

POLICY AND PROCEDURE MANUALCODE:2.04.1PHARMACY SERVICESDATE:3/1/04

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SECTION: CLINIC PHARMACY

OUTPATIENT SERVICES APPROVED: Thinh Tran, Pharm. D

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POLICY

The Rancho Los Amigos National Rehabilitation Center Outpatient Pharmacy follows the rules and regulations set forth by the Uniformed Controlled Substances Act. Selected provisions can be found in the California Pharmacy Law books located in the Controlled Drug Pharmacy unit.

Each Outpatient Pharmacy staff employed at Rancho Los Amigos National Rehabilitation Center must exercise sufficient judgment to assure safety in the ordering, securing, administering, and controlling of controlled substances and to seek appropriate guidance if necessary.

Any improper use or suspicion of improper use of controlled drugs must be reported immediately to Pharmacy Management (Outpatient Pharmacy Supervisor/Director of Pharmacy).

PROCEDURE

1. ORDERING

- a. **Schedule II Controlled Substances.** The Outpatient Pharmacy stocks a select supply of formulary Schedule II controlled drugs. Schedule II controlled drug inventory levels are managed by PAR levels.
 - 1 The controlled drug pharmacist in conjunction with the Outpatient pharmacist(s) monitors the controlled drug PAR levels on a daily basis. When levels reach or fall below the PAR that drug(s) will be ordered through the LAC approved drug wholesaler.
 - 2 The Schedule II drugs are ordered online through the wholesaler website by the controlled drug pharmacist.
 - 3 A hardcopy DEA Form 222 is completed for the wholesaler or if electronic CSOS is utilized, the wholesaler procedure is followed.
 - 4 After receipt of the CII drugs, the controlled drug pharmacist records the manufacturer, lot # and expiration date on the invoice. Increment adjustments are made to the inventory.
 - 5 The controlled drug pharmacist delivers a copy of the drug wholesaler invoice, drugs received and a copy of the inventory adjustment report.
- b. **Schedules III-V**. The Controlled drug pharmacist and Outpatient pharmacists are responsible for ensuring that adequate supplies of controlled medications are stocked.
 - 1 The controlled drug pharmacist monitors the CIII-CV drug PAR levels in conjunction with the Outpatient pharmacist.
 - 2 CIII-CV controlled drugs are ordered by the procurement specialist in the inpatient pharmacy. When drugs are needed a list is supplied to the procurement specialist to order.

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c. Receiving and verifying ordered drugs from the Controlled Drug Pharmacy.

- 1 The controlled drug pharmacist reconciles the medication with the wholesaler invoice.
- 2 The controlled drug pharmacist increments the controlled substance computer inventory into the Cerner-Etreby Inventory Control System.
- 3 The controlled drug pharmacist delivers the medication to the Outpatient Pharmacy with a copy of the wholesaler invoice.
- 4 The Outpatient pharmacist verifies the delivery by reconciling the copy of the invoice with the medication(s) and e222 or DEA 222 form.
- 5 The Outpatient pharmacist files the signed invoice copy and places it in the Outpatient procurement notebook.
- 6 The controlled drug pharmacist files the transaction report in the designated log book.

d. Storage of the Controlled Drugs

- 1 The Outpatient pharmacists are responsible for the storage and proper rotation of the medication.
- 2 The Outpatient pharmacists will periodically check for outdates.

2. II AUDITING

- a. A central controlled substance log sheet is used for maintaining a perpetual inventory of the Outpatient controlled drugs. A monthly reconciliation report is done. The following steps are performed:
 - 1 A manual count of all controlled drug stock in the Outpatient Pharmacy is prepared.
 - 2 The count is compared to the controlled drug log sheet.
 - 3 Any variances on the Outpatient Pharmacy controlled drug are followed up to ensure that discrepancies actually exist.
 - 4 Once validated, any material discrepancies are reported to the Pharmacist-In-Charge and Pharmacy Director. Suspected diversion will be further reported to the facility's Safety Police and Administration by the Director of Pharmacy.

3. III SECURITY

- a. Each Outpatient pharmacist MUST carry a controlled drug key while on duty.
- b. The controlled drug cabinets and drawers must be secured at all times.
- c. Drawers and cabinets are opened only when removing, adding, or returning controlled drugs to stock.
- d. The cabinet or drawer must be locked immediately after each prescription is filled or after incrementing inventory.
- e. At no time is the controlled drug key to be released to a non-pharmacist.

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4. IV WASTAGE AND TRANSFERS

- a. All wastage and transfers must be documented.
- b. A U-form must be completed (R376).
- c. The matching inventory adjust transaction is entered into the Cerner-Etreby Inventory Control System.

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- d. The U-form is filed in the designated notebook.
- e. The transaction report documenting the transaction is filed in the designated notebook.
- f. All expired and wasted controlled drugs are stored in the C-II Safe's "Pending Destruction" bin (compartment 16).
- g. The Outpatient Controlled Substance Salvage Log will be used to document controlled substances that were damaged in the course of outpatient pharmacy dispensing. This log requires a detailed reason of the salvage of controlled substance and requires 2 pharmacists to witness the destruction into the pharmaceutical waste bin; if the second pharmacist is not available a pharmacy technician can serve as a witness. The Outpatient Controlled Substance Salvage Log will be kept for 3 years on file.

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