



**THE PHARMACEUTICAL SOCIETY OF UGANDA**

**THE PHARMACY AND DRUGS  
(ISSUANCE AND RENEWAL OF CERTIFICATES OF PRACTICE)  
BYELAWS, 2026**

## ARRANGEMENT

|                                                                         |    |
|-------------------------------------------------------------------------|----|
| PART I — PRELIMINARY .....                                              | 4  |
| 1. Citation .....                                                       | 4  |
| 2. Commencement.....                                                    | 4  |
| 3. Objects .....                                                        | 4  |
| 4. Interpretation .....                                                 | 4  |
| PART II — CERTIFICATE OF PRACTICE .....                                 | 5  |
| 5. Requirement for Certificate of Practice .....                        | 5  |
| 6. Eligibility for issue or renewal .....                               | 5  |
| 7. Application.....                                                     | 5  |
| 8. Decision and time for determination.....                             | 5  |
| 9. Validity and renewal .....                                           | 6  |
| 10. Form and verification of certificate .....                          | 6  |
| PART III — PRACTICE SETTINGS, PROFESSIONAL PRESENCE AND CHANGEOVER..... | 6  |
| 11. Scope of recognised practice .....                                  | 6  |
| 12. Multiple practice settings .....                                    | 6  |
| 13. Attendance and continuity of professional supervision .....         | 7  |
| 14. Changeover and cessation at a practice setting.....                 | 7  |
| PART IV — LIMITED PRACTICE BY A FOREIGN-REGISTERED PHARMACIST.....      | 7  |
| 15. Purpose and nature of temporary authority .....                     | 7  |
| 16. Eligibility and verification for temporary authority.....           | 8  |
| 17. Conditions and supervision .....                                    | 8  |
| 18. Duration and renewal of temporary authority .....                   | 8  |
| PART V — CHANGES, REPLACEMENT AND INFORMATION INTEGRITY.....            | 9  |
| 19. Duty to keep practice information current .....                     | 9  |
| 20. Replacement certificate.....                                        | 9  |
| 21. False or misleading information .....                               | 9  |
| PART VI — MONITORING, CONDITIONS AND REGULATORY ACTION .....            | 9  |
| 22. Verification and monitoring .....                                   | 9  |
| 23. Conditions, suspension and cancellation.....                        | 10 |
| 24. Effect of suspension, cancellation or expiry.....                   | 10 |
| 25. Administrative review.....                                          | 10 |
| PART VII — FEES, RECORDS AND GENERAL .....                              | 10 |
| 26. Fees.....                                                           | 10 |
| 27. Council records and retention.....                                  | 11 |
| 28. Use and display of certificate .....                                | 11 |
| 29. Implementation instruments .....                                    | 11 |



|                                                                                |    |
|--------------------------------------------------------------------------------|----|
| 30. Transitional arrangements .....                                            | 11 |
| SCHEDULE 1 — MINIMUM APPLICATION REQUIREMENTS FOR CERTIFICATE OF PRACTICE..... | 12 |
| SCHEDULE 2 — MINIMUM PARTICULARS OF CERTIFICATE OF PRACTICE.....               | 12 |
| SCHEDULE 3 — TEMPORARY PROFESSIONAL PRACTICE APPLICATION .....                 | 12 |
| SCHEDULE 4 — MINIMUM PARTICULARS OF TEMPORARY PRACTICE AUTHORITY .....         | 13 |
| SCHEDULE 5 — CHANGEOVER / CESSATION NOTIFICATION .....                         | 13 |
| COUNCIL RESOLUTION.....                                                        | 14 |
| Council approval and execution.....                                            | 14 |




## **THE PHARMACY AND DRUGS (ISSUANCE AND RENEWAL OF CERTIFICATES OF PRACTICE) BYELAWS, 2026**

*IN EXERCISE of the powers conferred upon the Council of the Pharmaceutical Society of Uganda under Section 22 (1)(2) the Pharmacy and Drugs Act, Cap. 309, and in furtherance of its responsibility to secure the highest practicable standards in the practice of pharmacy, these Byelaws are made.*

### **PART I — PRELIMINARY**

#### **1. Citation**

(1) These Byelaws may be cited as the Pharmacy and Drugs (Issuance and Renewal of Certificates of Practice) Byelaws, 2026.

