



Effective Date of This Revision: January 9, 2009

Contact:	Medical Director 310-679-9126	Administration
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Applies to:	<input type="checkbox"/> Officers	<input checked="" type="checkbox"/> Staff	<input checked="" type="checkbox"/> Student clinicians	<input checked="" type="checkbox"/> Volunteers
	<input type="checkbox"/> Other agents	<input type="checkbox"/> Visitors	<input checked="" type="checkbox"/> Contractors	<input type="checkbox"/> Subcontractors / Business Associates

PURPOSE:

The purpose of this document is to outline policy and procedures for storage of medications in the Detoxification Units of BHS's Chemical Dependency Recovery Hospitals.

POLICY:

All drugs shall be stored in the locked medication room to which only authorized personnel have access, in accordance with local and state laws. Overflow stock shall be kept in locked storage area to which only the DON and the designated alternate RN shall have access. All drugs shall be stored in accordance with current established standards of the United States Pharmacopeia so that their integrity, stability and potency are maintained.

PROCEDURES:

All medications must be labeled and identify the following:

- Name of drug (trade or generic)
- Strength
- Lot number
- Manufacturer (if labeled generically)
- Expiration date

All medications should be labeled using the metric system. Conversion charts for metric equivalent shall be posted at the medication preparation area.

New medications added to stock shall be rotated behind existing stock, so that older stock is used up first.

Outdated, contaminated, or defective drugs shall be removed from stock. These items shall be given to the DON, or the designated alternate RN, who shall store them in the overflow storage area until such time as they can be properly disposed of, according to Policy 4.5.14.14 on "Discontinued and Defective Medications."



Drugs for external use and poisons shall be stored separately from drugs for oral or injection use.

Drugs that are stable at room temperature shall be stored between 59 and 86 degrees Fahrenheit. Drugs shall not be stored in a refrigerator with food items. Drugs that require refrigeration shall be stored in a separate refrigerator and maintained at 36 to 46 degrees Fahrenheit.

All stock prescription medications shall be stored in a storage area accessible only to personnel who have been authorized to oversee the self-administration of medication.

There shall be no bedside storage of medications.

All medications shall be maintained in their original containers.

Drug preparation and storage areas shall be well lighted and shall be located where personnel will not be interrupted when handling drugs.

Antidote charts and the telephone number of the regional poison control center shall be kept in all drug storage and preparation areas.

Metric-apothecaries' weight and measure conversion charts shall be posted in each drug preparation area and wherever else they are needed.

The Consultant Pharmacist shall conduct monthly inspections of all areas where medications are stored to verify that the storage guidelines are followed. An inspection report shall be completed in writing and forwarded to the Administrator, the Director of Nursing, and the Medical Director. Records of the inspections shall be maintained for a period of three (3) years.