

Fact sheet

Updated January 2026

Registration standard: Endorsement for scheduled medicines – designated registered nurse prescriber

Introduction

The Nursing and Midwifery Board of Australia (NMBA) carries out functions as set by the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). The NMBA regulates the practice of nursing and midwifery in Australia, and one of its key roles is to protect the public. The NMBA does this by developing registration standards, professional codes, guidelines and standards for practice which together establish the requirements for the professional and safe practice of nurses and midwives in Australia.

The [Registration standard: Endorsement for scheduled medicines – designated registered nurse prescriber](#) (the standard) describes the necessary qualifications that a registered nurse (RN) must demonstrate when applying for and maintaining the endorsement for scheduled medicines – designated registered nurse prescriber.

The following questions answer common queries about the designated RN prescriber registration standard.

Why has the NMBA developed the Registration standard: Endorsement for scheduled medicines – designated RN prescriber?

Registered nurses are the largest healthcare workforce in Australia. Enabling suitably educated and qualified RNs to prescribe Schedule 2, 3, 4 and 8 medicines in partnership with an authorised health practitioner¹ under a prescribing agreement can contribute to people having timely, affordable access to healthcare.

The endorsement will enhance access to high-quality, reliable medicines for all Australians, especially those in rural and remote areas. It will also help alleviate pressure points in both acute and primary care, where access to appointments is a challenge for healthcare consumers.

This prescribing model improves resource use and strengthens care coordination. It allows designated RN prescribers to manage medicines in prescribing partnerships, freeing up other healthcare professionals to focus on more complex areas of patient care.

¹ An authorised health practitioner is a registered health practitioner who is an authorised autonomous prescriber for example a medical practitioner or a nurse practitioner (more than one authorised health practitioner may work with the designated registered nurse prescriber).

Ahpra and the National Boards acknowledge the Traditional Owners of Country throughout Australia and their continuing connection to lands, waters and communities. We pay our respects to Aboriginal and Torres Strait Islander cultures and Elders past and present.

When did the Registration standard: Endorsement for scheduled medicines – designated RN prescriber take effect²?

The *Registration standard: Endorsement for scheduled medicines - designated RN prescriber* took effect on 30 September 2025.

Who does this apply to?

This standard applies to registered nurses in Australia who are interested in applying for or renewing their endorsement for scheduled medicines as a designated RN prescriber.

What is an endorsement?

An endorsement of registration identifies practitioners with additional qualifications and specific expertise leading to extended scope of practice.

Under section 94 of the National Law, a National Board may endorse the registration of a registered health practitioner as qualified to administer, obtain, possess, prescribe, sell, supply, or use a scheduled medicine or class of scheduled medicines.

What is designated RN prescribing?

Designated RN prescribing occurs when an RN with the endorsement for scheduled medicines undertakes prescribing within their level of competence and scope of practice, in partnership with an authorised health practitioner, under a prescribing agreement. The designated RN prescriber is responsible and accountable for prescribing within their scope of practice and authorisation.

What can a designated RN prescriber do?

Designated RN prescribers with an endorsement for scheduled medicines can **administer, obtain, possess, prescribe, supply** and/or **use** Schedule 2, 3, 4 and 8 medicines in partnership with an authorised health practitioner¹ under a prescribing agreement.

Prescribing must be undertaken in accordance with the standard, the [Guidelines for registered nurses applying for and with the endorsement – designated registered nurse prescriber](#) (the guidelines), local policies and procedures, within the clinical context of care and within the designated RN prescriber's scope of practice. What can be prescribed will be influenced by other regulatory frameworks and legislation outside of the NMBA's jurisdiction, such as the relevant state or territory medicines and poisons legislation, and the requirements set by the Therapeutic Goods Administration.

What is the difference between a nurse practitioner and a designated RN prescriber?

A **nurse practitioner (NP)** is an autonomous prescriber. NPs can diagnose, treat and prescribe within their context and scope of practice. An NP can practise independently or work together with other health professionals to provide nursing care at an advanced practice level. NPs have completed education at a Masters level.

A **designated RN prescriber** must work in partnership with an authorised health practitioner under a prescribing agreement. A designated RN prescriber must also complete a six-month period of clinical mentorship with an authorised health practitioner when they first practice after becoming endorsed. Designated RN prescribers have completed additional NMBA-approved postgraduate education.

The following table provides a comparison of the prescribing requirements and scope of prescribing for RNs, designated RN prescribers and NPs. This is a high-level summary only. For detailed requirements, please refer to the relevant standards and guidelines associated with each endorsement.