#### **2. Commencement**

(1) These Byelaws shall come into force on the date determined in accordance with the applicable approval and publication requirements.

#### **3. Objects**

(1) to provide a transparent, consistent and verifiable framework for authorising registered pharmacists to practise pharmacy in Uganda;

(2) to ensure that a pharmacist holding a Certificate of Practice remains registered, professionally accountable and competent for the scope and setting of practice;

(3) to provide proportionate mechanisms for renewal, variation, replacement, suspension and cancellation of Certificates of Practice;

(4) to regulate, to the extent permitted by the Act, limited professional practice by pharmacists registered in another jurisdiction; and

(5) to protect patients and the public while facilitating legitimate mobility and diverse fields of pharmacy practice.

#### **4. Interpretation**

(1) In these Byelaws, unless the context otherwise requires— "Act" means the Pharmacy and Drugs Act, Cap. 309; "active member" means a member whose membership obligations to the Society have been satisfied for the relevant period; "Certificate of Practice" means a certificate issued or renewed under these Byelaws authorising a pharmacist to practise within the scope and conditions stated on the certificate; "Council" means the Council of the Pharmaceutical Society of Uganda; "CPD" means continuing professional development recognised under the Pharmacy and Drugs (Continuing Professional Development) Byelaws, 2026; "declared practice setting" means a place, institution, organisation, undertaking or professional role at or through which a pharmacist undertakes pharmacy practice; "foreign pharmacist" means a person lawfully registered or licensed as a pharmacist in a jurisdiction outside Uganda; "good standing" means current professional status without an undisclosed suspension, cancellation or restriction materially affecting the proposed practice; "pharmacy practice" means professional activity falling within the recognised competence, functions or responsibilities of a pharmacist under Ugandan law and standards approved by Council; "Secretary" means the Secretary of the Society; and "Society" means the Pharmaceutical Society of Uganda.

## **PART II — CERTIFICATE OF PRACTICE**

### **5. Requirement for Certificate of Practice**

- (1) A registered pharmacist who engages in pharmacy practice in Uganda shall hold a valid Certificate of Practice where such certificate is required under the Act, these Byelaws or other applicable law.
- (2) A Certificate of Practice is personal to the pharmacist and shall not be transferred, lent, assigned or used to represent the professional presence or supervision of another person.
- (3) A Certificate of Practice does not constitute a licence for premises, a drug shop, pharmacy, manufacturing facility or other establishment and does not displace any approval required from the National Drug Authority or another competent authority.

### **6. Eligibility for issue or renewal**

- (1) Council shall issue or renew a Certificate of Practice where it is satisfied that the applicant— (a) is duly registered as a pharmacist and remains eligible to practise; (b) is an active member of the Society for the relevant period; (c) has satisfied the applicable CPD requirement or has an approved exemption, deferment or alternative compliance arrangement; (d) has paid the prescribed fees; (e) has provided complete and accurate information concerning the proposed practice; and (f) is not subject to a lawful suspension, cancellation or restriction inconsistent with the proposed practice.
- (2) Council may require evidence reasonably necessary to establish an applicant's current competence or safe return to practice where the applicant has been absent from pharmacy practice for a substantial period or where another objective competence concern exists.
- (3) An applicant shall disclose any current restriction, suspension, disciplinary order or other matter in Uganda or another jurisdiction that is materially relevant to safe professional practice.

### **7. Application**

- (1) An application shall be made to the Secretary in the prescribed form, including through an approved electronic system.
- (2) The applicant shall declare each practice setting or professional role for which recognition is sought and provide the information prescribed in Schedule 1.
- (3) Council or the Secretary acting under delegated administrative authority may request clarification, supporting evidence or verification necessary to determine whether the application is complete.
- (4) An incomplete application may be returned for completion and shall not be treated as refused merely because additional information is required.

### **8. Decision and time for determination**

- (1) A complete application should ordinarily be determined within seven working days, but a longer period may be taken where verification, inspection, clarification, competence assessment or Council consideration is reasonably required.
- (2) An applicant shall be informed in writing of approval, conditional approval, deferral or refusal.
- (3) A refusal or material condition shall state the reasons and inform the applicant of the right to administrative review under rule 25.
- (4) Where a delay is attributable to verification by a third party or another competent authority, the applicant shall be informed where practicable.

