3 NMAC, 6/26/2018, A, 12/15/2020]

16.19.20.4 DURATION: Permanent.
[16.19.20.4 NMAC - Rp 16.19.20.4 NMAC, 6/26/2018]

16.19.20.5 EFFECTIVE DATE: June 26, 2018, unless a different date is cited at the end of a section.
[16.19.20.5 NMAC - Rp 16.19.20.5 NMAC, 6/26/2018]

16.19.20.6 OBJECTIVE: The objective of Part 20 of Chapter 19 is to protect the public health and welfare of the citizens of New Mexico by controlling and monitoring access to controlled substances and to give notice of the board's designation of particular substances as controlled substances.
[16.19.20.6 NMAC - Rp 16.19.20.6 NMAC, 6/26/2018]

16.19.20.7 DEFINITIONS: [RESERVED]
[16.19.20.7 NMAC - Rp 16.19.20.7 NMAC, 6/26/2018]

16.19.20.8 REGISTRATION REQUIREMENTS: Persons required to register:

- A.** manufacture - term includes repackagers;
- B.** distributors - term includes wholesale drug distributors;
- C.** dispensers - pharmacies, hospital pharmacies, clinics (both health and veterinarian);
- D.** practitioners - includes a physician, doctor of oriental medicine, dentist, physician assistant, certified nurse practitioner, clinical nurse specialist, certified nurse-midwife, veterinarian, pharmacist, pharmacist clinician, certified registered nurse anesthetists, psychologists, chiropractic examiner, euthanasia technicians or other person licensed or certified to prescribe and administer drugs that are subject to the Controlled Substances Act. Practitioners, excluding veterinarians, must register with the New Mexico prescription monitoring program in conjunction with their controlled substance registration.
- E.** scientific investigators or researchers;
- F.** analytical laboratories and chemical analysis laboratories;
- G.** teaching institutes;
- H.** special projects and demonstrations which bear directly on misuse or abuse of controlled substances - may include public agencies, institutions of higher education and private organizations;
- I.** registration waiver: an individual licensed practitioner (e.g., intern, resident, staff physician, mid-level practitioner) who is an agent or employee of a hospital or clinic, licensed by the board, may, when acting in the usual course of employment or business, order controlled substances, for administration to the patients of the facility, under controlled substance registration of the hospital or clinic in which he or she is employed provided that:
 - (1)** the ordering of controlled substances for administration, to the patients of the hospital or clinic, is in the usual course of professional practice and the hospital or clinic authorizes the practitioner to order controlled substances for the administration to its patients under its state controlled substance registration;
 - (2)** the hospital or clinic has verified with the practitioner's licensing board that the

practitioner is permitted to order controlled substances within the state;

(3) the practitioner acts only within their scope of employment in that hospital or clinic;

(4) the hospital or clinic maintains a current list of practitioners given such authorization and includes the practitioner's full name, date of birth, professional classification and license number, and home and business addresses and phone numbers;

(5) the list is available at all times to board inspectors, the DEA, law enforcement and health professional licensing boards; and

(6) the hospital or clinic shall submit a current list of authorized practitioners with each hospital or clinic controlled substance renewal application.

[16.19.20.8 NMAC - Rp 16.19.20.8 NMAC, 6/26/2018]

16.19.20.9 REGISTRATION AND EXPIRATION DATES:

A. Any person who is required to be registered and who is not registered may apply for registration at any time.

B. In December 1982 all registrant renewal dates will be assigned to one of 12 groups which shall correspond to the months of the year. Thereafter, any person who first registers will also be assigned to one of the 12 groups.

C. Expiration date of the registration of all individuals or businesses within any group will be the last day of the month designated for that group. Renewal date will be within 30 days of the date shown on the registration permit and will expire on that date if not renewed by the registrant.

[16.19.20.9 NMAC - Rp 16.19.20.9 NMAC, 6/26/2018; A, 12/17/2019; A, 10/10/2023]

16.19.20.10 REGISTRATION FEE:

A. The registration fee or renewal fee required by the Controlled Substances Act shall be as listed in 16.19.12 NMAC

B. Research applicants registered as a practitioner shall not be required to register as a scientific investigator if he is registered as a practitioner. However, this does not exempt him from the regulations applicable to a scientific investigator.

C. Duplicate license - \$10.00

[16.19.20.10 NMAC - Rp 16.19.20.10 NMAC, 6/26/2018, A, 12/15/2020]

16.19.20.11 APPLICATION FORMS: Application forms may be obtained from the board of pharmacy, Albuquerque, New Mexico.

[16.19.20.11 NMAC - Rp 16.19.20.11 NMAC, 6/26/2018]

16.19.20.12 SCHEDULES: Applications shall designate the schedule of controlled substances and whether the application is for narcotic or non-narcotic in schedules I through V.

[16.19.20.12 NMAC - Rp 16.19.20.12 NMAC, 6/26/2018]

16.19.20.13 SEPARATE REGISTRATION OF EACH PRINCIPAL PLACE OF BUSINESS: Separate registration is required for each principal place of business or professional practice with the address indicated on the application if drugs are dispensed or distributed from the different locations. **NOTE:** This does not include warehouse storage areas; office used by agents for soliciting which contain no controlled substances other than samples, physician's office where controlled substances are prescribed but not administered or otherwise dispensed.

[16.19.20.13 NMAC - Rp 16.19.20.13 NMAC, 6/26/2018]

16.19.20.14 INFORMATION REQUIRED:

A. The board shall register an applicant to manufacture or distribute controlled substances unless it determines that the issuance of that registration would be inconsistent with the public interest. In determining the public interest, the board may consider the following factors from information listed on the application:

(1) maintenance of effective controls against diversion of controlled substances;

(2) compliance with applicable state and local law;

(3) any convictions of the applicant under any federal or state laws relating to any controlled substance;

(4) past experience in the manufacture or distribution of controlled substances, and the existence in the applicant's establishment of effective controls against diversion;

(5) furnishing by the applicant of false or fraudulent material in any application filed under the Controlled Substances Act;

(6) suspension or revocation of the applicant's federal registration to manufacture, distribute or dispense controlled substances as authorized by federal law; and

(7) any other factors relevant to and consistent with the public health and safety.

B. Each application shall include all information as required on the application form, including but not limited to a current DEA registration and professional license, and shall be signed by the applicant.

[16.19.20.14 NMAC - Rp 16.19.20.14 NMAC, 6/26/2018]

16.19.20.15 FACILITY INSPECTION: The board of pharmacy may direct the drug inspector to inspect the facilities prior to approval of any application for security provision and other applicable standards as required by the Controlled Substances Act.

[16.19.20.15 NMAC - Rp 16.19.20.15 NMAC, 6/26/2018]

16.19.20.16 PROCEDURE SUMMARY, RESEARCH: A scientific investigator or research applicant shall submit a summary of procedures indicating the nature, extent and duration of such research. The summary shall also include the names of individuals engaged in the project (other than those exempt under the Controlled Substances Act) the name or names of the substances to be used in the research project, the adequacy of safeguards against diversion of the controlled substance(s) to be used, source of supply of controlled substance(s) if applicable, and evidence of FDA and DEA approval and registration if registered by the federal agencies.

[16.19.20.16 NMAC - Rp 16.19.20.16 NMAC, 6/26/2018; A, 12/17/2019]

16.19.20.17 ANALYTICAL LABORATORIES:

A. Analytical laboratory applicants shall submit application on the form provided by the board. All applicable questions on the application shall be filled in and signed by the person in charge of the facility.

B. Quantities of controlled substances in possession of analytical laboratories shall be limited to such quantities as required for reference standards, assays or other scientific purposes.

[16.19.20.17 NMAC - Rp 16.19.20.17 NMAC, 6/26/2018]

16.19.20.18 EXEMPTION OF LAW ENFORCEMENT OFFICIALS: Registration is waived for the following persons:

A. Any officer or employee of the state or federal customs agency, the state police, or any enforcement officer of any political subdivision of the state, who is engaged in the enforcement of any federal, state and local law relating to controlled substances and is duly authorized to possess controlled substances in the course of his official duties.

B. Any official exempted by this section may procure any controlled substance in the course of an inspection pursuant to Section 31 of the Controlled Substances Act or in the course of any criminal investigation involving the person from whom the substance was procured.

C. Laboratory personnel, when acting in the scope of their official duties, are also exempt from registration under the Controlled Substances Act.

[16.19.20.18 NMAC - Rp 16.19.20.18 NMAC, 6/26/2018]

16.19.20.19 MODIFICATION, TRANSFER AND TERMINATION OF REGISTRATION:

A. Modification of a registration to authorize additional controlled substances may be made by filing an application in the same number as an application for a new registration. No fee shall be required for such modification.

B. Registration shall terminate if and when a registrant dies, discontinues business or professional practice, has his professional license revoked or suspended, no longer possesses a DEA registration or has had his DEA registration revoked or suspended, or changes his name or address as shown on the registration. In such instances, the registrant or his estate shall notify the board of pharmacy promptly of such fact and return certificate of registration to the board within 30 days.

C. Inventories and records of controlled substances listed in schedules II, III, IV and V shall be maintained either separately from all other records or in such form that the information required is readily retrievable from ordinary business records of the registrant.

D. In the event of a change in name or address the person shall file an application in the same number as an application for modification of a registration. No fee shall be required for such modification.

E. Registration under the Controlled Substances Act shall not be transferable.
[16.19.20.19 NMAC - Rp 16.19.20.19 NMAC, 6/26/2018]

16.19.20.20 INVENTORY RECORDS:

- A.** All registrants are required to keep inventory and procurement records.
- B.** All registrants shall comply with the following inventory requirements: schedule I, II, III, IV and V initial, annual, newly controlled substances, change in pharmacist in charge, and transfer of pharmacy ownership.
- C.** All registrants shall conduct an initial inventory of all controlled substances on hand on the date they first engage in controlled substances activity. In the event a registrant commences business with no controlled substances on hand, he/she shall record this fact on the initial inventory.
- D.** The annual inventory date shall be May 1 or on the registrant's regular general physical inventory date, provided that the registrant shall notify the board of pharmacy of the set alternate annual inventory date. The actual taking of the inventory should not vary more than four days before or after the annual inventory date (May 1 or set alternate date).
- E.** On the effective date that a substance is added to any schedule of controlled substances, which substance was, immediately prior to that date, not listed on any schedule, every registrant who possesses that substance shall take an inventory of all stock of the substance on hand and file this record with the other inventory records as required.
- F.** Upon the change of a pharmacist-in-charge, an inventory of all controlled substances shall be taken within 72 hours, by the new pharmacist-in-charge.
- G.** Upon transfer of ownership of a pharmacy, an inventory of all controlled substances shall be taken by the pharmacist-in-charge.
- H.** The inventory shall include:
- (1) the date;
 - (2) time taken (i.e., opening or close of business);
 - (3) drug name;
 - (4) the drug strength;
 - (5) the drug form (e.g., tablet, capsule, etc.);
 - (6) the number of units or volume;
 - (7) the total quantity. A commercial container which has been opened shall be the exact count or measure of substances listed in schedule I or schedule II. If the substance is listed in schedule III, IV or V, he shall make an estimated count or measure of the contents, unless the container holds more than 1,000 tablets or capsules in which case the count must be exact;
 - (8) expired or unusable controlled substances shall be documented as such, and inventoried.
 - (9) The name, address and DEA registration number of the registrant.
 - (10) The signature of the person or persons responsible for taking the inventory.

[16.19.20.20 NMAC - Rp 16.19.20.20 NMAC, 6/26/2018; A, 12/17/2019]

16.19.20.21 INVENTORY RECORDS OF MANUFACTURERS AND REPACKAGERS: Manufacturers and repackagers inventory records shall contain the following information:

- A.** Finished form:
- (1) name of substance;
 - (2) each finished form of the substance (10 milligram tablet, etc.)
 - (3) the number of units or volume of each finished form in each commercial container (100 tablet bottle, etc.)
 - (4) the number of commercial containers of each such finished form.
- B.** Controlled substances not included above such as damaged, defective impure substances awaiting a disposal giving total quantity and the name of the substance. A statement of reason for the substance being included in this category.

[16.19.20.21 NMAC - Rp 16.19.20.21 NMAC, 6/26/2018]

16.19.20.22 DISTRIBUTION INVENTORY RECORDS: Distributor inventory records shall contain the same information required of manufacturers.

[16.19.20.22 NMAC - Rp 16.19.20.22 NMAC, 6/26/2018]

16.19.20.23 INVENTORY REQUIREMENTS - RESEARCH:

A. Research registrant shall include in his inventory the name of the substance, each finished form of the substance, the number of units or volume of each finished form in each commercial container (100 tablet bottle, etc.) and the number of commercial containers of each such finished form.

B. A commercial container which has been opened shall be the exact count or measure of substances listed in schedule I or schedule II. If the substance is listed in schedule III, IV or V, he shall make an estimated count or measure of the contents, unless the container holds more than 1,000 tablets or capsules in which case the count must be exact.

[16.19.20.23 NMAC - Rp 16.19.20.23 NMAC, 6/26/2018]

16.19.20.24 ANALYTICAL LABORATORIES: Analytical laboratories shall include in the inventory record the same information required of manufacturer's.

