

Federal Correctional Complex Butner, NC

Pharmacy Department Procedure

Sub-Stock Control, Accountability, and Administration of DEA Controlled Medications

Applicability: Pharmacy, Nursing (RN/LPN), Paramedic, Medical Services

Procedure/Purpose: The Institutional Chief Pharmacist is the responsible authority for all DEA controlled medications and shall provide written procedures for the sub-stock storage, accountability and administration.

Procedural Guidelines:

A. Sub-Stock Storage of DEA Controlled Medications

1. All sub-stock controlled medications will be stored in an automated medication cabinet system (Omnicell[®]) or locked cabinet until the time of administration to patient. *JJ CMT*
2. Pharmacy will notify the nurse manager if unable to maintain adequate levels of a controlled medication in the Omnicell[®] (due to back order or manufacturer issues, etc.) and provide alternatives (if available). *JJ CMT*

B. Accountability DEA Controlled Medications

1. All controlled medications taken out from the Omnicell[®] or locked cabinet are the responsibility of the staff member that removed them. *JJ CMT*
2. Narcotics found outside of the Omnicell or locked storage cabinet, will be reported in writing (Attachment A) to the nurse manager/immediate supervisor. The Nurse Manager/immediate supervisor will route memo to the Chief Pharmacist. *JJ CMT*
3. All controlled medication discrepancies must be resolved prior to any nursing/paramedic or pharmacy staff at end of shift. Nursing and/or Paramedic staff will conduct a "Resolve Discrepancy" review for all medications from each Omnicell[®] within their area of responsibility prior to end of shift (or after last use of Omnicell). *JJ CMT*
4. Under no circumstances should there be discrepancies at the end of shift. *JJ CMT*

5. When a controlled medication discrepancy is found, the nurse/paramedic or pharmacy staff who found the discrepancy will attempt to resolve discrepancy at that time. A cycle count on the medication in question will be conducted at this time. The on call nurse manager will be contacted. The staff member that found the discrepancy will write a memo (Attachment A) to the Chief Pharmacist through the Nurse Manager prior to leaving your shift. The memo will describe nature of event and any attempt to resolve the discrepancy. JG CMT

6. The pharmacy will generate a discrepancy report daily and it will be provided to nurse management. JG CMT

7. In cases where the controlled medications cannot be returned to the Omnicell[®], the medication must be wasted. The waste must be witnessed by another staff member and documented in the Omnicell[®] as a Waste transaction under the patient's name which it was removed. In order to avoid this situation, do not open the individual unit-dose package until you are sure the patient can/will take it. Controlled medications to be wasted will be placed in the sharps container. JG CMT

8. All unused, unopened medication and/or supply items must be returned to the Omnicell[®] System. The return of a controlled substance must be witnessed by another staff member and documented in the Omnicell[®] as a Return transaction under the patient's name it was removed. JG CMT

9. Nursing and/or paramedic staff will complete cycle counts on all controlled medications from each Omnicell[®] within their area of responsibility once a week, on Wednesday, during day shift (between 7am-7pm). JG CMT

10. Pharmacy can conduct an Omnicell[®] inventory at any time. JG CMT

C. Administration DEA Controlled Medications

POLICY STATEMENT: **Administration** is defined as providing one dose of medication to be applied or consumed immediately (P.S. 6360.01, Section 9a (1)).

1. Controlled substances must not be administered without a current physician's order. Discontinuation dates are noted on the eMAR and must be followed. JG CMT

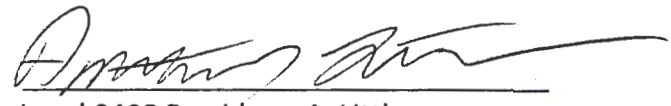
2. Controlled substances should be removed from Omnicell[®] when inmate arrives to pill line. The exception: JG CMT


- a. Staff member serving the Special Housing situations (i.e. J Unit, SHU, IE, inmates on locked down status, etc.) will account for controlled substances to be delivered and administered. Issue and return all controlled substances under the patient's name. *JG CMT*
- b. Institution lockdown's for extended periods will require medication delivery and administration to units. Issue and return all controlled substances under the patient's name. The staff member removing the controlled substance will be accountable for that medication at all times. *JG CMT*
3. Responsible staff member is the person removing controlled medications from the Omnicell, documenting on eMAR(or paper MAR), and if necessary returning or wasting medication in the Omnicell. *JG CMT*
4. Controlled substances will not be opened out of the package, crushed, and left in medications drawers at any time. *JG CMT*
5. Nursing and/or Paramedic staff that take out controlled medications from the Omnicell[®] must maintain physical contact of controlled medications at all times until medication is either administered to patient, wasted if appropriate, or returned to Omnicell[®]. Medications removed from Omnicell[®] will be administered by the same staff member. Controlled medications are not to be left with the patient or given to the patient for later use. *JG CMT*
6. Unless listed on the Appendix II to not be crushed, all controlled medications will be crushed in package with authorized crushing device, in view of inmate, and placed in water prior to administration to inmate. If controlled medication cannot be crushed, medication will be floated in water or capsule opened and contents along with empty capsule floated in water. Refer to Appendix II "Pill Line Medications to be Crushed or Floated". *JG CMT*
7. As each dose is administered, staff must visually inspect the oral cavity to insure that it has been swallowed.
 - a. Particular attention must be paid to the buccal and sublingual areas to prevent "cheeking." *JG CMT*
8. After administering the controlled substance, the person administering the drug must document on the patient's medication administration record (MAR) or eMAR. *JG CMT*

9. If patient is found to be diverting controlled medications, an incident report will be written immediately, after conclusion of pill line, and given to LT office. A BEMR administrative note will be written describing events. The note will be forwarded to the inmate's primary care team to be cosigned.

J CRT


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