
Formulary for Prescribing Podiatrists in Nova Scotia

In the practice of podiatry, the use of medication is a cornerstone of effective patient care. Good prescribing is not merely about selecting the right drug, it is a complex process that encompasses accurate diagnosis, patient-centred treatment planning, and the consideration of the broader health implications of medication use.

It is the College's responsibility to ensure that the highest standards of patient care are maintained within the podiatry profession; part of this involves ensuring that medication is prescribed appropriately and safely.

It is imperative that podiatrists prescribe medications only in relation to ailments of the foot, which falls within the podiatry scope of practice. This is crucial for patient safety and aligns with the legal and ethical boundaries of the profession.

Podiatrists must adhere to the following guidelines when prescribing medications:

1. Ensure that the medication is directly related to the treatment of ailments of the foot.
2. Assess the patient thoroughly to confirm the diagnosis and need for medication.
3. Prescribe medications with a clear understanding of their indications, contraindications, side effects, and potential interactions.
4. Maintain accurate and up-to-date records of all prescriptions and patient consultations.

Formulary

Podiatrists may prescribe the following medications in Nova Scotia:

Schedule 1 – Substances Administered by Injection into the Foot

Betamethasone sodium phosphate beta-acetate
Dexamethasone sodium phosphate
Hydrocortisone sodium succinate
Methylprednisolone acetate
Triamcinolone acetonide
Denatured alcohol 4% (ethyl alcohol)
Bupivacaine
Lidocaine hydrochloride (with or without epinephrine)
Mepivacaine hydrochloride

B12- Cyanocobalamin

Schedule 2 – Drugs for Topical Use

Topical Antibacterial Agents – for the purpose of managing superficial bacterial infections of the foot:

Bacitracin
Framycetin sulfate
Fusidic acid
Gentamicin sulfate
Mupirocin
Silver sulfadiazine
Erythromycin
Bacitracin/neomycin sulphate
Neomycin sulphate/polymyxin B sulphate/bacitracin
Neomycin sulphate/polymyxin B sulphate/gramicidin

Topical Antifungal Agents – for the purpose of managing fungal and/or yeast infections of the skin and nails of the foot:

Ciclopirox olamine
Clotrimazole
Ketoconazole
Miconazole nitrate
Nystatin
Terbinafine HCl
Tolnaftate cream
Undecylenic acid
Efinaconazole
Clioquinol

Topical Antipruritic and Local Anesthetic Agents – for the purpose of decreasing or eliminating sensation in an area of skin of the foot to relieve inflammatory skin symptoms or prior to injection of superficial procedures:

Benzocaine
Lidocaine
Prilocaine

Topical Nonsteroidal Anti-inflammatory Agents — for the purpose of relieving inflammation and pain in structures of the foot:

Diclofenac
Ketoprofen
Piroxicam
Sulindac

Topical Corticosteroid Agents – for the purpose of treating inflammatory manifestations of corticosteroid responsive dermatoses in structures of the foot:

Amcinonide
Betamethasone dipropionate
Betamethasone valerate
Desoximetasone
Flumethasone/cliproquinol
Fluocinonide
Halcinonide
Hydrocortisone
Hydrocortisone 17 valerate
Mometasone furoate
Triamcinolone acetonide

Topical Emollients, Keratolytic, and Miscellaneous Skin Agents — for the management of hyperkeratotic, inflammatory, and/or infectious skin conditions of the foot, adjunct treatment of fungal nails, and/or chemical destruction of miscellaneous skin and nail lesions:

Salicylic Acid (70% or less)
Urea (50% or less)
Ammonium lactate (12% or less)
Cantharidin (1% or less)
Silver Nitrate (95% or less)
5-Fluorouracil (5% or less)
Podophyllin (2% or less)
Lactic acid (16.7% or less)
Imiquimod (3.75% w/w)
Pimecrolimus (1% w/w)
Calcipotriol (50 mcg/g)
Collagenase