[16.19.20.24 NMAC - Rp 16.19.20.24 NMAC, 6/26/2018]

16.19.20.25 CONTROLLED SUBSTANCES INVENTORIES AND RECORDS:

A. Pharmacies, hospitals, clinics and practitioners who dispense controlled substances shall maintain inventories and records of controlled substances listed in schedules II and II-N separately from all of the other prescription records.

B. "Readily retrievable" means records kept in such a manner as to be easily separated out from all other records in a reasonable time or records are kept on which certain items are redlined, starred or in some manner are visually identifiable apart from other items appearing on the record.

[16.19.20.25 NMAC - Rp 16.19.20.25 NMAC, 6/26/2018]

16.19.20.26 PROCUREMENT RECORDS: "Order forms" refer to DEA form 222 or its electronic equivalent required for distribution or procurement of a schedule I or II controlled substance under the federal act.

[16.19.20.26 NMAC - Rp 16.19.20.26 NMAC, 6/26/2018; A, 12/17/2019]

16.19.20.27 ORDER FORMS AS RECORDS: Order forms for schedule I and II controlled substances shall be deemed proper record of receipt, if the purchaser records on copy 3 of the order form the number of commercial or bulk containers furnished of each item and the date on which such containers are received by the purchaser.

[16.19.20.27 NMAC - Rp 16.19.20.27 NMAC, 6/26/2018]

16.19.20.28 INVENTORY RECORDS: All schedule I and II narcotic substance inventory records and procurement records will be kept separate from other records of the registrant.

[16.19.20.28 NMAC - Rp 16.19.20.28 NMAC, 6/26/2018]

16.19.20.29 PROCUREMENT RECORDS: Procurement records, other than the inventory, may be kept at a central location, rather than at the registered location, if prior approval has been obtained under the federal regulations; provided such records are delivered, upon request of the board, to the registered location within 48 hours of such request.

[16.19.20.29 NMAC - Rp 16.19.20.29 NMAC, 6/26/2018]

16.19.20.30 DISPOSITION RECORDS: Practitioner's disposition records shall include date of dispensing, name of patient, name and strength of substance and amount dispensed.

[16.19.20.30 NMAC - Rp 16.19.20.30 NMAC, 6/26/2018]

16.19.20.31 PHARMACY AND HOSPITAL PRESCRIPTION AND DISPENSING RECORDS:

A. Prescriptions for schedule II shall be maintained in a separate file.

B. In pharmacies without computerized prescription information, prescriptions for schedules II, III, IV and V shall have the name of the dispensing pharmacist and the date filled inscribed on the face of the prescription. (Typewritten, printed or rubber stamp are acceptable.)

C. Prescriptions for schedule III, IV and V shall be maintained either in a separate file only, or in such form that they are readily retrievable from other records of the pharmacy. "Readily retrievable" means that at the time of filing, the face of the prescription is stamped in red ink in the lower right hand corner with the letter "C" no less than one inch high, or the records comply with 16.19.6.22 NMAC "Computerized Prescription Information".

D. Prescriptions so marked may then be filed with prescriptions for schedule II substances, or in the usual consecutively numbered prescription file for non-controlled drugs.

E. Pharmacies employing automatic data processing systems or other electronic record keeping systems for prescriptions must comply with 16.19.6.22 NMAC "Computerized Prescription Information".

F. Hospital floor stock records. A record of controlled substances administered from floor stock shall contain the following information:

- (1) name of patient;
- (2) date and time administered;
- (3) name of drug;
- (4) strength of drug;
- (5) amount administered;
- (6) name of prescribing physician;
- (7) name of person administering the controlled substance.

[16.19.20.31 NMAC - Rp 16.19.20.31 NMAC, 6/26/2018]

16.19.20.32 RESEARCH DISPOSITION RECORDS:

A. A registered person using any controlled substance under FDA regulations in research at a registered establishment which maintains records in accordance with FDA approved research requirements is not required to keep records if he notifies the DEA and the board of pharmacy of the name, address and all registration numbers of establishments maintaining such records.

B. A registered person using any controlled substance in preclinical research or in teaching at a registered establishment which maintains records of such substances is not required to keep records if he notifies the DEA and the board of pharmacy of the name, address and all registration numbers of the establishments maintaining the records.

[16.19.20.32 NMAC - Rp 16.19.20.32 NMAC, 6/26/2018]

16.19.20.33 MANUFACTURERS AND REPACKAGERS:

A. Disposition records shall be maintained on all controlled substances. Schedule I and II records shall be maintained separately from all other records.

B. Disposition records for schedules III, IV and V shall be maintained either separately from all other records or in such form that the information required is readily retrievable from the ordinary business records of the registrant.

[16.19.20.33 NMAC - Rp 16.19.20.33 NMAC, 6/26/2018]

16.19.20.34 WHOLESALE DISTRIBUTORS: Wholesale distributors disposition records shall contain the same information required of manufacturers.

[16.19.20.34 NMAC - Rp 16.19.20.34 NMAC, 6/26/2018]

16.19.20.35 ANALYTICAL LABORATORIES RECORDS: Analytical laboratories records shall include:

- A.** name of substance;
- B.** the form or forms in which substance is received, imported or manufactured and the concentration of the substance;
- C.** quantity and strength received;
- D.** date of receipt;
- E.** name and DEA registry number of supplier;
- F.** adequate record of distribution.

[16.19.20.35 NMAC - Rp 16.19.20.35 NMAC, 6/26/2018]

16.19.20.36 REPORT OF LOSS OR THEFT OF A CONTROLLED SUBSTANCE:

A. The registered supplier shall be responsible for reporting in-transit losses of controlled substances by a common carrier or contract carrier selected by the supplier upon discovery of such loss or theft. Registrant shall complete DEA form 106 as required and furnish a copy to the board of pharmacy.

B. A significant loss or theft of a controlled substance shall be reported in writing to the board of pharmacy and DEA on form 106 as required by federal regulations. "Significant loss" includes suspected diversions, in-transit losses or any other unexplained loss and must be reported to the board of pharmacy within five days of becoming aware of that loss.

[16.19.20.36 NMAC - Rp 16.19.20.36 NMAC, 6/26/2018; A, 12/17/2019]

16.19.20.37 HOSPITALS, INSTITUTIONS AND CLINICS: Disposal of excess or undesirable controlled substances resulting from extemporaneous amounts of residue or wasted controlled substances. A registrant who needs to dispose of excess or undesirable controlled substances resulting from injections from ampules or less than the full ampule or other such circumstances shall record in accordance with DEA regulations [e.g. 21 CFR 1304.22(c) or successor regulation], and two persons (at least one who is a licensed health care professional) shall witness and record disposal. The registrant will have implemented security controls and procedures that ensure pharmaceutical wastage is not diverted. The disposal method shall render the substance irretrievable.
[16.19.20.37 NMAC - Rp 16.19.20.37 NMAC, 6/26/2018; A, 12/17/2019]

16.19.20.38 DISPOSITION OF UNUSABLE, OUTDATED OR UNWANTED CONTROLLED SUBSTANCES:

A. Disposition shall be in accordance with DEA regulation 21 CFR Part 1317 (or successor regulation).

B. A registrant, other than a manufacturer, distributor, reverse distributor, importer, exporter, or narcotic treatment program, in possession of any controlled substances and desiring or required to dispose of such substances(s) may contact the Special Agent in Charge of the DEA in the area in which the registrant is located by submitting one copy of the DEA form 41 listing the controlled substance(s) which the registrant desires to dispose for authority and instructions to dispose of such substance (21 CFR 1317.05). The registrant shall keep a written memorandum report, and use DEA form 41 to record the destruction.

C. Any registrant in possession of any controlled substances and desiring or required to dispose of such substances(s) may:

(1) Promptly deliver that controlled substance to a reverse distributor's registered location by common or contract carrier pick-up or by reverse distributor pick-up at the registrant's registered location;

(2) For the purpose of return or recall, promptly deliver that controlled substance by common or contract carrier pick-up or pick-up by other registrants at the registrant's registered location to: the registered person from whom it was obtained, the registered manufacturer of the substance, or another registrant authorized by the manufacturer to accept returns or recalls on the manufacturer's behalf.

D. Records of disposition shall be maintained in proper form and available for inspection for at least three years.

[16.19.20.38 NMAC -Rp 16.19.20.38 NMAC, 6/26/2018; A, 12/17/2019]

16.19.20.39 EXEMPTION FOR PHARMACY REGISTRATION AS A DISTRIBUTOR, DISTRIBUTION BY A DISPENSER TO ANOTHER PRACTITIONER REGISTERED TO DISPENSE CONTROLLED SUBSTANCES: A registrant who is registered to dispense controlled substances may distribute a quantity of such substances to a registered practitioner for general dispensing to his patients if:

A. the distribution is recorded by the pharmacist indicating the number of units or volume of such finished forms and commercial containers dispensed, the date and manner of disposition;

B. the same information is recorded as a procurement by the registrant receiving the substance;

C. if the substance is listed in schedule I or II, an order form is used as required by the federal regulations;

D. the total number of dosage units of all controlled substances distributed by the pharmacy by this method during the 12 month period in which the practitioner is registered to dispense does not exceed five percent of the total number of dosage units of all controlled substances distributed and dispensed by the pharmacy during the 12 month period.

[16.19.20.39 NMAC - Rp 16.19.20.39 NMAC, 6/26/2018]

16.19.20.40 DISTRIBUTION UPON TRANSFER OR DISCONTINUANCE OF BUSINESS:

A. Upon transfer of a business from one owner to another, the registrant may dispose of the controlled substances in his possession as follows:

(1) On the date of transfer of controlled substances, a complete inventory of all controlled substances being transferred shall be taken in accordance with 16.19.20.20 NMAC, and Title 21, Section 1304.11 of the federal DEA regulations (or successor regulation). This inventory of the registrant-transferee and a copy of the inventory shall be included in the records of each person. It shall not be necessary to file a copy of the inventory with DEA or the board of pharmacy unless requested by either agency. Transfer of schedule I or II substances require the use of DEA Form 222, and transfer of Schedule III – V substances require the use of invoice.

(2) All records required to be kept by the registrant-transferor with reference to the

controlled substances being transferred, shall be transferred to the registrant-transferee. Responsibility for the accuracy of records prior to the date of transfer remains with the transferor, but responsibility for custody and maintenance shall be upon the transferee.

(3) All schedule I or II substances must be transferred pursuant to order forms as required by the federal regulations. A copy of the inventory will constitute a record of receipt for the purchaser.

B. Upon discontinuance of business, if there are controlled substances which are not transferred to another registrant, these substances shall be handled as unwanted controlled substances under 16.19.20.38 NMAC. [16.19.20.40 NMAC - Rp 16.19.20.40 NMAC, 6/26/2018; A, 12/17/2019]

16.19.20.41 PRESCRIPTIONS:

A. A prescription for a controlled substance may be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his professional practice, and who is registered under the Controlled Substances Act. The responsibility for the proper prescribing and dispensing of controlled substances is upon the prescribing practitioner, but a corresponding responsibility rests with the pharmacist who fills the prescription.

B. A prescription may not be issued in order for a practitioner to obtain controlled substances for supplying the practitioner for the purpose of general dispensing to patients.

C. A prescription may not be issued for the dispensing of narcotic drugs listed in any schedule to a narcotic dependent person for the sole purpose of continuing his dependence upon such drugs, unless all the following conditions are met:

(1) the narcotic controlled drug is in Schedule III, IV, or V and is approved by the Food and Drug Administration specifically for use in maintenance or detoxification treatment; and

(2) the prescribing practitioner meets all state and federal requirements to prescribe the narcotic for maintenance or detoxification treatment (e.g., 21 CFR 1301.28 or successor regulation).

[16.19.20.41 NMAC - Rp 16.19.20.41 NMAC, 6/26/2018; A, 12/17/2019; A, 6/13/2023]

16.19.20.42 PRESCRIPTION REQUIREMENTS:

A. All prescriptions for controlled substances shall be dated as of, and signed on, the day when issued and shall bear the full name and address of the patient, the drug name, strength, dosage form, quantity prescribed, directions for use, and the name, address and registration number of the practitioner. Information on the prescription may be added or clarified by the pharmacist after consultation with the practitioner. A practitioner may sign a paper prescription in the same manner as he would sign a check or legal document (e.g., J.H. Smith or John H. Smith). Where an oral order is not permitted, paper prescriptions must be written with ink or indelible pencil, typewriter, or printed on a computer printer and shall be manually signed by the practitioner. A computer-generated prescription that is printed out or faxed by the practitioner must be manually signed.

B. Electronic prescriptions shall be created and signed using an application that meets the requirements of Part 1311 of the Code of Federal Regulations. An individual practitioner will sign and transmit electronic prescriptions for controlled substances in a manner that meets all of the requirements of Part 1306.08 of the Code of Federal Regulations.

(1) Effective April 1, 2021 all controlled substance prescriptions must be electronically transmitted ("Electronic Prescriptions for Controlled Substances," **EPCS**) except:

(a) for patients residing in an intermediate care, skilled nursing or correctional facility;

(b) for patients enrolled in hospice;

(c) for an animal by a licensed veterinarian;

(d) a prescription dispensed by a federal facility not subject to state regulation (e.g. department of veteran affairs, indian health services, military bases);

(e) a prescription requiring information that makes electronic transmission impractical, such as complicated or lengthy directions for use or attachments; or new medications not yet in electronic system;

(f) for compounded prescriptions;

(g) for prescriptions issued during a temporary technical or electronic failure at the practitioner's or pharmacy's location;

(h) for prescriptions issued in an emergency pursuant to federal law and rules of the board;

(i) for prescriptions issued in response to a public health emergency where a non-patient specific prescription would be permitted;

(j) under extenuating circumstance, not inconsistent with federal law and where the practitioner communicates directly with the pharmacist. The pharmacist, using professional judgment, may accept the non-EPCS and is responsible for ensuring documentation of the circumstance in the prescription record; and that the prescription is otherwise in compliance with state and federal law and rules.