² For NMBA documents, the term 'take effect' means to start (i.e. 'effective date' means the start date)

Table 1. Comparison of scope of prescribing for RNs, designated RN prescribers and NPs

Prescribing	Registered nurse	Designated RN prescriber	Nurse practitioner
Education and experience	Included as part of the entry to practice undergraduate Bachelor of Nursing curriculum (AQF 7) or Master of Nursing	Approved qualification pathway AQF 8 Postgraduate Certificate – Designated RN Prescriber The equivalent of three years' full time (5,000 hours) clinical experience as a registered nurse following initial registration, within the past six years	Approved qualification pathway AQF 9 Master of Nurse Practitioner The equivalent of three years' full-time experience (5,000 hours) at the clinical advanced nursing practice level, within the past six years
NMBA endorsement	No	Yes Endorsement for scheduled medicines – designated RN prescriber	Yes Endorsement as a nurse practitioner
Scope of prescribing	Able to identify the need for and supply medicines via approved protocol/policy.	Able to diagnose and prescribe scheduled medicines for a range of conditions within their scope of practice under a prescribing agreement with an authorised health practitioner.	Able to autonomously diagnose, treat and prescribe scheduled medicines within their scope of practice.
Prescribing authority	Limited to agreed medicines as per approved protocol/policy.	Authorised to prescribe within a clinical governance framework, under a prescribing agreement and in accordance with state and territory medicines and poisons legislation and regulations.	Authorised prescriber in accordance with state and territory medicines and poisons legislation and regulations.

I am a registered nurse, what do I need to do to apply for the endorsement for scheduled medicines as a designated registered nurse prescriber?

To apply for the endorsement for scheduled medicines – designated RN prescriber, an RN must:

- Successfully complete NMBA-approved units of study leading to endorsement for scheduled medicines as a designated RN prescriber (or equivalent units of study), and
- Complete 5,000 hours of post-initial registration clinical experience within the last six years.

RNs applying for the endorsement for scheduled medicines must have no conditions or undertakings relevant to the endorsement on their general registration and meet all other requirements as set out in the standard.

What are the NMBA-approved units of study leading to endorsement for scheduled medicines as a designated RN prescriber?

The approved units of study help RNs build knowledge and skills in prescribing medicines. They are accredited by the Australian Nursing and Midwifery Accreditation Council (ANMAC) against the [Registered Nurse Prescribing Accreditation Standards](#) and approved by the NMBA.

In October 2025, the NMBA approved the first units of study leading to endorsement for scheduled medicines as a designated RN prescriber. Ahpra publishes a list of all NMBA [approved programs of study leading to general registration or endorsement](#) on its website.

What units of study do I need to complete to be eligible to apply for the endorsement for scheduled medicines – designated registered nurse prescriber?

Registered nurses wanting to apply for the endorsement will need to have completed either:

- NMBA-approved units of study leading to endorsement for scheduled medicines as a designated registered nurse prescriber (Pathway 1), or
- units of study that are equivalent to the NMBA-approved units of study leading to endorsement for scheduled medicines as a designated RN prescriber (Pathway 2).

How will I know if units of study are equivalent to the NMBA-approved units of study leading to endorsement for scheduled medicines as a designated RN prescriber?

If an applicant has not completed the NMBA-approved units of study Ahpra will assess their units of study against the NMBA approved qualification assessment criteria. The qualification assessment criteria are published on the NMBA website.

As part of an application for endorsement for scheduled medicines – designated RN prescriber, applicants will be required to submit information about their units of study to enable Ahpra to complete the assessment against the qualifications assessment criteria.

Can I apply for the endorsement for scheduled medicines – designated registered nurse prescriber under the Trans-Tasman Mutual Recognition Act (TTMRA)?

A registered nurse authorised by the Nursing Council of New Zealand to prescribe within primary health and specialty teams may be eligible to apply for the endorsement if they hold a current Nursing Council of New Zealand practising certificate that includes authorisation to prescribe within primary health and specialty teams. If you think you may be eligible to apply for the endorsement under the TTMRA you can apply online in the Ahpra portal. More information on setting up your portal can be found [here](#).

How can I apply for the endorsement for scheduled medicines – designated registered nurse prescriber?

Registered nurses can apply for endorsement by logging into their [Ahpra practitioner portal](#) then select My registrations > Manage registration > Add endorsement.

