POLICY:
The site will maintain competent, efficient and ethical Pharmaceutical Services according to state and federal statutes for the health and safety of its patients.

PROCEDURE:

A. Drugs and medication supplies are maintained secure to prevent unauthorized access.
   1. All drugs (including sample and over-the-counter), medication supplies, prescription pads and hazardous substances are securely stored in a lockable space (room, closet, cabinet, drawer) within the office/clinic (CA B&P Code, 4051.3). Keys to the locked storage area are available only to staff authorized by the physician to have access (16 CCR, Chapter 2, Division 3, Section 1356.32).
      **During business hours, the lockable space may remain unlocked ONLY if there is no access to this area by unauthorized persons and authorized clinic personnel remain in the immediate area at all times. At all other times, all drugs (including sample and over-the-counter), medication supplies, prescription pads and hazardous substances must be securely locked.
   2. Controlled drugs are stored separately from other drugs, in a secured, lockable space accessible ONLY to authorized personnel (including physicians, dentists, podiatrists, physician assistants, licensed nurses and pharmacists) (Control Substances Act, CFR 1301.75). There is no need for the controlled substances to be double locked.
      **Controlled substances include all Schedule I, II, III, IV and V substances listed in the CA Health and Safety Code, Sections 11053-11058.
   3. A dose-by-dose controlled substance distribution log in maintained, including:
      A. Date
      B. Provider’s DEA number
      C. Name of controlled substance
      D. Original quantity of controlled substance
      E. Dose administered, Number of remaining doses
      F. Name of patient receiving controlled substance
      G. Name of authorized person dispensing controlled substance
B. Drugs are handled safely and stored appropriately.

1. Preparation:
   - Drugs are prepared in a clean area, or “designated clean” area if prepared in a multipurpose room.
   - Drugs or medication supplies are considered “adulterated” if it contains any filthy, putrid or decomposed substance, or if it has been prepared, packed or held under unsanitary conditions (21 USC, Section 351).

2. Storage:
   - Items other than medications in refrigerator/freezer are kept in a secured, separate compartment from drugs, as these items may potentially cause contamination.
   - Drugs are stored separately from test reagents, germicides, disinfectants and other household substances.
   - Drugs for external use are stored separately from drugs for internal use.
   - Drugs are stored under appropriate conditions of temperature, humidity and light, so that the identity, strength, quality and purity of the drug product are not affected (21 CFR, Section 211.142). Room temperature where drugs are stored does not exceed 30°C (86°F) (Title 22, Section 75037(d)).

3. Immunobiologics:
   - Vaccines are placed in a refrigerator or freezer (not on the door) immediately upon receipt on site and are stored according to specific instructions in the package insert for each vaccine.
   - Vaccines, such as MMR, DTP, DtaP, DT, Td, Hep A, Hep B, Enhanced Inactive Polio (E-IPV), and Pneumococcal, are kept in a refrigerator maintained at 2°- 8°C, or 35°- 46°F (at time of visit). [MMR and varicella are protected from light at all times, and kept cold]. Oral polio vaccine (OPV) and varicella vaccines are stored in a freezer maintained at -15°C, or 5°F, or lower (at time of visit). Failure to adhere to recommended specifications for storage and handling immunobiologics could make these products impotent.
   - Refrigerator and freezer temperatures must be checked at least once a day and documented (U.S. Pharmacopeial Convention Regulations and Recommendations). However, the CA DHS Immunization Branch recommends checking temperatures twice a day, first thing in the morning and last thing at night.
   - The most current Vaccine Information Statements (VIS) are available from state and local health departments or can be downloaded from the CDC website at www.cdc.gov/nip/publications/VIS or by calling the CDC Immunization Hotline at 800-232-2522.

4. Hazardous substances (Substances that are physical or health hazards):
   - Safety practices on site are followed in accordance with current/updated CAL-OSHA standards.
• The manufacturer’s label is not removed from a container as long as
  the hazardous material (or residues from the material) remains in the
  container.
• All portable containers of hazardous chemicals and secondary
  containers (into which hazardous substances are transferred or
  prepared) require labeling. Hazardous substances are appropriately
  labeled with the following information:
    a. Identity of hazardous substance
    b. Description of hazard warning: can be words, pictures, symbols
    c. Date of preparation or transfer
  **Exception:** Labeling is NOT required for portable containers into
  which hazardous chemicals are transferred from labeled containers,
  and which are intended only for the immediate use of the individual
  who performs the transfer. **
• Site has method(s) in place for drug and hazardous substance
  disposal. Proper disposal is via the site’s contracted/licensed medical
  waste hauler.

C. Drugs are dispensed according to State and Federal drug distribution laws
and regulations.
  1. Drug Expiration:
    • There are no expired drugs on site, as they may not be distributed or
      dispensed.
    • The manufacturer’s expiration date must appear on the label of all
      drugs. All prescription drugs not bearing the expiration date are
      deemed to have expired.
    • If a drug is reconstituted at the time of dispensing, its label must
      contain expiration information for both the reconstituted and
      unconstituted drug.
    • Site has a procedure to check expiration date of all drugs (including
      vaccines and samples), and infant and therapeutic formulas. Must be
      done AT LEAST monthly. A log is preferred, but it is acceptable to
      clearly mark the outside of the drug packages with the expiration date.
  2. Prescription Labeling
    • All stored and dispensed prescription drugs are appropriately labeled
      with:
      a. Provider’s name
      b. Patient’s name
      c. Drug name
      d. Dose
      e. Frequency
      f. Route
      g. Quantity dispensed
      h. Manufacturer’s name and lot number
  3. Drug Dispensing
• Each prescription medication is dispensed in a container that is not cracked, soiled or without secure closures (Title 22, CCR, Section 75037 (a)).
• Drug dispensing is in compliance with all applicable State and Federal laws and regulations. Drugs are not offered for sale, charged or billed to Medi-Cal members (Business and Professions Code, Article 13, Section 4193).
• Drugs are dispensed **ONLY** by a physician, pharmacist or other persons (i.e. NP, CNM, RN, PA) lawfully authorized to dispense medications upon the order of a licensed physician or surgeon. Personnel, such as medical assistants, office managers, and receptionists, **DO NOT DISPENSE DRUGS**.
• California Pharmacy Law *does not* prohibit furnishing a limited quantity of sample drugs if dispensed to the patient in the package provided by the manufacturer, no charge is made to the patient, and appropriate documentation is made in the patient’s medical record (CA Business and Professions Code, Sections 4170, 4171).

4. Vaccine Information Statements (VIS)
• Since 1994, the National Childhood Vaccine Injury Act, Section 2126 of the Public Health Service Act, mandates that parents/guardians or adult patients be informed before vaccines are administered. Health care providers must give a copy of the most recent VIS to patients prior to each vaccination dose of DTaP, Td, MMR, IPV, Hep B, Hib, Varicella and Pneumococcal Conjugate. VISs for other vaccines are available through the CDC website referred to previously.
• VISs for distribution to patients are present on site. Site personnel should be able to verbalize standard practices regarding VIS distribution.
• The **date the VIS was given and the publication date of the VIS MUST** be documented in the patient’s medical record.

5. Pharmacy:
• If there is a pharmacy on site, it is licensed by the CA State Board of Pharmacy, with a licensed pharmacist monitoring drug distribution and current policies/procedures for drug storage and dispensing.

***Note: All site review survey deficiencies related to Pharmaceutical Services REQUIRE a corrective action plan. ***