C. Unless otherwise specified, a pharmacist who receives a written, oral, or facsimile prescription shall not be required to verify that the prescription is subject to an exemption and may dispense a prescription drug pursuant to an otherwise valid written, oral, or facsimile prescription.

D. A prescription that falls under an exception to the EPCS requirement may be transmitted to a pharmacy in one of the following ways:

(1) A prescription for a schedule II controlled substance may be transmitted by the practitioner or the practitioner's agent to a pharmacy via facsimile equipment, provided the original written, signed prescription is presented to the pharmacist for review prior to the actual dispensing of the controlled substance, except as noted in Paragraphs 2, 3 and 4 of this Subsection. The original prescription shall be maintained in accordance with 16.19.20.31 NMAC.

(2) A prescription prepared in accordance with Subsection A of 16.19.20.42 NMAC written for a schedule II narcotic substance to be compounded for the direct administration to a patient by parenteral, intravenous, intramuscular, or subcutaneous infusion may be transmitted by the practitioner or the practitioner's agent to the parenteral products pharmacy by facsimile. The facsimile serves as the original written prescription for purposes of this paragraph and it shall be maintained in accordance with 16.19.20.31 NMAC.

(3) A prescription prepared in accordance with Subsection A of 16.19.20.42 NMAC written for a schedule II substance for a resident of a long term care facility may be transmitted by the practitioner or the practitioner's agent to the dispensing pharmacy by facsimile. The facsimile serves as the original written prescription for purposes of this sub-section and it shall be maintained in accordance with 16.19.20.31 NMAC.

(4) A prescription prepared in accordance with Subsection A of 16.19.20.41 NMAC written for a schedule II narcotic substance for a patient enrolled in a hospice program certified by Medicare under title XVIII or licensed by the state may be transmitted by the practitioner or the practitioner's agent to the dispensing pharmacy by facsimile. The practitioner or the practitioner's agent will note on the prescription that the patient is a hospice patient. The facsimile serves as the original written prescription for purposes of this sub-section and it shall be maintained in accordance with 16.19.20.31 NMAC.

(5) A pharmacist may dispense directly a controlled substance listed in schedule III, IV, or V which is a prescription drug as determined under the New Mexico Drug Device and Cosmetic Act, only pursuant to either a written prescription signed by a practitioner or a facsimile of a written, signed prescription transmitted by the practitioner or the practitioner's agent to the pharmacy or pursuant to an oral prescription made by an individual practitioner and promptly reduced to written form by the pharmacist containing all information required for a prescription except the signature of the practitioner. A telephone order for a new therapy for an opiate listed in schedule III, IV, or V shall not exceed a 10 day supply, based on the directions for use, unless a written prescription is on file at this pharmacy from any practitioner for the same opiate within the past six months. A telephone order for this new opiate therapy may not be refilled.

E. A pharmacy employee shall verify the identity of the patient or the patient's representative who is receiving any prescription for a controlled substance listed in schedule II, III, IV, or V before it is released. Acceptable identification means a current state issued driver's license, including photo, or other current government issued photo identification of the person presenting said identification. The identification type (*e.g.* driver's license, identification card, passport, etc.), number, name imprinted on that identification, and state must be recorded. Exceptions are, a new controlled substance prescription filled for a patient known to the pharmacist or pharmacist intern, whose identification has already been documented in a manner determined by a written policy developed by the pharmacist-in-charge; a controlled substance prescription filled for home delivery; or a controlled substance prescription filled for and delivered to a licensed facility.

[16.19.20.42 NMAC - Rp 16.19.20.42 NMAC, 6/26/2018, A, 12/15/2020]

16.19.20.43 PRESCRIPTIONS NOT TO BE REFILLED: Prescriptions for schedule II drugs may not be refilled.

[16.19.20.43 NMAC - Rp 16.19.20.43 NMAC, 6/26/2018]

16.19.20.44 REFILL PROCEDURE: Each refilling of a schedule III, IV or V controlled substance

prescription shall be entered in prescription record, indicating the amount dispensed, if less than the amount called for on the prescription, the date of refill and the initials of the pharmacist dispensing the substance.
[16.19.20.44 NMAC - Rp 16.19.20.44 NMAC, 6/26/2018, A, 12/15/2020]

16.19.20.45 PRESCRIPTION FILL AND REFILL REQUIREMENTS:

A. Prescriptions for any controlled substance shall not be filled more than six months after the date of issue.

(1) Controlled substance prescriptions dispensed directly to a patient shall not be refilled before seventy-five percent of the prescription days' supply has passed, unless the practitioner authorizes the early refill, which must be documented by the pharmacist.

(2) Controlled substance prescriptions delivered to a patient indirectly (as mail order) to a patient shall not be refilled before sixty-six percent of a 90 day supply has passed or fifty percent of a 30 day supply has passed, unless the practitioner authorizes the early refill, which must be documented by the pharmacist.

B. Prescriptions for schedule III, IV, or V controlled substances shall not be filled or refilled more than six months after the date of issue or be refilled more than five times unless renewed by the practitioner and a new prescription is placed in the pharmacy files.

[16.19.20.45 NMAC - Rp 16.19.20.45 NMAC, 6/26/2018]

16.19.20.46 PRESCRIPTION - PARTIALLY FILLED:

A. A prescription for a controlled substance in schedule II may be partially filled if:

(1) the total quantity dispensed in all partial fillings does not exceed the total quantity prescribed;

(2) the partial fill amount is recorded on the written prescription or in the electronic prescription record; and

(3) the remaining portions shall be filled not later than 30 days after the date on which the prescription is issued.

B. A prescription for a controlled substance in schedule II initially filled later than 30 days after the date issued may be partially filled if:

(1) the pharmacist is unable to dispense the total quantity prescribed;

(2) the partial fill amount is recorded on the written prescription or in the electronic prescription record;

(3) the remaining portion is filled within 72 hours of the partial filling; and

(4) the pharmacist notifies the prescribing physician if the remaining portion cannot be filled within the 72 hour period. No further quantity may be supplied beyond 72 hours without a new prescription.

C. Partial filling of a prescription for schedule III, IV or V shall be recorded in the same manner as a refill, providing the total quantity of partial filling does not exceed the total quantity prescribed and no dispensing occurs after six months from date of prescription.

D. A prescription for a schedule II controlled substance written for a patient in a long term care facility (LTCF) or for a patient with a medical diagnosis documenting a terminal illness may be filled in partial quantities, to include individual dosage units.

(1) If there is any question whether a patient may be classified as having a terminal illness, the pharmacist shall contact the practitioner prior to partially filling the prescription. Both the pharmacist and the prescribing practitioner have a corresponding responsibility to assure that the controlled substance is for a terminally ill patient. The pharmacist shall record on the prescription whether the patient is "terminally ill" or an "LTCF patient".

(2) A prescription that is partially filled and does not contain the notation "terminally ill" or "LTCF patient" shall be deemed to have been filled in violation of this regulation. For each partial filling, the dispensing pharmacist shall record on the back of the prescription (or on appropriate record, uniformly maintained, and readily retrievable) the date of the partial filling, quantity dispensed, remaining quantity authorized to be dispensed and the identification of the dispensing pharmacist.

(3) The total quantity of schedule II controlled substances dispensed in all partial fillings shall not exceed the total quantity prescribed. Schedule II prescriptions, for patients in a LTCF or patients with a medical diagnosis documenting a terminal illness, shall be valid for a period not to exceed 60 days from the issue date unless sooner terminated by the discontinuance of medication.

[16.19.20.46 NMAC - Rp 16.19.20.46 NMAC, 6/26/2018, A 12/15/2020]

16.19.20.47 EMERGENCY DISPENSING:

A. Emergency dispensing of schedule II controlled substances. “**Emergency situation**” means the prescribing physician determines:

- (1) that immediate administration of a controlled substance is necessary for proper treatment of the intended patient;
- (2) that no appropriate alternative treatment is available, including administration of a drug which is not a controlled substance under schedule II; and
- (3) that it is not reasonably possible for the prescribing practitioner to provide an electronically prescribed or written prescription to be presented to the person dispensing the substance prior to the dispensing.

B. A pharmacy may dispense a schedule II controlled substance in the above instance only if he receives oral authorization of a practitioner or authorization via facsimile machine and provided:

- (1) the quantity prescribed is limited to the amount needed to treat the patient during the emergency period;
- (2) the pharmacist shall reduce the prescription to a written form and it contains all information required of a schedule II controlled substance prescription except the signature of the prescribing practitioner;
- (3) the prescribing physician, within seven days after authorization of the emergency dispensing, shall furnish a written, signed prescription to the pharmacist. The signed prescription shall have written on the face “AUTHORIZATION FOR EMERGENCY DISPENSING” and the date of the oral order or facsimile order;
- (4) the signed prescription shall be attached to the oral emergency prescription order or the facsimile emergency prescription order and be filed as other schedule II prescriptions.

C. In the event the prescribing physician fails to deliver a signed written prescription to the pharmacist, within the seven days period, the pharmacist shall notify the nearest DEA office, and the board of pharmacy.

[16.19.20.47 NMAC - Rp 16.19.20.47 NMAC, 6/26/2018, A 12/15/2020]

16.19.20.48 SECURITY REQUIREMENTS:

A. All applicants and registrants shall provide effective controls and procedures to guard against theft and diversion of controlled substances.

B. In evaluating the overall security system of a registrant or applicant, the following factors may be considered, where applicable to the need for strict compliance with security requirements:

- (1) the type of activity;
- (2) the type and form of controlled substances handled;
- (3) the quantity of controlled substances handled;
- (4) the location of the premises and relationship such location bears on security needs;
- (5) the type of building construction of the facility and the general characteristics of the building;

- (6) the type of vault, safe, and secure enclosures or other storage system used;
- (7) the type of closures on vaults, safes, and secure enclosures;
- (8) the adequacy of key control systems and lock control system;
- (9) the extent of unsupervised public access to the facility;
- (10) the adequacy of supervision over employees having access to storage or distribution areas;

(11) the procedures for handling business guests, visitors, maintenance personnel and non-employee service personnel;

(12) the adequacy of the registrant’s or applicant’s system for monitoring the receipt, manufacture, distribution and disposition of controlled substances in its operation.

[16.19.20.48 NMAC - Rp 16.19.20.48 NMAC, 6/26/2018]

16.19.20.49 MANUFACTURERS, REPACKAGERS AND WHOLESALE DISTRIBUTORS: Security requirements which meet the federal DEA provision shall be deemed adequate under New Mexico Controlled Substances Act.

[16.19.20.49 NMAC - Rp 16.19.20.49 NMAC, 6/26/2018]

16.19.20.50 PHARMACIES AND HOSPITALS, EMPLOYING STAFF PHARMACISTS: Controlled substances listed in schedule I shall be stored in a securely locked, substantially constructed cabinet. Controlled substances listed in schedule II, III, IV and V shall be stored either in securely locked, substantially constructed cabinets or dispersed throughout the stock of non-controlled substances in such a manner as to obstruct the theft or diversion of the substances.

[16.19.20.50 NMAC - Rp 16.19.20.50 NMAC, 6/26/2018]

16.19.20.51 HOSPITALS SERVED BY CONSULTANT OR PART-TIME PHARMACISTS, CLINICS AND PHYSICIANS: Controlled substances listed in schedule I through V shall be stored in a securely locked, substantially constructed cabinet.

[16.19.20.51 NMAC - Rp 16.19.20.51 NMAC, 6/26/2018]

16.19.20.52 RESEARCH REGISTRANTS AND CHEMICAL ANALYSIS LABORATORIES: Controlled substances listed in schedules I and II shall be stored in a securely locked, substantially constructed cabinet. Schedules III, IV and V substances shall be stored either in a securely locked, substantially constructed cabinet or dispersed in with the stock of non-controlled substances in such a manner as to obstruct the theft or diversion of the substances.

[16.19.20.52 NMAC - Rp 16.19.20.52 NMAC, 6/26/2018]

16.19.20.53 DISPENSING WITHOUT PRESCRIPTION:

A. A controlled substance listed in schedule V and a substance listed in schedules II, III, or IV **which is not a prescription drug** as determined by FDA and the Drug and Cosmetic Act, may be dispensed by a pharmacist without a prescription provided:

- (1) such dispensing is made by a pharmacist or registered pharmacist intern and not by a non-pharmacist employee;
- (2) not more than eight ounces of any controlled substance containing opium, nor more than 48-dosage units is dispensed at retail to the same person in any given 48-hour period;
- (3) not more than four ounces of any other controlled substance or more than 24-dosage units may be dispensed at retail to the same person in any given 48-hour period;
- (4) the purchaser is at least 18 years of age;
- (5) the pharmacist requires every purchaser of such substance, not known to him to furnish suitable identification (including proof of age where appropriate);
- (6) a bound record book for dispensing such substances is maintained requiring the signature and address of the purchaser, the name and quantity of the controlled substance purchased, the date of each purchase and the name or initials of the pharmacist who dispensed the substance; the book shall contain a statement on each page where purchaser is required to sign, stating no purpose of such substance has been made within the given 48-hour period at another pharmacy and the purchaser shall be made aware of such statement before signing the record.