If you do not already have an Ahpra practitioner portal you will need to set one up. More information on setting up your portal can be found [here](#).

Once I am endorsed as a designated RN prescriber, can I start prescribing?

No. The endorsement indicates that a designated RN prescriber is qualified to administer, obtain, possess, prescribe, supply and/or use Schedule 2, 3, 4 and 8 medicines but does not authorise them to do so.

A designated RN prescriber's authority to prescribe is granted under the relevant medicines and poisons legislation in the Australian state or territory where they practise. The conditions and scope of that authority depend on the requirements of the specific legislation in each state and territory. In some instances, there are separate arrangements for Pharmaceutical Benefits Scheme (PBS) prescriptions in certain public hospitals.

Relevant approvals, and in some cases legislative change, may be required to ensure that designated RN prescribers will have the necessary supports in place and be able to undertake prescribing without any financial or other impacts for patients.

Other requirements that enable practice as a designated RN prescriber must also be in place, as outlined in the *Guidelines, for registered nurses applying for and with the endorsement – designated registered nurse prescriber*. These requirements include the designated RN prescriber's scope of practice, the prescribing agreement and clinical governance arrangements.

What must I do when I have the endorsement for scheduled medicines as a designated RN prescriber?

When an RN receives the endorsement for scheduled medicines as a designated RN prescriber, they must comply with the following ongoing requirements:

1. Follow the NMBA *Guidelines for registered nurses applying for or with the endorsement for scheduled medicines – designated registered nurse prescriber*, the prescribing partnership with the authorised health practitioner/s and the clinical governance framework.
2. Undertake a period of clinical mentorship with an authorised health practitioner for the first six months of clinical practice with the endorsement.
3. Only prescribe when there is an active prescribing arrangement in place with an authorised health practitioner.
4. For sole practitioners and/or RNs working in private practice, meet the additional requirements outlined in the NMBA *Guidelines for registered nurses applying for or with the endorsement for scheduled medicines – designated registered nurse prescriber*.

What does clinical mentorship mean?

A designated RN prescriber is required to complete a six-month period of clinical mentorship with an authorised health practitioner when they become endorsed. This is designed to build confidence in prescribing and is tailored to the prescribing agreement, clinical governance frameworks, organisational policies and procedures, and the designated RN prescriber's experience and context of practice. This mentorship is different to, and is not, clinical supervision.

What is a prescribing agreement?

The prescribing agreement is a formal document that defines the roles and responsibilities of the designated RN prescriber and the authorised health practitioner, as well as the conditions and scope within which the designated RN prescriber can prescribe medicines. The prescribing agreement must be approved by the health organisation/service or employer. This should be retained and stored by the health organisation/service or employing organisation.

Following the six-month clinical mentorship period, a designated RN prescriber can only continue to prescribe under an *active* prescribing agreement – that is where there is a current agreement and partnership in place with an authorised health practitioner.

Who can be an authorised health practitioner?

An authorised health practitioner means a registered health practitioner who is an authorised autonomous prescriber (prescribes independently). For designated RN prescribers, the authorised health practitioner will likely be a medical practitioner, for example a general practitioner, or a nurse practitioner, depending on the context and scope of practice of the designated RN prescriber.

Another example would be where a designated RN prescriber is providing community-based foot-care may seek a partnership with a podiatrist who has an endorsement for scheduled medicines as the authorised health practitioner, to facilitate timely access to treatment and the efficient use of skills and resources. The authorised health practitioner, the podiatrist in this example, must be aware of the designated RN prescriber's scope of practice with regards to prescribing and ensure their scope and area of practice aligns with the designated RN prescriber's scope of prescribing.

Once I am endorsed as a designated RN prescriber, can I prescribe in any practice setting?

No. Designated RN prescribers must practise in partnership with an authorised health practitioner under an active prescribing agreement, within their scope and context of practice, which is influenced by their practice setting. They must also comply with all relevant NMBA standards, codes and guidelines, medicines and poisons regulations, local policies and procedures. A designated RN prescriber is responsible and accountable for the prescribing decisions they make, and any actions taken.

Employers determine the roles and responsibilities of designated RN prescribers under their clinical governance frameworks and prescribing agreements.

A designated RN prescriber's authority to prescribe is granted in the Australian state or territory where they practise in line with the conditions and medicines and poisons regulations of their state or territory.

Before commencing prescribing, the designated RN prescriber must follow the NMBA's *Guidelines for registered nurses applying for or with the endorsement for scheduled medicines – designated registered nurse prescriber* which includes having in place an active prescribing arrangement with an authorised health practitioner and an appropriate clinical governance framework.