### **9. Validity and renewal**

- (1) A Certificate of Practice shall be valid for the calendar year stated on it and shall expire on 31 December of that year unless earlier suspended, cancelled or surrendered.
- (2) A pharmacist intending to continue practice shall apply for renewal in the manner and within the period prescribed by Council.
- (3) Renewal shall not be automatic where material information has changed or where a lawful compliance concern requires determination.
- (4) Council may prescribe a renewal window and an electronic reminder system, but failure to receive a reminder does not relieve a pharmacist of the obligation to maintain a valid certificate.

### **10. Form and verification of certificate**

- (1) A Certificate of Practice shall be in the form prescribed in Schedule 2 or in a substantially equivalent secure electronic form approved by Council.
- (2) A certificate may contain a unique serial number, QR code or other verification identifier.
- (3) Council may maintain a public verification facility showing the pharmacist's name, registration number, current practice status, validity period and such non-confidential practice information as Council considers necessary for public protection.
- (4) Personal information not necessary for public verification shall be protected in accordance with applicable law.

## **PART III — PRACTICE SETTINGS, PROFESSIONAL PRESENCE AND CHANGEOVER**

### **11. Scope of recognised practice**

- (1) A Certificate of Practice may be issued to a pharmacist practising in any lawful field of pharmacy, including community and institutional pharmacy, hospital and clinical practice, industry and manufacturing, quality assurance, regulation, public health, supply chain, academia, research, pharmacovigilance, policy, pharmaceutical representation, digital health and any other field recognised by Council.
- (2) Council shall not restrict eligibility merely because a pharmacist's practice is non-dispensing or is undertaken in the public sector, academia, research, industry, regulation or another recognised field.

### **12. Multiple practice settings**

- (1) A pharmacist may declare more than one practice setting where the pharmacist demonstrates that the arrangements permit genuine, safe and effective discharge of professional responsibilities at each setting.
- (2) In determining whether multiple settings are compatible, Council may consider the pharmacist's contractual hours, travel time and distance, opening hours, nature and risk of services, availability of other pharmacists, remote or on-call responsibilities where lawful, conflicts of interest, and any premises-licensing requirement.
- (3) No fixed geographical distance alone shall determine eligibility; the controlling consideration is whether the pharmacist can realistically and safely fulfil the professional responsibilities accepted at each setting.



(4) Council may impose a reasonable condition on hours, number or combination of settings where necessary for patient safety or effective professional supervision and shall give reasons for the condition.

### **13. Attendance and continuity of professional supervision**

(1) A pharmacist responsible for professional supervision at a practice setting shall agree and document realistic attendance or availability arrangements consistent with applicable law, standards of practice and the services provided.

(2) The pharmacist and employer or operator should ensure that professional responsibilities, attendance expectations and arrangements for absence are clearly documented.

(3) Where the pharmacist's presence or supervision is legally required and the pharmacist is absent, appropriate arrangements shall be made for another suitably authorised pharmacist.

(4) A pharmacist shall notify the practice setting as soon as reasonably practicable of an absence that materially affects professional coverage and shall not knowingly permit his or her name or certificate to be used to create a false appearance of supervision.

(5) Prolonged absence from a declared setting shall be notified to the Society where it affects the accuracy of the pharmacist's practice record.

### **14. Changeover and cessation at a practice setting**

(1) A pharmacist who ceases to hold a professional responsibility at a declared practice setting shall notify the Society within fourteen days or such shorter period as may be required by another applicable law.

(2) Where practicable, the outgoing and incoming pharmacists shall complete a professional handover identifying matters necessary for continuity, accountability and patient or product safety.

(3) Refusal, death, incapacity, disappearance or non-cooperation of an outgoing pharmacist shall not prevent Council from recording a lawful change where the incoming pharmacist or practice setting supplies satisfactory evidence.

(4) A pharmacist shall not remain recorded as responsible for a setting after the professional relationship has ended.

(5) The form in Schedule 5 may be used for changeover, but Council may approve an electronic equivalent.