B. Exempt pseudoephedrine product.

(1) Any pseudoephedrine containing product listed as a schedule V controlled substance in Paragraph (2) of Subsection B of 16.19.20.69 NMAC shall be dispensed, sold or distributed only by a licensed pharmacist, pharmacist intern, or a registered pharmacy technician.

(2) Unless pursuant to a valid prescription, a person purchasing, receiving or otherwise acquiring the compound, mixture or preparation shall:

- (a) produce a driver's license or other government-issued photo identification showing the date of birth of the persons;
- (b) sign a log after reading the purchaser statement for pseudoephedrine receipt or other program or mechanism indicating the date and time of the transaction, name of the person, address, driver's license number or government issued identification number, name of the pharmacist, pharmacist intern or pharmacy technician conducting the transaction, the product sold and the total quantity, in grams or milligrams, of pseudoephedrine purchased; this log will be only for exempt pseudoephedrine products and shall be kept separate from all other records; the log is to be produced in a way that a customer's personal information is not available to other purchasers;

(c) be limited to no more than three and six-tenths grams per day or more than a total of nine grams of a product, mixture or preparation containing pseudoephedrine within a 30-day period.

(3) Pseudoephedrine purchaser statement must state in addition to any federal requirements: "I have not purchased more than three and six-tenths grams today or more than a total of nine grams of

pseudoephedrine as a single entity or in a combination with other medications in the last 30 days. Entering false statements or misrepresentations in this logbook may subject me to criminal penalties”.

(4) Prices charged for compounds, mixtures, and preparations that contain pseudoephedrine shall be monitored. The board may adopt rules to prevent unwarranted price increases as a result of compliance with this section.

(5) Pharmacies shall submit the information collected pursuant to Paragraph (2) of Subsection B of 16.19.20.53 NMAC electronically, in a board defined format, to the board or its agents. Pharmacies will submit data every seven days beginning September 15, 2013. Pharmacies may petition the executive director of the board for an alternative method for the submission of the information collected pursuant to this section.

(6) Authority to contract: The board is authorized to contract with another agency of this state or with a private vendor, as necessary, for the collection of the information collected pursuant to Paragraph (2) of Subsection B of 16.19.20.53 NMAC. Any contract shall be bound to comply with the provisions regarding confidentiality of prescription or personal information in 16.19.20.53 NMAC of this regulation and shall be subject to the penalties specified in 16.19.20 NMAC and 16.19.27 NMAC.

[16.19.20.53 NMAC - Rp 16.19.20.53 NMAC, 6/26/2018; A, 12/17/2019]

16.19.20.54 EXEMPTED OVER-THE-COUNTER DRUGS: (Information published by DEA.)

[16.19.20.54 NMAC - Rp 16.19.20.54 NMAC, 6/26/2018]

16.19.20.55 EXEMPT CHEMICAL PREPARATIONS: The board hereby exempts such chemical preparations and mixtures which are intended for laboratory, industrial, educational, or special research purposes, which are not intended for general administration to a human being or other animal and which:

A. contains no narcotic controlled substances and is packaged in such a form or concentration that the package quantity does not present any significant potential for abuse, or;

B. contains either a narcotic or nonnarcotic controlled substance and one or more adulterating or denaturing agent in such a manner, combination, quantity, proportion or concentration, that the preparation or mixture does not present any potential for abuse, and the narcotic substance cannot in practice be removed, and;

C. are exempt from federal regulations (CFR 21 Part 1308.24).

[16.19.20.55 NMAC - Rp 16.19.20.55 NMAC, 6/26/2018]

16.19.20.56 HEARINGS, DENIAL OF REGISTRATION, REVOCATION OR SUSPENSION OF REGISTRATION: Proceedings to suspend or revoke a registration or to refuse renewal of a registration shall be held pursuant to the Uniform Licensing Act.

[16.19.20.56 NMAC - Rp 16.19.20.56 NMAC, 6/26/2018]

16.19.20.57 ADMINISTRATIVE INSPECTION - DEFINED: Administrative inspection means - the inspection of any place where registrants are permitted to hold, manufacture, compound, process, sell, deliver, or otherwise dispose of any controlled substances. When authorized by an administrative inspection warrant, the inspector may:

A. inspect and copy records required by the Controlled Substances Act;

B. inspect the restricted area and all pertinent equipment, all container substances, containers and labeling found at the controlled area;

C. make a physical inventory of specific items or all controlled substances on-hand at the premises;

D. collect samples, if applicable;

E. check records and information of distribution of controlled substances by the registrant as they relate to total distribution;

F. examination of records, invoices, appropriate for verification of the records or otherwise bearing on the provisions of the Controlled Substances Act.

[16.20.20.57 NMAC - Rp 16.19.20.57 NMAC, 6/26/2018]

16.19.20.58 VOLUNTARY CONSENT TO INSPECTION: The board inspector will ask the registrant to voluntarily consent to the inspection. He will inform the registrant of his constitutional rights to an inspection warrant, however, if the registrant consents to inspection without warrant, the inspector will obtain a signed consent waiver statement from the registrant before proceeding with an accountability audit or inspection.

[16.19.20.58 NMAC - Rp 16.19.20.58 NMAC, 6/26/2018]

16.19.20.59 WRITTEN CONSENT:

- A.** The written consent shall contain the following information:
- (1) that the owner, or agent in charge of the premises has been informed of his constitutional right not to have an administrative inspection made without an administrative inspection warrant;
 - (2) of his right to refuse to consent to such an inspection;
 - (3) of the possibility that anything of an incriminating nature which may be found may be seized and used against him in a board hearing or a criminal prosecution;
 - (4) that he had been presented with a notice of inspection;
 - (5) that the consent given by him is voluntary and without threats of any kind; and
 - (6) that he may withdraw his consent at any time during the course of inspection.
- B.** Written consent shall be produced in duplicate and one copy shall be retained by the person being inspected and one copy shall be retained by the inspector for filing in the board office.
[16.19.20.59 NMAC - Rp 16.19.20.59 NMAC, 6/26/2018]

16.19.20.60 ADMINISTRATIVE WARRANT:

- A.** A copy of the administrative warrant need not be given to the registrant unless items are seized or confiscated.
- B.** To serve the warrant, all that is required is to announce possession of it, the contents of the warrant need not be stated to the person upon whom the warrant is served.
[16.19.20.60 NMAC - Rp 16.19.20.60 NMAC, 6/26/2018]

16.19.20.61 CONSENT TO CHARGES: Unless the person in charge of the premises so consents in writing, these regulations shall not extend to financial data, sales data other than shipping date, or pricing data.
[16.19.20.61 NMAC - Rp 16.19.20.61 NMAC, 6/26/2018]

16.19.20.62 ADMINISTRATIVE WARRANT - NOT REQUIRED: An administrative warrant shall not be required for a new pharmacy or drug distribution facility applying for initial registration under the Controlled Substances Act or the Pharmacy Act, or in any other situation where a warrant is not constitutionally required.
[16.19.20.62 NMAC - Rp 16.19.20.62 NMAC, 6/26/2018]

16.19.20.63 ADMINISTRATIVE WARRANT - REFUSAL: If a registrant or any person subject to the Controlled Substances Act refuses to permit execution of an administrative warrant or impedes the inspection in the execution of that warrant, he shall be advised that such refusal or action constitutes a violation of Section 30-31-32 NMSA 1978, Controlled Substances Act.
[16.19.20.63 NMAC - Rp 16.19.20.63 NMAC, 6/26/2018]

16.19.20.64 CONTROLLED SUBSTANCE PRECURSORS: See 16.19.21 NMAC - Drug Precursors
[16.19.20.64 NMAC - Rp 16.19.20.64 NMAC, 6/6/2018]

16.19.20.65 SCHEDULE I:

A. Section 30-31-6 NMSA 1978, schedule I shall consist of the following drugs and other substances, by whatever name, common or usual name, chemical name or brand name designated, listed in this section; **OPIOIDS**, unless specifically exempt or unless listed in another schedule, any of the following opioids, including its isomers, esters, ethers, salts and salts of isomers, esters, and ethers, whenever the existence of such isomers, esters, ethers, and salts is possible within the specific chemical designation.

- (1) Acetylmethadol;
- (2) Allylprodine;
- (3) Alphacetylmethadol;
- (4) Alphameprodine;
- (5) Alphamethadol;
- (6) Alpha-methyl fentanyl;
- (7) Benzethidine;
- (8) Betacetylmethadol;
- (9) Betameprodine;
- (10) Betamethadol;
- (11) Betaprodine;

- (12) Clonitazene;
- (13) Desmethyltramadol;
- (14) Dextromoramide;
- (15) Diampromide;
- (16) Diethylthiambutene;
- (17) Dimethylthiambutene;
- (18) Difenoazin;
- (19) Dimenoxadol;
- (20) Dimepheptanol;
- (21) Dimethylthiambutene;
- (22) Dioxaphetyl Butyrate;
- (23) Dipipanone;
- (24) Ethylmethylthiambutene;
- (25) Etonitazene;
- (26) Etozeridine;
- (27) Furetidine;
- (28) Hydroxypethidine;
- (29) Isotonitazene;
- (30) Ketobemidone;
- (31) Levomoramide;
- (32) Levophenacilmorphan;
- (33) Morpheridine;
- (34) Noracymethadol;
- (35) Norlevorphanol;
- (36) Normethadone;
- (37) Norpipanone;
- (38) Phenadoxone;
- (39) Phenampromide;
- (40) Phenomorphan;
- (41) Phenoperidine;
- (42) Piritramide;
- (43) Proheptazine;
- (44) Properidine;
- (45) Propiram;
- (46) Racemoramide;
- (47) Tilidine;
- (48) Trimeperidine
- (49) U-48800; (2-(2,4-dichlorophenyl)-N-((1S,2S)-2-(dimethylamino)cyclohexyl)-N-methylacetamide, monohydrochloride;
- (50) U-49900; (trans-3,4-dichloro-N-[2-(diethylamino)cyclohexyl]-N-methyl-benzamide);
- (51) Beta-Hydroxy-3-Methylfentanyl;
- (52) 3-Methylthiofentanyl;
- (53) Acetyl-Alpha-Methyl fentanyl ;
- (54) Alpha-Methylthiofentanyl ;
- (55) Beta-hydroxfentanyl ;
- (56) Para-Fluoro fentanyl;
- (57) Thiofentanyl;
- (58) Acetyl fentanyl;
- (59) Butyryl fentanyl;
- (60) Betahydroxythiofentanyl;
- (61) Furanyl fentanyl;
- (62) AH-7921; (3,4-dichloro-N-[(1-dimethylamino)cyclohexylmethyl]benzamide);
- (63) U47700; (trans-3,4-dichloro-N-(2-(dimethylamino)cyclohexyl)-N-methylbenzamide);
- (64) MT-45; (1-(4-Nitrophenylethyl)piperidylidene-2-(4-chlorophenyl)sulfonamide);
- (65) W-15; (4-chloro-N-[1-(2-phenylethyl)-2-piperidinylidene]-benzenesulfonamide);
- (66) W-18; (1-(4-Nitrophenylethyl)piperidylidene-2-(4-chlorophenyl)sulfonamide);