What happens if a designated RN prescriber changes scope of practice and context of practice?

If a designated RN prescriber changes their scope and context of practice, they must undertake further clinical education and skill development in the contextual clinical area to meet those needs. A designated RN prescriber planning to change their context or scope of practice is required to use the NMBA's [Decision-making framework for nursing and midwifery](#). Employers must ensure that clinical governance frameworks are in place and that the designated RN prescriber has undertaken the relevant skill development to be able to change their scope.

Once I am endorsed as a designated RN prescriber, what continuing professional development (CPD) do I need to do each year?

Designated RN prescribers must complete an additional 10 hours of CPD relevant to their endorsement for scheduled medicines to meet the requirements of the NMBA's *Registration standard: Continuing professional development*.

Will having an endorsement for scheduled medicines as a designated RN prescriber affect my professional indemnity insurance arrangements?

Possibly. Designated RN prescribers should confirm with their employers or insurance providers to ensure that they have appropriate professional indemnity coverage for their role as a designated RN prescriber.

Under the National Law, nurses must not practise the profession in which they are registered unless they hold appropriate professional indemnity insurance (PII) arrangements in relation to their practice.

Requiring registered health practitioners to hold appropriate PII arrangements is an important part of how the National Scheme protects the public by addressing the risk posed by uninsured practitioners.

PII arrangements mean arrangements that secure for the nurse's professional practice, insurance against civil liability incurred by, or loss arising from, a claim that is made as a result of a negligent act, error or omission in the conduct of the nurse.

How will the public know if a nurse is a designated RN prescriber?

Ahpra maintains a public [register of all registered health practitioners](#) in Australia. Once endorsed, designated RN prescribers will have the following wording on their registration

Endorsed as qualified to administer, obtain, possess, prescribe, supply and/or use Schedule 2, 3, 4 and 8 medicines for the purposes of prescribing as a designated registered nurse prescriber with an authorised health practitioner within the scope of registered nurse practice.

This ensures that the public can identify RNs who are trained and qualified to prescribe medications according to the standard.

If a nurse's name is not on the register or there are questions about the details, the public can contact Ahpra on 1300 419 495 for assistance.

Are all RNs required to undertake RN prescribing courses?

No, undertaking postgraduate education to extend their scope of practice and apply for an endorsement for scheduled medicines as a designated RN prescriber is a personal choice for each RN.

What is the NMBA doing to prepare for designated RN prescribing?

The NMBA is committed to ensuring all stakeholders understand the new standard and how it might affect them. The Board has a responsibility to engage key stakeholders, foster collaboration and invite feedback.

Over the next twelve months, it is essential to bring everyone with a shared interest in this initiative on the journey toward successful adoption in practice.

What happened to the rural and isolated practice endorsement?

On 6 April 2023, Health Ministers agreed to the retirement of the [Rural and isolated practice \(RIP\) endorsement](#).

Following extensive consultation with stakeholders and RIP endorsed RNs it was agreed that the endorsement was no longer required for RNs to obtain, supply and administer schedule 2, 3, 4 and 8 medicines in rural and isolated practice settings. A number of jurisdictions have processes in place to enable the supply of medicines under protocol.

For more information

- [Registration standard: Endorsement for scheduled medicines – designated registered nurse prescriber](#)
- [Guidelines for registered nurses applying for or with the endorsement for scheduled medicines – designated registered nurse prescriber](#)
- Visit www.nursingmidwiferyboard.gov.au under *Contact us* to lodge an online enquiry form
- For registration enquiries: 1300 419 495 (in Australia) +61 3 9275 9009 (overseas callers)

Document history

Approved by: Nursing and Midwifery Board of Australia

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Next review due: May 2026

Policy history: Is this a new policy? **N**

Does this policy amend or update an existing policy? **Y**

If so which version **v1.1**

Does this policy replace another policy with a different title? **N**

Approval date	Version	Reason for change
May 2025	v1.0	Advance copy
September 2025	v1.1	<ul style="list-style-type: none">• In effect copy• Inclusion of scope of prescribing comparison table• Clarity around the endorsement being for scheduled medicines• Content removed relating to sole practitioners• Additional FAQs to provide information relating to timeframes regarding approval of units of study and when applications for the endorsement will be available
January 2026	v1.2	<ul style="list-style-type: none">• Information updated now that the NMBA has approved units of study leading to endorsement and applications are open