MEMORANDUM

TO: Bureau/Office/Division Directors

FROM: Charles C. Thomas, R.Ph.
Pharmacy Director
Office of Professional & Support Services

RE: Policy, "Warehouse & Central Office Medication Handling" #00-12

Attached is Policy #00-12, "Warehouse & Central Office Medication Handling Policy." This policy should standardize medication handling in these areas and bring us into full compliance with current standards of practice. Please implement this policy immediately.

Since we are already into the new year and past the January date mentioned in the policy, please inventory any prescription drugs you have in your possession now and forward a copy to me in the Pharmacy Section. Another inventory will not be due until next January.

Call me at 206-5666 if you have any questions.

CT/Lf
Enclosure

cc: Kathy Vincent
    Laurie Stout
WAREHOUSE AND CENTRAL OFFICE MEDICATION HANDLING POLICY

I. PURPOSE

The purpose of this policy is to set standards, policies, and procedures for handling medications that are stocked in the warehouse and the central office and to ensure that medications are handled according to established standards of practice and current laws.

II. POLICY

Prescription medications stocked in the warehouse and central office will be handled according to policies and procedures established by the Pharmacy Unit. Prescription medication is defined as medication which has "Rx Only" or "Federal law prohibits the dispensing of this medication without a prescription" printed on the label.

III. WAREHOUSE

Storage of medications, other than those used in immunization, is discouraged. Every attempt should be made to use the prime vendor for ordering medications for county health departments. If there is a pressing need to store medications in the warehouse and the bureau director approves of this storage, the following procedures will be followed:

A. STORAGE

All medication not stored in the central office will be stored in the warehouse.

1. Purpose:

The purpose of storing drugs in the warehouse is in case of disaster/emergency. Regular stocks should be accessed from the prime vendor.

2. Storage:

All medications stored at the warehouse will be stored in an air conditioned room. Immediately upon arrival they will be transferred to an air conditioned area. Temperature requirements on the medication label should be checked and stored accordingly. Refrigerated medications will be placed in a refrigerator according to instructions on the container.
3. **Security:**

All prescription medications will be kept locked in an area separate from all other products. Only the warehouse manager and those persons designated by the warehouse manager can have possession of a key to the medications.

B. **DOCUMENTATION**

1. **Purpose:**

To be able to account for and track receipts and disbursements of drugs at the warehouse. These records are to be kept by warehouse personnel.

2. **Receipts:**

Invoices or packing slips or PH3 forms will be kept by warehouse staff for a minimum of two years to document receipt of medications.

3. **Shipping:**

Shipping manifests, shipping invoices or lists, and PH3 forms will be kept as documentation of items shipped by warehouse personnel. The minimum information contained on shipping documents will be the name of the drug, strength, package size, NDC number, expiration date, and total quantity shipped. In the event that shipping documents cannot accommodate all of the shipping information needed, a PH3 form will be used as the shipping document. All documents will be kept for a minimum of two years.

4. **Inventory:**

a. Once a year prior to January 31st all prescription medications will be inventoried by warehouse personnel on a PH3 form. The name of the drug, strength, NDC number, bottle size, and expiration date will be recorded on a PH3 form. This information will be kept at the warehouse a minimum of two years.

b. A copy of the inventory will be forwarded to the Pharmacy Unit and to the program manager.
5. **Dispensing:**

   No medications will be dispensed from the warehouse.

**C. DRUG RECALLS**

Refer to policy 98-20.

**D. DRUG DISPOSAL OR RETURN**

Refer to policy 98-20.

**E. OUT OF DATE DRUGS**

1. Stored drugs will be checked once a month for out of date drugs.

2. Out of date drugs will be immediately separated from all other drugs and kept under lock and key at all times. Notification should be made to the Pharmacy Unit. For return to vendor refer to policy 98-20.

3. All out of date drugs will be sent back to their origin for credit every sixty days.

**IV. CENTRAL OFFICE PROCEDURES**

**A.** The respective program managers or a designated person in their respective programs are responsible for ensuring that this policy is adhered to in the central office.

**B. MEDICATION INVENTORIES**

1. **Purpose:**

   If prescription medication is kept in the central office it will be for the purpose of:

   a. Administering to employees in employee wellness programs.

   b. Emergency supplies for shipment to county health departments

   c. A supply to be used in public health emergency situations, such as bioterrorism or natural disasters.
d. Other: At the discretion of central office physicians or the state health officer.

2. Storage:

All medications stocked in the central office will be kept in a physician’s office suite. The physician in charge of the Bureau will approve the storage of drugs in the respective bureau upon the recommendation of the program director. Notification will be provided to the Pharmacy Unit.

a. All prescription medication will be kept in a locked storage area with access only by physicians, pharmacists, nurses and/or a person designated by the program manager. Refrigerated medications will be kept in a refrigerator according to storage instructions on the label.

b. All medication will be kept in an air conditioned area or a refrigerator according to temperature requirements on the container.

3. Inventories:

During the month of January, an inventory of medications on hand will be completed by the 31st. A copy of the inventory of medications on hand will be forwarded to the Pharmacy Unit and a copy kept for a minimum of two years in each office where medications are stored. The inventory will be documented on the PH3 form with the name of medication, strength, size bottle, NDC number, expiration date, and total quantity on hand. The location of the medication will be noted on the inventory form. The program manager is responsible for having an inventory done on their particular drugs. Additional inventories during the year will be completed if deemed necessary by the bureau director.

4. Dispensing:

No medications will be dispensed from the central office unless a special situation exists which is approved by the state health officer or assistant state health officer. If this does occur, dispensing protocol will apply as stated in the dispensing policy for the county health departments.
C. DOCUMENTATION

1. Receipts:

Copies of invoices or packing slips or PH3 Form will be kept as proof of receipt of inventory.

2. Shipment:

A completed PH3 form should be filled out and copy sent with any shipments of the medication from the central office. A copy will be kept as documentation of medications shipped.

3. Administration of vaccines or other medications:

The current method of documentation of administration will be kept, where appropriate, for a minimum of two years.

4. Time:

Records will be kept for a minimum of two years.

D. DRUG RECALLS:

Refer to policy 98-20.

E. DRUG DISPOSAL OR RETURN:

Refer to policy 98-20.

F. STORAGE OF MEDICATIONS OUTSIDE OF CENTRAL OFFICE:

If a need arises to store medications in a central location other than the central office they will be stored at the public health warehouse.

G. OUT OF DATE DRUGS

1. Drugs in the central office that are out of date will be separated from any in date drugs and kept under lock and key at all times. When drugs are sent to the Central Office because they are out of date they will be kept locked separately from other drugs.
All out of date drugs will be sent back to their origin for credit every sixty days. For documentation refer to policy 98-20.