- (67) U-50488; (2-(3,4-dichlorophenyl)-N-methyl-N-[(1R,2R)-2-pyrrolidin-1-ylcyclohexyl]acetamide);
- (68) U50488H; ((-)(trans)-3,4-dichloro-N-methyl-N-[2-(1-pyrrolidiny)cyclohexyl]benzeneacetamide).
- (69) Fentanyl-related substances, their isomers, esters, ethers, salts, and salts of isomers, esters and ethers. Fentanyl-related substance means any substance, unless specifically exempted or unless listed in another schedule, that is structurally related to fentanyl by one or more of the following modifications:
- (a) replacement of the phenyl portion of the phenethyl group by any monocycle, whether or not further substituted in or on the monocycle;
 - (b) substitution in or on the phenethyl group with alkyl, alkenyl, alkoxy, hydroxyl, halo, haloalkyl, amino or nitro groups;
 - (c) substitution in or on the piperidine ring with alkyl, alkenyl, alkoxy, ester, ether, hydroxyl, halo, haloalkyl, amino or nitro groups;
 - (d) replacement of the aniline ring with any aromatic monocycle whether or not further substituted in or on the aromatic monocycle; or
 - (e) replacement of the N-propionyl group by another acyl group; or
 - (f) any combination of the above substances include, but are not limited to, the following substances: (reserved)
- (70) Acryl Fentanyl;
 - (71) 4F-butyrfentanyl;
 - (72) 4-methoxybutyrfentanyl;
 - (73) Fluorobutyrfentanyl;
 - (74) Fluorofentanyl;
 - (75) FIBF; (Para Fluoro Isobutyryl Fentanyl);
 - (76) Cyclopropyl fentanyl;
 - (77) Thiofuranyl fentanyl (Thiophene fentanyl);
 - (78) 3-methylfentanyl (N-3-methyl-1-(2-phenyl-ethyl)-4-Piperidyl)-N-phenylpropanamide, its optical and geometric isomers, salts and salts of isomers;
 - (79) crotonyl fentanyl ((E)-N-(1-phenethylpiperidin-4-yl)-N-phenylbut-2-enamide);
 - (80) valeryl fentanyl (N-(1-phenethylpiperidin-4-yl)-N-phenylpentanamide);
 - (81) N-(1-(2-fluorophenethyl)piperidin-4-yl)-N-(2-fluorophenyl)propionamide (2'-fluoro ortho-fluorofentanyl; 2'-fluoro 2-fluorofentanyl);
 - (82) N-(1-(4-methylphenethyl)piperidin-4-yl)-N-phenylacetamide (4'-methyl acetyl fentanyl);
 - (83) beta-phenyl fentanyl or N-(1-phenethylpiperidin-4-yl)-N,3-diphenylpropanamide (β'-phenyl fentanyl; beta'-Phenyl fentanyl; 3-phenylpropanoyl fentanyl);
 - (84) beta-methyl fentanyl or N-phenyl-N-(1-(2-phenylpropyl)piperidin-4-yl)propionamide (β-methyl fentanyl);
 - (85) N-(2-fluorophenyl)-N-(1-phenethylpiperidin-4-yl)butyramide (ortho-fluorobutyryl fentanyl; 2-fluorobutyryl fentanyl);
 - (86) (N-(2-methylphenyl)-N-(1-phenethylpiperidin-4-yl)acetamide (ortho-methyl acetylfentanyl; 2-methyl acetylfentanyl);
 - (87) 2-methoxy-N-(2-methylphenyl)-N-(1-phenethylpiperidin-4-yl)acetamide (ortho-methyl methoxyacetylfentanyl; 2-methyl methoxyacetyl fentanyl);
 - (88) N-(4-methylphenyl)-N-(1-phenethylpiperidin-4-yl)propionamide (para-methylfentanyl; 4-methylfentanyl);
 - (89) N-(1-phenethylpiperidin-4-yl)-N-phenylbenzamide (phenyl fentanyl; benzoyl fentanyl);
 - (90) N-(1-phenethylpiperidin-4-yl)-N-phenylthiophene-2-carboxamide (thiofuranyl fentanyl; 2-thiofuranyl fentanyl; thiophene fentanyl);
 - (91) Ethyl (1-phenethylpiperidin-4-yl)(phenyl)carbamate (fentanyl carbamate);
 - (92) N-(2-fluorophenyl)-N-(1-phenethylpiperidin-4-yl)acrylamide (ortho-fluoroacryl fentanyl);
 - (93) N-(2-fluorophenyl)-N-(1-phenethylpiperidin-4-yl)isobutyramide (ortho-fluoroisobutyryl fentanyl);
 - (94) N-(4-fluorophenyl)-N-(1-phenethylpiperidin-4-yl)furan-2-carboxamide (para-fluoro furanyl fentanyl);
 - (95) Cyclopentyl fentanyl;

- (96) Isobutyryl fentanyl;
- (97) Para-chloroisobutyryl fentanyl;
- (98) Para-methoxybutyryl fentanyl;
- (99) Para-fluorobutyryl fentanyl;
- (100) Ocfentanil;
- (101) Ortho-Fluorofentanyl;
- (102) Tetrahydrofuranyl Fentanyl;
- (103) Methoxyacetyl Fentanyl;
- (104) 4-Fluoroisobutyryl Fentanyl;
- (105) Para-Fluorofentanyl;l
- (106) Butonitazene (2-(2-(4-butoxybenzyl)-5-nitro-1Hbenzimidazol-1-yl)-N,N-diethylethan-1-amine);
- (107) Etodesnitazene; etazene (2-(2-(4-ethoxybenzyl)-1Hbenzimidazol-1-yl)-N,N-diethylethan-1-amine);
- (108) Metonitazene (N, N -diethyl-2-(2-(4-methoxybenzyl)-5-nitro-1 H -benzimidazol-1-yl)ethan-1-amine);
- (109) Flunitazene (N, N -diethyl-2-(2-(4-fluorobenzyl)-5-nitro-1 H -benzimidazol-1-yl)ethan-1-amine);
- (110) Metodesnitazene (N,6 N -diethyl-2-(2-(4-methoxybenzyl)-1 H -benzimidazol-1-yl)ethan-1-amine);
- (111) Protonitazene (N, N -diethyl-2-(5-nitro-2-(4-propoxybenzyl)-1 H -benzimidazol-1-yl)ethan-1-amine);
- (112) Brorphine (1-(1-(1-(4-bromophenyl)ethyl)piperidin-4-yl)-1,3-dihydro-2 H-benzo[d]imidazol-2-one);
- (113) Zipeprol (1-methoxy-3-[4-(2-methoxy-2- phenylethyl)piperazin-1-yl]-1- phenylpropan-2-ol).

B. OPIUM DERIVATIVES: Unless specifically exempt or unless listed in another schedule, any of the following opium derivatives, its salts, isomers, and salts of isomers whenever the existence of such salts, isomers and salts of isomers is possible within the specific chemical designation.

- (1) Acetorphine;
- (2) Acetyl dihydrocodeine;
- (3) Benzyl morphine;
- (4) Codeine methylbromide;
- (5) Codeine-N-Oxide;
- (6) Cyprenorphine;
- (7) Desomorphine;
- (8) Dehydro morphine;
- (9) Etorphine;
- (10) Heroin;
- (11) Hydromorphanol;
- (12) Methyl-desorphine;
- (13) Methyl-dihydromorphine;
- (14) Morphine methylbromide;
- (15) Morphine methylsulfonate;
- (16) Morphine-N-Oxide;
- (17) Myrophine;
- (18) Nicocodeine;
- (19) Nicomorphine;
- (20) Normorphine;
- (21) Pholcodine;
- (22) Thebacon;
- (23) Drotebanol;
- (24) 6AM; (6-acetylmorphine).

C. STIMULANTS: Unless specifically exempted or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system, including its salts, isomers, and salts of isomers.

- (1) Fenethylamine;
- (2) N-ethylamphetamine;
- (3) cis-4-methylaminorex;
- (4) N, N-dimethylamphetamine;
- (5) (BZP), 1-benzylpiperazine; N-benzylpiperazine;
- (6) (DCPP); 2,3-dichlorophenylpiperazine;
- (7) (DBZP); dibenzylpiperazine;
- (8) (MBZP); methylbenzylpiperazine;
- (9) (mCPP); meta-chlorophenylpiperazine;
- (10) (MDBZP); methylenedioxybenzylpiperazine;
- (11) (meOPP); para-methoxyphenylpiperazine;
- (12) (pCPP); para-chlorophenylpiperazine;
- (13) (pFPP); para-fluorophenylpiperazine;
- (14) (2-DPMP), desoxypipradrol; 2-diphenylmethylpiperidine;
- (15) D2PM, diphenylprolinol; diphenyl-2-pyrrolidinemethanol;
- (16) HDMP-28; methyl-naphthidate;
- (17) Nocaine, (+)-CPCA; 3 α -carbomethoxy-4 β -(4-chlorophenyl)-N-methylpiperidine;
- (18) BTQ or butyltolylquinuclidine; (2-Butyl-3-(p-tolyl)quinuclidine);
- (19) Methiopropamine; (N-methyl-1-(thiophen-2-yl)propan-2-amine);
- (20) Mesocarb; (N-phenyl-N'-(3-(1-phenylpropan-2-yl)-1,2,3-oxadiazol-3-ium-5-yl)carbamimidate);
- (21) Amineptine (7-[(10,11-dihydro-5H-dibenzo[a,d]cyclohepten-5-yl)amino]heptanoic acid);
- (22) 4,4'-Dimethylaminorex (4,4'-DMAR; 4,5-dihydro-4-methyl-5-(4-methylphenyl)-2-oxazolamine; 4-methyl-5-(4-methylphenyl)-4,5-dihydro-1,3-oxazol-2-amine).

D. DEPRESSANTS: Unless specifically exempt or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system, including its salts, isomers and salts of isomers whenever the existence of such salts, isomers and salts of isomers is possible within the specific chemical designation:

- (1) Mecloqualone;
- (2) Methaqualone;
- (3) Benzodiazepines;
 - (a) Bromazepam;
 - (b) Camazepam;
 - (c) Cloxazolam;
 - (d) Delorazepam;
 - (e) Ethylloflazepate;
 - (f) Fudiazepam;
 - (g) Flunitrazepam;
 - (h) Haloxazolam;
 - (i) Ketazolam;
 - (j) Loprazolam;
 - (k) Lormetazepam;
 - (l) Medazepam;
 - (m) Nimetazepam;
 - (n) Nitrazepam;
 - (o) Nordiazepam;
 - (p) Oxazolam;
 - (q) Phenazepam;
 - (r) Pinazepam;
 - (s) Tetrazepam;
 - (t) Flubromazepam;
 - (u) Diclazepam;
 - (v) Etizolam;
 - (w) Flualprazolam;
 - (x) Clonazolam;

- (y) Flubromazolam;
- (z) Bromazolam
- (4) Gamma hydroxybutyric acid and any chemical compound that is metabolically converted to GHB;
- (5) Gamma butyrolactone and any chemical compound that is metabolically converted to GHB;
- (6) 1-4 butane diol and any chemical compound that is metabolically converted to GHB
- (7) GHV or 4-methyl-GHB; γ -hydroxyvaleric acid;
- (8) GVL; γ -valerolactone;
- (9) MMQ; methylmethaqualone;
- (10) MBQ; mebroqualone.

E. HALLUCINOGENIC SUBSTANCES: Unless specifically exempt or unless listed in another schedule, any material, compound, mixture or preparation, which contains any quantity of the following hallucinogenic substances, or which contains any of its salts, isomers, and salts of isomers whenever the existence of such salts, isomers and salts of isomers is possible within the specific chemical designation (for purpose of this subsection only, the term "isomers" includes the optical, positional, and geometric isomers).

- (1) 3,4 -methylenedioxy amphetamine;
- (2) 5 - methoxy - 3,4-methylenedioxy amphetamine;
- (3) 3,4,5 -trimethoxy amphetamine;
- (4) Bufotenine;
- (5) DET; (Diethyltryptamine);
- (6) DMT; (Dimethyltryptamine);
- (7) DOM or STP; (4-methyl-2,5-dimethoxy amphetamine);
- (8) Lysergic acid amide;
- (9) Lysergic acid diethylamide;
- (10) Mescaline;
- (11) Peyote;
- (12) N-ethyl-3-piperidyl benzilate;
- (13) N-methyl-3-piperidyl benzilate;
- (14) Psilocybin;
- (15) Psilocyn;
- (16) Parahexyl (synthetic analog of delta-9-tetrahydrocannabinol);
- (17) 2, 5 -dimethoxyamphetamine; 2, 5-DMA;
- (18) 4-bromo-2, 5-dimethoxy-amphetamine; 2, 5-DMA;
- (19) PMA; 4-methoxyamphetamine;
- (20) PCE; (Ethylamine N-ethyl-1-phenylcyclohexylamine);
- (21) Pyrrolidine 1-(1-phenylcyclohexyl)-pyrrolidine (PCPy), (PHP) analog of the drug phencyclidine;
- (22) Thiophene (analog of phencyclidine) TCP or TPCP;
- (23) Alpha-ethyltryptamine;
- (24) 2, 5-dimethoxy-4-ethylamphet-amine;
- (25) Ibogaine;
- (26) 2C-T-7; (2,5-dimethoxy-4-(n)-propylthiophenethylamine);
- (27) AMT; (Alpha-methyltryptamine);
- (28) 5-MeO-DIPT; (5-methoxy-N,N-diisopropyltryptamine);
- (29) 25B-NBOMe; (2-(4-bromo-2.5-dimethoxyphenyl)-N-(2-methoxybenzyl)ethanamine);
- (30) 25C-NBOMe; (2-(4-chloro-2.5-dimethoxyphenyl)-N-(2-methoxybenzyl)ethanamine);
- (31) 25I-NBOMe; (2-(4-iodo-2.5-dimethoxyphenyl)-N-(2-methoxybenzyl)ethanamine).
- (32) Synthetic cannabinoids: Unless specifically exempted or unless listed in another

schedule, any material, compound, mixture or preparation which contains any quantity of the following synthetic cannabinoids which demonstrates binding activity to the cannabinoid receptor or analogs or homologs with binding activity. Substances include but are not limited to:

- (a) CP 55,244 ((hydroxymethyl)-4-[2-hydroxy-4-(2-methyloctan-2-yl)phenyl] 1,2,3,4,4a,5,6,7,8,8a-decahydronaphthalen-2-ol);
- (b) CP 55,940 (5-hydroxy-2-(3-hydroxypropyl) cyclohexyl]-5-(2-methyloctan-2-yl)phenol);

