

OREGON DEPARTMENT OF CORRECTIONS
Operations Division
Health Services Section Policy and Procedure # P-D-02.13

SUBJECT: **DISPOSAL OF EXPIRED, DISCONTINUED OR DAMAGED NARCOTICS**

POLICY: Accountability is established and maintained for expired, discontinued, or damaged (“wasted”) DEA Controlled medications. Scheduled medications remain on site until disposal and are not returned to Pharmacy. Formal arrangements are in place for their secure disposal and for inventory accountability until the disposal process can be accomplished. This is done in accordance with applicable state and federal laws.

REFERENCE: NCCHC Standard P-D-02, Medication Services
Oregon State Board of Pharmacy OAR 855-01-000,
855-110, 855-0015.
DEA Office of Diversion Control, 21CFR, 1300 et seq.
Title 21, Code of Federal Regulations, Section 1307.21
1970 Controlled Substances Act, Section 307

PROCEDURE:

- A. DEA Controlled medications packaged/labeled by ODOC Pharmacies.
1. Discontinued or expired controlled medications in containers received from DOC Pharmacies must be accounted for until they are properly disposed. This accounting is only accomplished in one of two ways:
 - a. Maintained securely and on an active, ongoing shift to shift count of each medication, or
 - b. Placed with its count sheet into a secure locked, tamper proof container. Information about the expired medication is entered onto a log at the site of the container. The container is always securely locked and only the Medical Services Manager or designee has access to the key to this container.
- B. Damaged or wasted DEA Controlled medication doses. Single doses of narcotics are considered wasted when a single unit (tablet, capsule, etc.) of medication is removed from a blister pack or other container and is not issued to a patient for various reasons (refusal, altered tablet, tablet

dropped on floor, etc.). The medication cannot be placed back into the blister, and cannot be held for a later time due to pharmacy labeling laws. Hence, the medication is *wasted*.

1. Wasted medications are to be accounted for on the corresponding card's Controlled Substance Account Sheet.
 - a. All sections of the count sheet are to be filled in. *Wasted* is to be written across the "Inmate Name/SID#" fields. Two nurse's signatures are required on the "Administered By" field.
 - b. The medication is placed into a "Wasted Controlled Substance Envelope" and sealed. The nurse is to write on the outside of the Wasted Controlled Substance Envelope pertinent information regarding the medication inside.
 - i. Name of the medication.
 - ii. Rx number, including refill number, of the card that the wasted medication came from (i.e. Rx 6000123-15).
 - iii. Date that the medication was wasted.
 - iv. Initial of the same two nurses that signed the count sheet.
 - c. The sealed "Wasted Controlled Substance Envelope" is placed into a secure locked, tamper proof container. Information about the envelope is entered onto a log at the site of the container. The container is always securely locked and only the Health Services Manager or designee has access to the key to this container.

C. Receipt of DEA Controlled medications from sources other than ODOC Pharmacies. This could be from a retail pharmacy, from a health care entity, or on Intake brought with the inmate as his/her private property.

1. Incoming medications will be handled in accordance with #P-D-02.5, Medication Starter Doses. In addition, any controlled medications will be counted and verified by two licensed staff; nursing or medication room technicians.
2. That count will be entered on a yellow Department of Corrections "Pharmacy Narcotics/Controlled Substances Record" sheet.

3. While in use for patient care, these controlled medications (and Yellow count sheets) will be maintained, utilized and accounted for, the same as all other controlled medications.
 4. Inmate property medications which have been discontinued are considered "dangerous or hazardous materials" because of a recognized potential for harm or injury if improperly used. In accordance with #P-D-02.5 (F), OAR 291-117-0140 (c), and this policy, Health Services disposes of discontinued medications. Accurate acknowledgements, counts and disposition records will be retained on site and, when appropriate, in Controlled Medication logs.
- D. Expired Medication. When there are sufficient quantities of expired medication, or at regular intervals, a reverse wholesaler will be contacted to come on site and collect the expired medication. The reverse wholesaler will provide documentation of medication taken for destruction. All documentation of medications taken by a reverse wholesaler will be kept on site and readily available for inspection for three (3) years.
1. The reverse wholesaler will reconcile all medications taken for destruction against the log, the Controlled Medication Count Sheets, and envelopes of wasted medications. Any discrepancies will be noted and the Medical Services Manager will be informed. All logs, Controlled Medication Count Sheets, and envelopes will be attached to the reverse wholesaler documents and retained on-site and available for inspection for three (3) years.
 2. The institution's Consultant Pharmacist will review records and reports of this process at each inspection to verify in writing that this policy is being followed or what consultation or training has taken place.
- E. Circumstances may arise that do not fit any of the criteria listed above for wasted controlled medications (i.e. a dropped glass bottle of liquid morphine). These rare circumstances need to be documented in a memo form, signed by two (2) nursing staff, and then forwarded to the Medical Services Manager or designee. A copy of the memo should be attached to the appropriate count sheet, and the balance correctly recorded.

Effective Date: _____

Revision Date: August 2009

Supersedes P&P dated: August 2008