Schedule 3 – Drugs for Oral Use

Oral Penicillin Antibacterial Agents — for the purpose of managing susceptible bacterial infections of foot wounds (traumatic, post-op complications), cellulitis, lacerations/punctures, abscesses, and/or surgical prophylaxis:

Amoxicillin
Amoxicillin/Clavulanic acid
Cloxacillin

Oral First-Generation Cephalosporin Agents — for the purpose of managing susceptible bacterial infections of foot wounds (traumatic, post-op complications), cellulitis, lacerations/punctures, abscesses, and/or surgical prophylaxis:

Cefadroxil
Cephalexin

Oral Erythromycin and Macrolide Agents — for the purpose of managing susceptible bacterial infections of foot wounds (traumatic, post-op complications), cellulitis, lacerations/punctures, abscesses, and/or surgical prophylaxis:

Erythromycin
Azithromycin
Clarithromycin

Oral Quinolone Agents — for the purpose of managing susceptible bacterial infections of foot wounds (traumatic, post-op complications), cellulitis, lacerations/punctures, abscesses, and/or surgical prophylaxis:

Ciprofloxacin
Levofloxacin
Moxifloxacin

Oral Sulfonamide Agents — for the purpose of managing susceptible bacterial infections of foot wounds (traumatic, post-op complications), cellulitis, lacerations/punctures, abscesses, and/or surgical prophylaxis:

Sulfamethoxazole/trimethoprim

Oral Tetracycline Agents — for the purpose of managing susceptible bacterial infections of foot wounds (traumatic, post-op complications), cellulitis, lacerations/punctures, abscesses, and/or surgical prophylaxis:

Tetracycline
Doxycycline

Oral Lincomycins — for the purpose of managing susceptible bacterial infections of foot wounds (traumatic, post-op complications), cellulitis, lacerations/punctures, abscesses, and/or surgical prophylaxis:

Clindamycin

Oral Metronidazole — for the purpose of managing susceptible anaerobic bacterial infections of foot wounds (traumatic, post-op complications), cellulitis, lacerations/punctures, and abscesses:

Metronidazole

Oral Nonsteroidal Anti-Inflammatory Agents — for the purpose of relieving inflammatory conditions or pain of the foot:

Diclofenac potassium
Diclofenac sodium
Diflunisal
Ibuprofen
Indomethacin

Meloxicam

Ketorolac tromethamine (maximum daily dosage of 10 mg every 4-6 hours, as needed for pain, with the total dosage not to exceed 4 doses per day, or 40 mg in total per day, for a maximum duration of 5 days)

Naproxen

Naproxen sodium

Tiaprofenic acid

Celecoxib

Ketoprofen

Piroxicam

Sulindac

Oral Misoprostol — to be prescribed only in conjunction with Nonsteroidal Anti-inflammatory Agents for the purpose of preventing gastric bleeding, in the course of engaging in the practice of podiatry:

Misoprostol

Oral Azole Agents — for the purpose of managing fungal and/or yeast infections of the skin and nails of the foot:

Itraconazole

Fluconazole

Oral Allylamine Agents — for the purpose of managing fungal and/or yeast infections of the skin and nails of the foot:

Terbinafine

Oral First-Generation Antihistamines — for use in the management of nausea/vomiting, pruritis, urticaria, and/or allergic symptomatology, while engaging in the practice of podiatry:

Diphenhydramine

Promethazine

Hydroxyzine

Oral Second-Generation Antihistamines — for use in the management of pruritis, urticaria, and/or allergic symptomatology, while engaging in the practice of podiatry:

Cetirizine

Oral Histamine H2-Antagonists — to be prescribed only in conjunction with Nonsteroidal Anti-inflammatory Agents for the purpose of preventing gastric bleeding, while engaging in the practice of podiatry:

Cimetidine

Nizatidine

Acknowledgements

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