- (c) JWH-081 (1-pentyl-3-[1-(4-methoxynaphthoyl)]indole);
- (d) JWH-122 (1-pentyl-3-(4-methyl-1-naphthoyl)indole);
- (e) JWH-133 3-(1,1-dimethylbutyl)-6a,7,10,10a-tetrahydro -6,6,9-trimethyl-6H dibenzo[b,d]pyran;
- (f) JWH 203 1-pentyl-3-(2-chlorophenylacetyl)indole);
- (g) JWH 210 4-ethylnaphthalen-1-yl-(1-pentylindol-3-yl)methanone;
- (h) AM-694 (1-(5-fluoropentyl)-3-(2-iodobenzoyl)indole);
- (i) AM-1221 (1-(N-methylpiperidin-2-yl)methyl-2-methyl-3-(1-naphthoyl)-6-nitroindole;
- (j) AM-2201 (1-(5-fluoropentyl)-3-(1-naphthoyl)indole);
- (k) RCS-4 or SR-19 (1-pentyl-3-[(4-methoxy)-benzoyl]indole);
- (l) RCS-8 or SR-18 (1-cyclohexylethyl-3-(2-methoxyphenylacetyl)indole);
- (m) JWH-210 (1-pentyl-3-(4-ethylnaphthoyl)indole);
- (n) WIN-49,098 (Pravadoline) (4-methoxyphenyl)-[2-methyl-1-(2-morpholin-4-ylethyl)indol-3-yl]methanone;
- (o) WIN-55,212-2 (2,3-dihydro-5-methyl-3-(4-morpholinylmethyl)pyrrolo-1,4-benzooxazin-6-yl)-1-naphthalenylmethanone);
- (p) any of the following synthetic cannabinoids, their salts, isomers, and salts of isomers, unless specifically excepted, whenever the existence of these salts, isomers, and salts of isomers is possible within the specific chemical designation;
- (i) naphthoylindoles: any compound containing a 3-(1-naphthoyl) indole structure with substitution at the nitrogen atom of the indole ring by an alkyl, haloalkyl, alkenyl, cycloalkylmethyl, cycloalkylethyl, 1-(N-methyl-2-piperidinyl) methyl, or 2-(4-morpholinyl) ethyl group, whether or not further substituted in the indole ring to any extent and whether or not substituted in the naphthyl ring to any extent including, but not limited to, JWH-015, JWH-018, JWH-019, JWH-073, JWH-081, JWH-122, JWH-200, JWH-210, JWH-398 and AM-2201;
- (ii) naphthylmethylindoles: any compound containing a 1Hindol- 3-yl-(1-naphthyl) methane structure with substitution at the nitrogen atom of the indole ring by an alkyl, haloalkyl, alkenyl, cycloalkylmethyl, cycloalkylethyl, 1-(N-methyl-2-piperidinyl) methyl, or 2-(4-morpholinyl) ethyl group, whether or not further substituted in the indole ring to any extent and whether or not substituted in the naphthyl ring to any extent including, but not limited to, JWH-175, JWH-184, and JWH-199;
- (iii) naphthoylpyrroles: any compound containing a 3-(1-naphthoyl) pyrrole structure with substitution at the nitrogen atom of the pyrrole ring by an alkyl, haloalkyl, alkenyl, cycloalkylmethyl, cycloalkylethyl, 1-(N-methyl-2-piperidinyl) methyl, or 2-(4-morpholinyl) ethyl group, whether or not further substituted in the pyrrole ring to any extent and whether or not substituted in the naphthyl ring to any extent including, but not limited to, JWH-307;
- (iv) naphthylmethylindenes: any compound containing a naphthylideneindene structure with substitution at the 3-position of the indene ring by an alkyl, haloalkyl, alkenyl, cycloalkylmethyl, cycloalkylethyl, 1-(N-methyl-2-piperidinyl) methyl, or 2-(4-morpholinyl) ethyl group, whether or not further substituted in the indene ring to any extent and whether or not substituted in the naphthyl ring to any extent including, but not limited to, JWH-176;
- (v) phenylacetylindoles: any compound containing a 3-phenylacetylindole structure with substitution at the nitrogen atom of the indole ring by an alkyl, haloalkyl, alkenyl, cycloalkylmethyl, cycloalkylethyl, 1-(N-methyl-2-piperidinyl) methyl, or 2-(4-morpholinyl) ethyl group, whether or not further substituted in the indole ring to any extent and whether or not substituted in the phenyl ring to any extent including, but not limited to, JWH-203, JWH-250, JWH-251, and RCS-8;
- (vi) cyclohexylphenols: any compound containing a 2-(3-hydroxycyclohexyl) phenol structure with substitution at the 5-position of the phenolic ring by an alkyl, haloalkyl, alkenyl, cycloalkylmethyl, cycloalkylethyl, 1-(N-methyl-2-piperidinyl) methyl, or 2-(4-morpholinyl) ethyl group, whether or not substituted in the cyclohexyl ring to any extent including, but not limited to, Cannabicyclohexanol (CP 47,497 C8 homologue), CP 47,497 and CP 55,490;
- (vii) benzoylindoles: any compound containing a 3-(benzoyl) [5] OTS-3833.4 indole structure with substitution at the nitrogen atom of the indole ring by an alkyl, haloalkyl, alkenyl, cycloalkylmethyl, cycloalkylethyl, 1-(N-methyl-2-piperidinyl) methyl, or 2-(4-morpholinyl) ethyl group, whether or not further substituted in the indole ring to any extent and whether or not substituted in the phenyl ring to any extent including, but not limited to, AM-694, Pravadoline (WIN 48,098), RCS-4, and AM-1241;

(q) UR-144 1-(pentyl-1H-indol-3-yl) (2,2,3,3-tetramethylcyclopropyl)methanone;
(r) XLR11 1-(5-fluoro-pentyl)-1H-indol-3-yl(2,2,3,3-tetramethylcyclopropyl)methanone;
(s) AKB48 N-(1-adamantyl)-1-pentyl-1H-indazole-3-carboxamide;
(t) QUPIC; Quinolin-8-yl 1-pentyl-1H-indole-3-carboxylate;
(u) 5-fluoro-PB22; 5F-PB22; Quinolin-8-yl 1-(5-fluoropentyl)-1H-indole-3-carboxylate;
(v) AB-FUBINACA; N-(1-amino-3-methyl-1-oxobutan-2-yl)-1-(4-fluorobenzyl)-1H-indazole-3-carboxamide;
(w) ADB-PINACA; N-(1-amino-3,3-dimethyl-1-oxobutan-2-yl)-1-pentyl-1H-indazole-3-carboxamide;
(x) AB-CHMINACA; N-(1-amino-3-methyl-1-oxobutan-2-yl)-1-(cyclohexylmethyl)-1H-indazole-3-carboxamide;
(y) AB-PINACA; N-(1-amino-3-methyl-1-oxobutan-2-yl)-1-pentyl-1H-indazole-3-carboxamide;
(z) THJ-2201; [1-(5-fluoropentyl)-1H-indazol-3-yl](naphthalen-1-yl)methanone;
(aa) FDU-PB-22 IUPAC: 1-Naphthyl 1-(4-fluorobenzyl)-1H-indole-3-carboxylate;
(bb) 5-fluoro ABICA: N-(1-amino-3-methyl-1-oxobutan-2-yl)-1-(5-fluoropentyl)-1H-indole-3-carboxamide;
(cc) FUB-144 or FUB-UR-144; [1-(4-fluorobenzyl)-1H-indol-3-yl](2,2,3,3-tetramethylcyclopropyl)methanone;
(dd) MN-18; N-(1-Naphthyl)-1-pentyl-1H-indazole-3-carboxamide;
(ee) FUB-PB-22; Quinolin-8-yl 1-(4-fluorobenzyl)-1H-indole-3-carboxylate;
(ff) ADB-CHMINACA (N-[1-(aminocarbonyl)-2,2-dimethylpropyl]-1-(cyclohexylmethyl)-1H-indazole-3-carboxamide);
(gg) AMB-FUBINACA or FUB-AMB (methyl(1-(4-fluorobenzyl)-1H-indazole-3-carbonyl)-L-valinate);
(hh) 5-fluoro-AMB (N-[[1-(5-fluoropentyl)-1H-indazol-3-yl]carbonyl]-L-valine, methyl ester);
(ii) 5-fluoro-ADB (N-[[1-(5-fluoropentyl)-1H-indazol-3-yl]carbonyl]-3-methyl-D-valine, methyl ester);
(jj) Bk-DMBDB or dibutylone; 1-(Benzo[d][1,3]dioxol-5-yl)-2-(dimethylamino)butan-1-one;
(kk) MMB-FUBINACA; methyl (1-(4-fluorobenzyl)-1H-indazole-3-carbonyl)-L-valinate;
(ll) MDMB-CHMICA; methyl (S)-2-(1-(cyclohexylmethyl)-1H-indole-3-carboxamido)-3,3-dimethylbutanoate;
(mm) NM2201; Naphthalen-1-yl 1-(5-fluoropentyl)-1H-indole-3-carboxylate;
(nn) 5-Fluoro-AKB48 or 5F-APINACA; N-((3s,5s,7s)-adamanta-1-yl)-1-(5-fluoropentyl)-1H-indazole-3-carboxamide;
(oo) 5-Fluoro-ADB; Methyl(S)-2-[1-(5-fluoropentyl)-1H-indazole-3-carboxamido]-3,3-dimethylbutanoate;
(pp) 5-Fluoro-AMB; N-[[1-(5-fluoropentyl)-1H-indazol-3-yl]carbonyl]-L-valine,methyl ester;
(qq) MAB-CHMINACA; N-[1-(aminocarbonyl)-2,2-dimethylpropyl]-1-(cyclohexylmethyl)-1H-indazole-3-carboxamide;
(rr) SDB-006; N-benzyl-1-pentyl-1H-indole-3-carboxamide;
(ss) Cumyl-PINACA; 1-pentyl-N-(2-phenylpropan-2-yl)-1H-indazole-3-carboxamide;
(tt) Cumyl-PICA; 1-pentyl-N-(2-phenylpropan-2-yl)-1H-indole-3-carboxamide;
(uu) 5F-CUMYL-PINACA; SGT-25; 1-(5-Fluoropentyl)-N-(2-phenylpropan-2-yl)-1H-indazole-3-carboxamide;
(vv) 5F-EDMB-PINACA; Ethyl 2-(1-(5-fluoropentyl)-1H-indazole-3-carboxamido)-3,3-dimethylbutanoate;
(ww) methyl 2-(1-(5-fluoropentyl)-1H-indazole-3-carboxamido)-3,3-dimethylbutanoate [5F-ADB; 5F-MDMB-PINACA];

(xx) *N*-(Adamantan-1-yl)-1-(4-fluorobenzyl)-1 *H*-indazole-3-carboxamide (FUB-AKB48; FUB-APINACA; AKB48 *N*-(4-fluorobenzyl));

(yy) 1-(4-cyanobutyl)-*N*-(2-phenylpropan-2-yl)-1 *H*-indazole-3-carboxamide (4-CN-CUMYL-BUTINACA, 4-cyano-CUMYL-BUTINACA; 4-CN-CUMYL BINACA, CUMYL-4CN-BINACA, or SGT-78);

(zz) methyl 2-(1-(cyclohexylmethyl)-1 *H*-indole-3-carboxamido)-3-methylbutanoate (MMB-CHMICA or AMB-CHMICA);

(aaa) 1-(5-fluoropentyl)-*N*-(2-phenylpropan-2-yl)-1 *H*-pyrrolo[2,3-*b*]pyridine-3-carboxamide (5F-CUMYL-P7AICA)

(33) Substances determined by the board to have the pharmacological effect of the substance, the risk to the public health by abuse of the substance and the potential of the substance to produce psychic or physiological dependence liability is similar to the substances described in Paragraph (1) or (2) of 30-31-23C NMSA 1978.

Substances include but are not limited to:

(a) *Salvia divinorum*;

(b) Salvinorin A (methyl (2*S*,4*a*R,6*a*R,7*R*,9*S*,10*a*S,10*b*R)-9-(acetyloxy)-2-(furan-3-yl)-6*a*,10*b*-dimethyl-4,10-dioxododecahydro-2*H*-benzo[*f*]isochromene-7-carboxylate);

(34) (4-MEC); 4-methyl-ethylcathinone;

(35) (4-EMC); 4-ethyl-methcathinone;

(36) Ethcathinone; 2-ethylamino-1-phenyl-propan-1-one;

(37) Ethylone; 3',4'-methylenedioxyethylcathinone;

(38) Bk-MBDB, butylone; beta-keto-*N*-methyl-3,4-benzodioxolybutanamine;

(39) (NRG-1), naphyrone; naphthylpyrovalerone;

(40) Metamfepramone; *N,N*-dimethylcathinone;

(41) Alpha-PPP; alpha-pyrrolidinopropiophenone;

(42) (α -PBP); alpha-pyrrolidinobutiophenone;

(43) (MOPPP); 4'-methoxy-alpha-pyrrolidinopropiophenone;

(44) (M α PPP); 4'-methyl- α -pyrrolidinopropiophenone;

(45) (MDPPP); 3',4'-methylenedioxy-alpha-pyrrolidinopropiophenone;

(46) (MDPBP); 3',4'-methylenedioxy-alpha-pyrrolidinobutiophenone;

(47) (MPBP); 4'-methyl- α -pyrrolidinobutiophenone;

(48) Alpha-PVP; alpha-pyrrolidinovalerophenone;

(49) (MDAI); 5,6-methylenedioxy-2-aminoindane;

(50) Buphedrone; alpha-methylamino-butyrophenone;

(51) Eutylone; beta-keto-ethylbenzodioxolylbutanamine;

(52) beta-keto-ethylbenzodioxolylpentanamine;

(53) beta-keto-methylbenzodioxolylpentanamine (pentylone);

(54) 4-Bromo-2,5-dimethoxyphenethylamine (2c-B, Nexus);

(55) *N*-hydroxy-3,4-methylenedioxyamphetamine (also known as *N*-hydroxy-alpha-methyl-3,4(methylenedioxy)-phenethylamine, and *N*-hydroxy MDA);