## **PART IV — LIMITED PRACTICE BY A FOREIGN-REGISTERED PHARMACIST**

### **15. Purpose and nature of temporary authority**

(1) Subject to the Act, Council may grant a limited temporary professional practice authorisation to a foreign pharmacist for a defined purpose and period where Council is satisfied that the arrangement is lawful, necessary or beneficial and does not compromise public protection.

(2) Temporary authority may be considered for specialised training, teaching, research, humanitarian or voluntary service, technology or skills transfer, specialised industrial or quality functions, a defined project, or another purpose approved by Council.

(3) Temporary authority is not a substitute for full registration where the nature, duration or independence of the proposed work amounts in substance to ordinary permanent pharmacy practice in Uganda.



#### **16. Eligibility and verification for temporary authority**

(1) An applicant shall provide— (a) proof of identity and immigration status appropriate to the proposed activity; (b) certified evidence of pharmacy qualification; (c) current registration or licensure as a pharmacist in the home or principal jurisdiction; (d) a current certificate or letter of good standing obtained from or verifiable with the relevant regulator; (e) a detailed host-institution letter stating the purpose, dates, duties and reporting arrangements; (f) a curriculum vitae and job or activity description; (g) evidence of professional indemnity or equivalent cover where reasonably applicable; (h) details of any current or previous material restriction or disciplinary finding; and (i) the prescribed fee.

(2) Council may undertake primary-source verification, contact a foreign regulator, require an interview or competence assessment, or request further evidence where necessary.

(3) False, altered or unverifiable professional credentials are grounds for refusal and may be referred to the competent authorities.

#### **17. Conditions and supervision**

(1) Council may impose conditions reasonably related to the purpose, competence, duration and risk of the temporary practice, including supervision, named location, restricted activities, reporting, orientation to Ugandan law and standards, or prohibition from acting as the sole pharmacist responsible for a regulated premises.

(2) Where supervision is required, the supervising pharmacist shall be registered, hold a valid Certificate of Practice and accept the supervisory responsibility in writing.

(3) A temporary practitioner shall comply with Ugandan law, the pharmacists' code of ethics, applicable standards of practice and every condition stated on the authority.

(4) Council may vary a condition on application or on its own initiative where necessary for public protection, after giving the practitioner a reasonable opportunity to make representations unless urgent interim action is required.

#### **18. Duration and renewal of temporary authority**

(1) Temporary authority shall be granted only for the period reasonably necessary for the approved purpose and shall state an expiry date.

(2) Unless Council determines otherwise for exceptional reasons consistent with the Act, an initial period shall not exceed three months and may be renewed once for a further period not exceeding three months.

(3) A longer or recurrent engagement should ordinarily require consideration under the ordinary registration and practice framework rather than successive temporary authorities.

(4) Temporary authority expires automatically on the stated date or when the approved purpose ends, whichever occurs first.



## **PART V — CHANGES, REPLACEMENT AND INFORMATION INTEGRITY**

### **19. Duty to keep practice information current**

- (1) A pharmacist shall notify the Society within fourteen days of a material change in name, contact details, employer, declared practice setting, professional role or other information appearing on or materially supporting the Certificate of Practice.
- (2) Council may prescribe an electronic process for notification and may issue an updated certificate or record where appropriate.

### **20. Replacement certificate**

- (1) A pharmacist whose certificate is lost, destroyed, materially damaged or rendered inaccurate by an approved change may apply for replacement.
- (2) Council may require a statutory declaration, police reference or other evidence where reasonably necessary to prevent fraud, but a police letter shall not be mandatory for every case where loss can otherwise be satisfactorily established.
- (3) A replacement shall carry the original expiry date unless it accompanies a lawful variation or renewal.
- (4) Council should ordinarily issue a replacement within seven working days after receipt of a complete and verified application.

### **21. False or misleading information**

- (1) An applicant or certificate holder shall not knowingly provide false, misleading, forged or materially incomplete information to the Society.
- (2) Where a material discrepancy is identified, the Secretary may require an explanation and supporting evidence and may refer the matter to Council or the appropriate disciplinary process.
- (3) No adverse finding of dishonesty shall be made without giving the affected person notice of the allegation and a reasonable opportunity to respond.
- (4) Suspected forgery, fraud or other criminal conduct may be referred to the Police or another competent authority without prejudice to professional proceedings.