(56) 5-methoxy-*N,N*-dimethyltryptamine (5-methoxy-3-[2-(dimethylamino)ethyl]indole; 5-MeO-DMT;

(57) Mephedrone; 4-methylmethcathinone;

(58) (MDPV); 3,4-methylenedioxyprovalerone;

(59) (2C-E); 2-(2,5-Dimethoxy-4-ethylphenyl)ethanamine;

(60) (2C-D); 2-(2,5-Dimethoxy-4-methylphenyl)ethanamine;

(61) (2C-T-2); 2-[4-(Ethylthio)-2,5-dimethoxyphenyl]ethanamine;

(62) (2C-T4); 2-[4-(Isopropylthio)-2,5-dimethoxyphenyl]ethanamine;

(63) (2C-H); 2-(2,5-Dimethoxyphenyl)ethanamine;

(64) (2C-N); 2-(2,5-Dimethoxy-4-nitro-phenyl)ethanamine;

(65) (2C-P); 2-(2,5-Dimethoxy-4-(*n*)-propylphenyl)ethanamine;

(66) Methylone; 3,4-Methylenedioxy-*N*-methylcathinone;

(67) Aminorex (2-amino-5-phenyl-2-oxazoline);

(68) Pentedrone;

(69) 4-FMC or flephedrone; 4-fluro-*N*-methylcathinone;

(70) (3-FMC); 3-fluro-*N*-methylcathinone;

(71) (3-MMC); 3-methylmethcathinone;

- (72) (3,4 DMMC); 3,4-Dimethylmethcathinone;
- (73) (3-MEC); 3-Methyl-N-ethylcathinone;
- (74) 4-methylbuphedrone or 4-MeBP; 2-methylamino-1-(4-methylphenyl)butan-1-one
- (75) (4 MTA); 4-methylthioamphetamine;
- (76) (5-Me MDA); 5-methyl-3,4-methylenedioxyamphetamine;
- (77) (6-APB); 6-benzofuran;
- (78) (PMA); 4-methoxyamphetamine;
- (79) (2C-B); 2,5-dimethoxy-4-bromophenethylamine;
- (80) (2C-C); 2,5-dimethoxy-4-chlorophenethylamine;
- (81) (2C-D); 4-methyl-2,5-dimethoxyphenethylamine;
- (82) (2C-E, aquarust, cindy); 2,5-dimethoxy-4-ethylphenethylamine;
- (83) (2C-G); 3,4-dimethyl-2,5-dimethoxyphenethylamine;
- (84) (2C-I); 2,5-dimethoxy-4-iodophenethylamine;
- (85) (2C-T21); 2-[2,5-dimethoxy-4-(2-fluoroethylthio)phenyl]ethanamine;
- (86) (2C-B-FLY); 2-(8-bromo-2,3,6,7-tetrahydrofuro [2,3-f][1]benzofuran-4-yl)ethanamine;
- (87) Bromo-DragonFLY or 3C-Bromo-Dragonfly or DOB-Dragonfly; 1-(4-Bromofuro[2,3-f][1]benzofuran-8-yl)propan-2-amine;
- (88) (DOB); 2,5-Dimethoxy-4-bromoamphetamine;
- (89) (DOC); 2,5-Dimethoxy-4-chloroamphetamine;
- (90) (DOM); 2,5-Dimethoxy-4-methylamphetamine;
- (91) (TMA2); 2,4,5-trimethoxyamphetamine;
- (92) (TMA6); 2,4,6-trimethoxyamphetamine;
- (93) (MDAT); 6,7-methylenedioxy-2-aminotetralin;
- (94) (4-acetoxy DiPT, ipracetin); 4-acetoxy-N,N-diisopropyltryptamine;
- (95) (4-acetoxy DMT, psilacetin;) O-Acetylpsilocin;
- (96) 4-HO MET, metocin; 4-hydroxy-N-methyl-N-ethyltryptamine;
- (97) 4-HO MiPT, hats; 4-hydroxy-N-methyl-N-isopropyltryptamine;
- (98) 5-MeO-aMT, Alpha-O; 5-methoxy- α -methyltryptamine;
- (99) (5-MeO-MiPT); N-[2-(5-methoxy-1H-indol-3-yl)ethyl]-N-methylpropan-2-amine;
- (100) (DiPT); N,N-diisopropyltryptamine;
- (101) (DPT); dipropyltryptamine;
- (102) (5-MeO-DALT); N,N-diallyl-5-methoxytryptamine;
- (103) (3-MeO PCP); 3-methoxyphencyclidine;
- (104) (4-MeO PCP); 4-methoxyphencyclidine;
- (105) (MK-801); dizocilpine;
- (106) (PCE, perchloroethylene, perchloroethene), Perc; tetrachloroethylene;
- (107) (PCE, perchloroethylene, perchloroethene), Perc; tetrachloroethylene;
- (108) (PCPr); phencyclamine, N-(1-phenylcyclohexyl)propanamine;
- (109) (Tenocyclidine); 1-(1-(2-thienyl)cyclohexyl)piperidine
- (110) (3-MeO PCE); 3-methoxyeticyclidine, N-ethyl-1-(3-methoxyphenyl)cyclohexanamine;
- (111) (ETH-LAD); 6-ethyl-6-nor-lysergic acid diethylamide;
- (112) (AL-LAD); 6-allyl-6-nor-LSD;
- (113) (PRO-LAD); 10-didehydroergoline-8-carboxamide;
- (114) ((1-(1,3-benzodioxol-5-yl)-2-(ethylamino)pentan-1-one, N- ethylpentylone);
- (115) (MPHP), 4'-methyl-alpha-pyrrolidinohexiophenone;
- (116) 4'-chloro-alpha-pyrrolidinovalerophenone (4-chloro- α -PVP; 4'-chloro- α -pyrrolidinopentiophenone);
- (117) 4-methyl-alpha-ethylaminopentiophenone (4-MEAP; 2-(ethylamino)-1-(4-methylphenyl)pentan-1-one);
- (118) Alpha-pyrrolidinoheptaphenone (PV8; 1-phenyl-2-(pyrrolidin-1-yl)heptan-1-one);
- (119) Alpha-pyrrolidinohexanophenone (α -PHP; α -pyrrolidinohexanophenone; 1-phenyl-2-(pyrrolidin-1-yl)hexan-1-one);
- (120) N-ethylhexedrone (α -ethylaminohexanophenone; 2-(ethylamino)-1- phenylhexan-1-one);
- (121) Methoxetamine; 2-(ethylamino)-2-(3-methoxyphenyl)cyclohexan-1-one; 2-(3-methoxyphenyl)-2-(N-ethylamino)cyclohexanone; MXE).

F. Any material, compound, mixture or preparation which contains any quantity of the following

substances.

- (1) 3, 4-methylenedioxyamphetamine (MDMA), its optical, positional and geometric isomers, salts and salts of isomers;
- (2) (MPPP); 1-methyl-4-phenyl-4-propionoxypiperidine its optical isomers, salts, and salts of isomers;
- (3) 1-(2-phenylethyl)-4-phenyl-4-acetoxy piperidine (PEPAP), its optical isomers, salts and salts of isomers;
- (4) Cathinone;
- (5) Methcathinone;
- (6) Tianeptene;
- (7) Para- Methoxymethamphetamine (PMMA)

[16.19.20.65 NMAC - Rp 16.19.20.65 NMAC, 6/26/2018; A, 12/17/2019; A, 9/14/2021; A, 6/13/2023]

16.19.20.66 SCHEDULE II:

A. OPIOIDS: Unless specifically excepted or unless in another schedule any of the following opioids, including its isomers, esters, ethers, salts and salts of isomers, esters, and ethers whenever the existence of such isomers, esters, ethers, and salts is possible within the specific chemical designation except dextro and levopropoxyphene.

- (1) Alphaprodine;
- (2) Anileridine;
- (3) Bezitramide;
- (4) Diphenoxylate;
- (5) Dihydrocodeine;
- (6) Dextropropoxyphene (bulk) non-dosage form;
- (7) Fentanyl;
- (8) Isomethadone;
- (9) Levomethorphan;
- (10) Levorphanol;
- (11) Metazocine;
- (12) Methadone;
- (13) 4-cyano-2-dimethylamino-4, 4-diphenylbutane;
- (14) Moramide-Intermediate, 2-methyl-3-morpholino-1, 1-dipehyl-propane-carboxylic acid;
- (15) Pethidine;
- (16) 4-cyano-1-methyl-4-phenylpiperidine;
- (17) ethyl-4-phenyl-piperidine-4-carboxylate;
- (18) 1-methyl-4-phenylpiperidine-4-carboxylic acid;
- (19) Phenazocine;
- (20) Piminodine;
- (21) Racemethorphan;
- (22) Racemorphan;
- (23) Sufentanil;
- (24) Carfentanil;
- (25) (LAAM); Levo-alphacetylmethadol;
- (26) Tapentadol;
- (27) Thiafentanil;
- (28) Norfentanyl;
- (29) Oliceridine.

B. Shall consist of the drugs and other substances, by whatever official name, common or usual name, chemical name or brand name designated, listed in this section. Substance, vegetable origin or chemical synthesis. Unless specifically exempt or unless listed in another schedule, any of the following substances whether produced directly or indirectly by extraction from substances of vegetable origin, or independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis.

- (1) Opium and opiate, and any salts, compound, derivative, or preparation of opium or opiate excluding naloxone, dextrophan, nalbuphine, naltrexone and apomorphine but including the following:
 - (a) Raw opium;
 - (b) Opium extracts;

- (c) Opium fluid extracts;
- (d) Powdered opium;
- (e) Granulated opium;
- (f) Tincture of opium;
- (g) Codeine;
- (h) Ethylmorphine;
- (i) Etorphine hydrochloride;
- (j) Hydrocodone;
- (k) Hydromorphone;
- (l) Metopon;
- (m) Morphine;
- (n) Oxycodone;
- (o) Oxymorphone;
- (p) Thebaine;
- (q) Alfentanil;
- (r) Oripavine.

(2) Any salt, compound derivative, or preparation thereof, which is chemically equivalent or identical with any of the substances referred to in Paragraph (1) of Subsection A of 16.19.20.66 NMAC, except that these substances shall not include the isoquinoline alkaloids of opium.

(3) Opium poppy and poppy straw.

(4) Coca leaves and any salt, compound, derivative or preparation of coca leaves and any salt, compound, derivative or preparation thereof which is chemically equivalent or identical with any of these substances, except that the substances shall not include de-cocainized coca leaves or extraction of coca leaves, which extractions do not contain cocaine or ecgonine.

C. STIMULANTS: Unless specifically exempt or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system. (See 16.19.21 NMAC- Drug Precursors)

- (1) Amphetamine, its salts, optical isomers and salts of its optical isomers.
- (2) Methamphetamine, its salts, isomers and salts of isomers.
- (3) Phenmetrazine and its salts.
- (4) Methylphenidate.
- (5) Lisdexamfetamine.

D. DEPRESSANTS: Unless specifically exempt or unless listed in another schedule any material, compound mixture or preparation which contains any quantity of the substance having a depressant effect on the central nervous system, including its salts, isomers and salts of isomers is possible within the specific chemical designation.

- (1) Amobarbital;
- (2) Secobarbital;
- (3) Pentobarbital;
- (4) Phencyclidine;
- (5) Glutethimide;
- (6) 1-phenylcyclohexylamine;
- (7) 1-piperidinocyclohexanecarbonitrile;
- (8) Dronabinol in an oral solution in a drug product approved for marketing by the U.S. Food and Drug Administration.

E. HALLUCINOGENIC SUBSTANCES: Unless specifically exempt or unless listed in another schedule, any material, compound, mixture or preparation, which contains any quantity of the following hallucinogenic substances, or which contains any of its salts, isomers and salts of isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation (for purpose of this paragraph only, the term "isomers" includes the optical, positional, and geometric isomers):

- (1) Nabilone;
- (2) Phenylacetone (P2P, benzyl methyl ketone; methyl benzyl ketone).

F. MISCELLANEOUS:

- (1) Dihydroetorphine;
- (2) Bulk dextropropoxyphene;
- (3) Remifentanil.

16.19.20.67 SCHEDULE III: Shall consist of drugs and other substances, by whatever official name, common or usual name designated listed in this section.

A. NARCOTIC DRUGS: Unless specifically exempt or unless listed in another schedule, any material, compound, mixture or preparation containing limited quantities of the following narcotic drugs, or any salts thereof.

(1) Not more than one and eight-tenths grams of codeine per 100 milliliters or not more than 90 milligrams per dosage unit, with an equal or greater quantity of an isoquinoline alkaloid of opium.

(2) Not more than one and eight-tenths grams of codeine per 100 milliliters or not more than 90 milligrams per dosage units, with one or more active nonnarcotic ingredients in recognized therapeutic amounts.

(3) Not more than 300 milligrams of dihydrocodeinone per 100 milliliters or not more than 15 milligrams per dosage unit, with a fourfold or greater quantity of an isoquinoline alkaloid of opium.

(4) Not more than 300 milligrams of dihydrocodeinone per 100 milliliters or not more than 15 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

(5) Not more than one and eight-tenths grams of dihydrocodeine per 100 milliliters or not more than 90 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

(6) Not more than 300 milligrams of ethylmorphine per 100 milliliters or not more than 15 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

(7) Not more than 500 milligrams of opium per 100 milliliters or per 100 grams or not more than 25 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

(8) Not more than 50 milligrams of morphine per 100 milliliters or per 100 grams, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

B. STIMULANTS: Unless specifically exempt or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system.

(1) Those compounds, mixtures or preparations in dosage unit form containing any stimulant, amphetamine, phenmetrazine or methamphetamine previously exempt, for which the exemption was revoked by FDA Regulation Title 21, Part 308.13, and any other drug of the quantitative composition shown in that regulation for those drugs or which is the same except that it contains a lesser quantity of controlled substances.

(2) Benzphetamine;

(3) Phendimetrazine;

(4) Chlorphentermine;

(5) Clortermine.

C. DEPRESSANTS: Unless specifically exempt or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system.

(1) Any compound, mixture or preparation containing:

(a) Amobarbital;

(b) Secobarbital;

(c) Pentobarbital;

(d) Butalbital; or any salt thereof and one or more active medicinal ingredients

which are not listed in any schedule.

(2) Any suppository dosage form containing:

(a) Amobarbital;

(b) Secobarbital;

(c) Pentobarbital; or any salt of any of these drugs approved by the FDA for

marketing only as a suppository.

(3) Any substance which contains any quantity of a derivative of barbituric acid or any salt of a derivative of barbituric acid.

(4) Chlorhexadol;

(5) Lysergic Acid;

(6) Lysergic Acid Amide;

(7) Methyprylon;

- (8) Sulfondiethylmethane;
- (9) Sulfonethylmethane;
- (10) Sulfonmethane;
- (11) Telazol; Tiletamine/zolazepam;
- (12) Ketamine Hydrochloride.
- (13) Any drug product containing gamma hydroxybutyric acid, including its salts, isomers,

and salts of isomers, for which an application is approved under Section 505 of the Federal Food, Drug and Cosmetic Act.

(14) Embutramide;

(15) Dronabinol (synthetic) in sesame oil and encapsulated in soft gelatin capsules in a drug product approved by the U.S. food and drug administration.

(16) Perampanel.

D. MISCELLANEOUS:

(1) Nalorphine (a narcotic drug);

(2) Buprenorphine;

(3) Clenbuterol.

E. ANABOLIC STEROIDS: The term “anabolic steroid” means any drug or hormonal substance, chemically and pharmacologically related to testosterone (other than estrogens, progestins, and corticosteroids) that promotes muscle growth. Unless specifically exempt or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of the following substances listed in this section:

(1) Boldenone;

(2) Chloro testosterone;

(3) Clostebol;

(4) Dehydrochlormethyltestosterone;

(5) Dihydrotestosterone;

(6) Drostanolone;

(7) Ethylestrenol;

(8) Fluoxymesterone;

(9) Formebolone;

(10) Mestanolone;

(11) Mesterolone;

(12) Methandienone;

(13) Methandranone;

(14) Methandriol;

(15) Methandrosthenolone;

(16) Methenolone;

(17) Methyltrienolone;

(18) Methyltestosterone;

(19) Mibolerone;

(20) Nandrolone;

(21) Norbolethone;

(22) Norethandrolone;

(23) Oxandrolone;

(24) Oxymesterone;

(25) Oxymetholone;

(26) Stanolone;

(27) Sanozolol;

(28) Testolactone;

(29) Testosterone;

(30) Trenbolone; and

(31) any salt, ester, or isomer of a drug or substance described or listed in this paragraph, if that salt, ester, or isomer promotes muscle growth.

F. Exempt anabolic steroids: Compounds, mixtures, or preparations that contain an anabolic steroid that have been exempted by the board from Subsection E of 16.19.20.67 NMAC, schedule III to the same extent that the substance has been exempted from the application of the Federal Controlled Substance Act, if the substance is listed as an exempt anabolic steroid product under 21 C.F.R. Section 1308.34 and its subsequent amendments.

16.19.20.68 SCHEDULE IV: Shall consist of the drugs and other substances, by whatever official name, common or usual name, chemical name, or brand name designated, listed in this section.

A. DEPRESSANTS: Unless specifically exempt or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of the following substances, including its salts, isomers, and salts of isomers whenever the existence of such salts, isomers and salts of isomers is possible within the specific chemical designation:

- (1) Alfaxalone;
- (2) Alprazolam;
- (3) Barbital;
- (4) Chloral Betaine;
- (5) Chloral Hydrate;
- (6) Chlordiazepoxide;
- (7) Clobazam;
- (8) Clonazepam;
- (9) Clorazepate;
- (10) Clotiazepam
- (11) Diazepam;
- (12) Estazolam;
- (13) Ethchlorvynol;
- (14) Ethinamate;
- (15) Flurazepam;
- (16) Fospropofol;
- (17) Halazepam;
- (18) Lorazepam;
- (19) Mebutamate;
- (20) Meprobamate;
- (21) Methohexital;
- (22) Methylphenobarbital;
- (23) Midazolam;
- (24) Oxazepam;
- (25) Paraldehyde;
- (26) Petrichloral;
- (27) Phenobarbital;
- (28) Prazepam;
- (29) Quazepam;
- (30) Remimazolam;
- (31) Suvorexant;
- (32) Temazepam;
- (33) Triazolam;
- (34) Brexanolone.

B. LORCASERIN: Any material, compound, mixture or preparation which contains any quantity of the following substance, including its salts, isomers (whether optical, positional, or geometric) and its salts, or such isomers, whenever the existence of such salts, isomers, and salts of isomers is possible: Lorcaserin.

C. STIMULANTS: Unless specifically exempt or unless listed in another schedule any material, compound, mixture or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system, including its salts, isomers (whether optical, positional, or geometric) and salts of such isomers whenever the existence of such salts, isomers and salts of isomers is possible within the specific chemical designation:

- (1) Diethylpropion;
- (2) Phentermine;
- (3) Pemoline (including organometallic complexes and chelates thereon);
- (4) Pipradrol;
- (5) SPA ((-)-1-dimethyl amino-1,2-diphenylmethane);
- (6) Mazindol;

- (7) Cathine;
- (8) Fencamfamin;
- (9) Fenproporex;
- (10) Mefenorex;
- (11) Modafinil;
- (12) Sibutramine;
- (13) Solriamfetol;
- (14) Serdexmethylphenidate.

D. OTHER SUBSTANCES: Unless specifically exempt or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of the following substances, including its salts:

- (1) Dextropropoxyphene(Alpha-(+)-4-dimethylamino-1,2-diphenyl-3-methyl-2-propionoxybutane);
- (2) Pentazocine;
- (3) Carisoprodol;
- (4) Nalbuphine Hydrochloride;
- (5) Butorphanol Tartrate;
- (6) Dezocine;
- (7) Dichloralphenazone;
- (8) Zaleplon;
- (9) Zolpidem;
- (10) Eszopiclone;
- (11) Tramadol;
- (12) Eluxadolone (5-[[[(2S)-2-amino-3-[4-aminocarbonyl]-2,6-dimethylphenyl]-1-oxopropyl][(1S)-1-(4-phenyl-1H-imidazol-2-yl)ethyl]amino]methyl]-2-methoxybenzoic acid) (including its optical isomers) and its salts, isomers, and salts of isomers
- (13) Lemborexant;
- (14) Daridorexant

E. NARCOTIC DRUG: Unless specifically exempt or unless listed in another schedule, any material, compound, mixture or preparation containing limited quantities of any of the following narcotic drugs or any salts thereof: Not more than one milligram of difenoxin and not less than 25 micrograms of atropine sulfate per dosage unit.

F. EXEMPTION OF CHLORAL: When packaged in a sealed, oxygen-free environment, under nitrogen pressure, safeguarded against exposure to the air. Chloral when existing under the above conditions is a substance which is not intended for general administration to a human being or another animal, and contains no narcotic controlled substances and is packaged in such a form that the package quantity does not present any significant potential for abuse. All persons who engage in industrial activities with respect to such chloral are subject to registration; but shall be exempt from Section 30-31-16 through 19 of the New Mexico Controlled Substances Act and 16.19.20.19 NMAC through 16.19.20.52 NMAC of the board of pharmacy regulations.

G. EXEMPT COMPOUNDS: Librax and Menrium are preparations which contain chlordiazepoxide, a depressant listed in schedule IV, Paragraph (6) of Subsection A of 16.19.20.68 NMAC and other ingredients in such combinations, quantity, preparation or concentration as to vitiate the potential for abuse of chlordiazepoxide, and are hereby exempt preparations.

- (1) Librax;
- (2) Menrium, 5-2;
- (3) Menrium, 4-5;
- (4) Menrium, 10-4.

[16.19.20.68 NMAC - Rp 16.19.20.68 NMAC, 6/26/2018; A, 9/14/2021; A, 6/13/2023]

16.19.20.69 SCHEDULE V:

A. Narcotic drugs containing non-narcotic active medicinal ingredients. Any compound, mixture, or preparation containing any of the following narcotic drugs, or their salts calculated as the free anhydrous base or alkaloid, in limited quantities as set forth below, which shall include one or more non-narcotic active medicinal ingredients in sufficient proportion to confer upon the compound, mixture, or preparation valuable medicinal qualities other than those possessed by narcotic drugs alone.

- (1) Not more than 200 milligrams of codeine per 100 milliliters or per 100 grams.

- (2) Not more than 100 milligrams of dihydrocodeine per 100 milliliters or per 100 grams.
- (3) Not more than 100 milligrams of ethylmorphine per 100 milliliters or per 100 grams.
- (4) Not more than two and five-tenths milligrams of diphenoxylate and not less than 25 micrograms of atropine sulfate per dosage unit.
- (5) Not more than 100 milligrams of opium per 100 milliliters or per 100 grams.
- (6) Not more than five-tenths milligrams of difenoxin and not less than 25 micrograms of atropine sulfate per dosage unit.

B. Stimulants. Unless specifically exempted or excluded or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system, including its salts, isomers and salts of isomers.

- (1) Pyrovalerone.
- (2) Pseudoephedrine as a drug that includes any compound, mixture, or preparation that contains any detectable quantity of pseudoephedrine, its salts or its optical isomers, or salts of its optical isomers. Pursuant to 30-31-10.C the following substances are excluded from schedule V controlled substances: pseudoephedrine products in liquid form including liquid filled gel caps and pseudoephedrine products already classified as dangerous drugs.

C. Depressants. Unless specifically exempted or excluded or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system, including its salts:

- (1) Lacosamide [(R)-2acetoamido-N-benzyl-3-methoxy-propionamide];
- (2) Pregabalin [(S)-3-(aminomethyl)-5-methylhexanoic acid];
- (3) Ezogabine [N-[2-amino-4-(4-fluorobenzylamino-phenyl)]-carbamic acid ethyl ester];
- (4) Brivaracetam;
- (5) Cenobamate;
- (6) Lasmiditan;
- (7) Ganaxolone

[16.19.20.69 NMAC - Rp 16.19.20.69 NMAC, 6/26/2018; A, 12/17/2019, A, 12/15/2020; A, 9/14/2021; A, 6/13/2023]

16.19.20.70 EXEMPT DANGEROUS DRUGS (PRESCRIPTION STATUS DRUGS): The drugs set forth in the *Federal DEA Table of Excepted Prescription Drugs* published in a separate volume under Code of Federal Regulations, Title 21, Chapter II, Part 1308.32 have been exempt by the New Mexico board of pharmacy. Any deviation from the quantitative composition of any of the listed drugs shall require a petition for exemption to the Federal DEA in order that a drug may be exempt by DEA and the New Mexico board of pharmacy.

[16.19.20.70 NMAC - Rp 16.19.20.70 NMAC, 6/26/2018]

History of 16.19.20 NMAC:

Pre-NMAC History:

Material in this part was derived from that previously filed with the commission of public records - state records center and archives as:

BOP 69-2, Rules and Regulations of the State Board of Pharmacy, filed 6/13/1969;

BOP 69-3, New Mexico Laws and Regulations, Pharmacy Act, Drug and Cosmetic Act, Narcotic Drug Act, Poisons Act, Board of Pharmacy Rules and Regulations, filed 8/15/1969;

BOP 72-1, New Mexico Board of Pharmacy Rules and Regulations Promulgated Pursuant to New Mexico Drug and Cosmetic Act, Pharmacy Act, Controlled Substances Act, filed 4/1/1969;

Regulation No. 20, Controlled Substances, filed 2/7/1980;

Regulation No. 20, Controlled Substances, filed 10/24/1985;

Regulation No. 20, Controlled Substances, filed 2/2/1987;

Regulation No. 20, Controlled Substances, filed 7/27/1990.

History of Repealed Material:

85-1, Repealer, filed 10/29/1985.

16 NMAC 19.20, Pharmacists - Controlled Substances, filed 5/1/1998, repealed effective 7/15/2002.

16.19.20 NMAC, Controlled Substances, filed 7/15/2002, repealed effective 6/26/2018.

Other History:

Regulation No. 20, Controlled Substances, filed 7/27/1990; renumbered, reformatted to 16 NMAC 16.4, Pharmacists - Controlled Substances, filed 2/2/1996;
16 NMAC 19.20, Pharmacists - Controlled Substances, filed 7/25/1996;
16 NMAC 19.20, Pharmacists - Controlled Substances, filed 5/1/1998;
16 NMAC 19.20, Pharmacists - Controlled Substances, filed 5/1/1998, replaced by 16.19.20 NMAC, Controlled Substances, effective 7/15/2002.