## **PART VI — MONITORING, CONDITIONS AND REGULATORY ACTION**

### **22. Verification and monitoring**

- (1) Council may verify information relevant to a Certificate of Practice through records held by the Society, the Pharmacy Board or other competent authority, an employer, practice setting, CPD system or another reliable source, subject to applicable law.
- (2) Where a pharmacist is associated with a newly established or materially changed regulated practice setting, Council may conduct or participate in a verification visit where this is within its lawful mandate and necessary to assess the pharmacist's professional arrangements.
- (3) A verification visit under these Byelaws shall not be represented as a premises licence or inspection where that function belongs to another statutory authority.



### **23. Conditions, suspension and cancellation**

(1) Council may impose or vary conditions, suspend, refuse to renew or cancel a Certificate of Practice where it is satisfied on reasonable grounds that— (a) the holder is no longer registered or otherwise legally eligible to practise; (b) membership or another mandatory statutory requirement is not satisfied; (c) applicable CPD requirements remain unsatisfied after any lawful remedial opportunity; (d) the certificate was obtained through material falsehood or fraud; (e) the holder is subject to a lawful disciplinary or competence restriction inconsistent with the certificate; (f) the holder has materially breached a condition of practice; or (g) continued unrestricted practice presents a demonstrable risk to patients or the public.

(2) Except where urgent interim action is necessary to prevent serious risk, Council shall give the pharmacist written notice of the proposed adverse action, the material grounds and a reasonable opportunity to respond.

(3) An interim suspension or condition imposed urgently shall be reviewed promptly and the pharmacist shall be given an opportunity to be heard before a final determination.

(4) A decision shall be reasoned, proportionate and communicated in writing.

### **24. Effect of suspension, cancellation or expiry**

(1) A pharmacist shall not represent himself or herself as holding a current Certificate of Practice during a period of suspension or after cancellation or expiry.

(2) Council may update its public verification system to reflect current status.

(3) Suspension or cancellation of a Certificate of Practice does not, by itself, determine the status of a premises licence or another regulatory approval governed by a different authority.

### **25. Administrative review**

(1) A pharmacist aggrieved by a refusal, material condition, suspension, cancellation or refusal to renew may request administrative review by Council within thirty days after notification of the decision.

(2) A request shall identify the decision challenged, the grounds and any material evidence relied upon.

(3) Where the original decision was made by Council itself, Council may constitute a review panel of members who did not materially participate in the original decision, where practicable.

(4) The review body may confirm, vary, remit or set aside the decision, subject to the Act and any further right of appeal or judicial review available by law.

## **PART VII — FEES, RECORDS AND GENERAL**

### **26. Fees**

(1) An applicant shall pay the subscription, application, renewal, replacement, verification or temporary-practice fees lawfully prescribed by Council.

(2) Payment of a fee does not create an entitlement to a certificate where a substantive eligibility requirement is not satisfied.

(3) Fees shall be published or otherwise made readily accessible to applicants.

## **27. Council records and retention**

- (1) The Society shall maintain an accurate record of applications, certificates, conditions, declared practice settings, variations, suspensions, cancellations and temporary authorities.
- (2) Records shall be retained for the period prescribed by Council having regard to professional accountability, audit, legal and data-protection requirements.
- (3) Access to personal information shall be limited to what is lawful and necessary, except for information properly made available for public verification.

## **28. Use and display of certificate**

- (1) A pharmacist shall produce evidence of a current Certificate of Practice when reasonably required by Council, a competent statutory authority, an employer or another person entitled by law to verify professional status.
- (2) Council may prescribe requirements for physical display or electronic verification appropriate to different practice settings.
- (3) No person shall alter, reproduce, lend, sell or use a Certificate of Practice in a manner likely to mislead another person as to the professional status, identity, practice setting or authority of a pharmacist.

## **29. Implementation instruments**

- (1) Council may approve forms, checklists, standard operating procedures, electronic workflows, verification protocols and guidance necessary to implement these Byelaws.
- (2) An implementation instrument shall be consistent with the Act and these Byelaws and shall not create an offence, penalty or substantive restriction not authorised by law.

## **30. Transitional arrangements**

- (1) A Certificate of Practice valid immediately before commencement shall remain valid until its stated expiry unless lawfully suspended or cancelled.
- (2) An application pending on commencement shall, so far as practicable, be determined under these Byelaws, but Council may accept evidence already submitted under the previous system.
- (3) Council may allow a reasonable transition period for electronic verification, new forms and declarations of multiple practice settings.



## **SCHEDULE 1 — MINIMUM APPLICATION REQUIREMENTS FOR CERTIFICATE OF PRACTICE**

- Full name, registration number and current contact details.
- Evidence of active membership and payment of applicable fees.
- CPD compliance status or approved exemption/deferment/alternative compliance.
- Each proposed practice setting: organisation, physical/digital location, nature of services and pharmacist's professional role.
- Employment/engagement status and agreed professional hours or availability where relevant.
- Declaration of other practice settings and explanation of how responsibilities will be safely discharged.
- Disclosure of any current professional restriction, suspension or material disciplinary order.
- Applicant declaration that the information is true, complete and that the pharmacist will comply with the Act, applicable standards and code of ethics.
- Any additional evidence reasonably necessary to determine a particular application.

## **SCHEDULE 2 — MINIMUM PARTICULARS OF CERTIFICATE OF PRACTICE**

- Pharmaceutical Society of Uganda.
- Full name of pharmacist and registration number.
- Certificate serial/verification number.
- Calendar year and validity dates.
- Practice status and, where Council considers appropriate, declared principal practice setting or scope.
- Any condition or restriction that must lawfully appear on the certificate.
- Date of issue.
- Authorised signature or secure electronic authentication.
- Society seal or approved digital equivalent.
- QR code or other verification mechanism where implemented.

## **SCHEDULE 3 — TEMPORARY PROFESSIONAL PRACTICE APPLICATION**

- Applicant's identity, citizenship, passport and contact details.
- Pharmacy qualification and awarding institution.
- Country/jurisdiction of current registration and registration/licence number.
- Current certificate/letter of good standing and regulator contact details.
- Host institution, proposed location, purpose, duties, dates and reporting line.
- Named supervising pharmacist where supervision is required.
- Curriculum vitae and job/activity description.
- Professional indemnity/equivalent cover where applicable.
- Immigration/work authorisation appropriate to the proposed activity.
- Disclosure of current or previous material restrictions or disciplinary findings.
- Undertaking to comply with Ugandan law, standards, ethics and conditions.
- Evidence of prescribed fees.



#### **SCHEDULE 4 — MINIMUM PARTICULARS OF TEMPORARY PRACTICE AUTHORITY**

- Name, nationality and foreign registration details of practitioner.
- Host organisation and approved location(s).
- Specific approved purpose and scope of activity.
- Supervising pharmacist and supervision condition, where applicable.
- Commencement and expiry dates.
- Any restriction or special condition.
- Unique verification number and date of issue.
- Authorised signature/authentication and Society seal or approved digital equivalent.

#### **SCHEDULE 5 — CHANGEOVER / CESSATION NOTIFICATION**

- Name and address of practice setting.
- Name and registration number of outgoing pharmacist.
- Effective date of cessation.
- Name and registration number of incoming pharmacist, if known.
- Confirmation of handover of professional records, controlled items, pending quality/safety matters and other responsibilities, where applicable.
- Any unresolved matter requiring Council's attention.
- Signatures of outgoing and incoming pharmacists where practicable.
- Where a signature cannot reasonably be obtained, explanation and supporting evidence.
- Date of notification.



## COUNCIL RESOLUTION

**RESOLVED THAT** the Council approves the Pharmacy and Drugs (Issuance and Renewal of Certificates of Practice) Byelaws, 2026, subject to amendments agreed at the meeting and completion of any formalities required by the Pharmacy and Drugs Act and other applicable law.

**FURTHER RESOLVED THAT** the Standards and Compliance Committee and Secretariat are authorised, within their respective mandates, to incorporate amendments approved by Council and prepare the final implementation schedules, forms and electronic processes, provided that no implementation instrument alters or waives a mandatory requirement of the Byelaws.

### Council approval and execution

Approved by the Council of the Pharmaceutical Society of Uganda at its 127<sup>th</sup> Ordinary Council meeting held at the Pharmacy House Kampala on the 4th day of September 2026.



PRESIDENT  
Pharmaceutical Society of Uganda



SECRETARY  
Pharmaceutical Society of Uganda

