



Section	Psychiatric Health Facility (PHF)	Effective:	2/1998
Sub-section	Medications	Version:	2.2
Policy	Medication Labeling and Storage	Last Revised:	DRAFT
Director's Approval	_____	Date	_____
	Alice Gleghorn, PhD		
PHF Medical Director's Approval	_____	Date	_____
	Ole Behrendtsen, MD		
Supersedes:	Medication Labeling and Storage rev. 5/23/18	Audit Date:	DRAFT

1. PURPOSE/SCOPE

- 1.1. To establish medication labeling and storage standards to assist in maintaining medication safety and reducing or eliminating potential errors. These standards will contribute significantly to patient safety and quality care.

2. POLICY

- 2.1. Medications for the Santa Barbara County Psychiatric Health Facility (hereafter "PHF") shall be labeled and stored in accordance with all relevant federal and state laws, regulations, and other requirements, as well as standards of clinical practice.
- 2.2. All medications shall be stored in designated storage locations.
- 2.3. The PHF shall not store or administer sample medications.

3. LABELING

- 3.1. All drugs obtained by prescription shall be labeled in compliance with State and Federal laws governing prescription dispensing.
- 3.2. Non-legend drugs shall be labeled in compliance with State and Federal Food and Drug laws.
- 3.3. Drug labels shall be legible.
- 3.4. No person other than a pharmacist or physician shall alter prescription label(s).

4. **STORAGE REQUIREMENTS**

- 4.1. Drugs shall be stored in an orderly manner in cabinets, drawers and/or carts of sufficient size to prevent crowding.
- 4.2. All medication storage areas shall be kept clean and free from dirt and spilled liquids.
- 4.3. Containers which are cracked, soiled, or without secure closures shall not be used.
- 4.4. External use drugs in liquid, tablet, capsule or powder form shall be stored separately from drugs for internal use.
- 4.5. Drugs shall be stored at appropriate temperatures. Drugs required to be stored at room temperature shall be stored at a temperature between 68 degrees Fahrenheit and 77 degrees Fahrenheit and refrigerated drugs shall be stored at a temperature between 36–46 degrees Fahrenheit. Any room or refrigerator used to store drugs must be equipped with a thermometer and temperatures must be logged once per day during regular business hours (see *Attachment A*).
- 4.6. Test reagents, germicides, disinfectants and other household substances shall be stored separately from drugs for internal use.
- 4.7. Drugs shall be accessible only to personnel designated in writing by the facility.¹
- 4.8. IM (Intramuscular) multi-dose vials are to be dated and initialed when opened.
- 4.9. Drugs shall not be kept in stock after the expiration date on the label and no contaminated or deteriorated drugs shall be available for use. Drugs shall be disposed of based on the following timeframes:
 1. Insulin – 28 days after first use or when expired, whichever comes first.
 2. Single use vials – disposed of immediately following use.
 3. Open injectable drugs – 28 days after first use (unless a manufacturer indicates a different timeframe, which may be shorter or longer), or when expired, whichever comes first.
 4. All other injectables (i.e. unopened) – when expired.

¹ Please refer to PHF policy “Access to Medication Storage Areas” for further details.

ATTACHMENTS

Attachment A – PHF Medication Room Climate Log

ASSISTANCE

Morgan Peterson, PharmD, Pharmacist-in-Charge

REFERENCE

Centers for Disease Control and Prevention (CDC)

Safe Practices for Medical Injections – Multi-dose Vials. Updated February 9, 2011 (accessed January 23rd, 2017)

U.S. Pharmacopeial Convention, Inc.: General Chapter, 797.

Pharmaceutical Compounding-Sterile Preparations. The United States Pharmacopeia, 37th Revision and The National Formulary.

California Code of Regulations – Social Security

Title 22, Division 5, Chapter 9, Sections 77079.1 and 77079.3

Code of Federal Regulations – Conditions of Participation

Title 42, Part 482, Section 482.25(b)(3)

REVISION RECORD

DATE	VERSION	REVISION DESCRIPTION
1/23/17	2.0	<ul style="list-style-type: none"> In Section 4.8, clarified circumstances in which medications are removed from stock and disposed.
5/23/18	2.1	<ul style="list-style-type: none"> In Section 4.5, updated acceptable temperatures for non-refrigerated medications, clarified logging requirement, and attached PHF Medication Room Climate Log.
DRAFT	2.2	<ul style="list-style-type: none"> In Section 2.3, stated that the PHF shall not store or administer sample medications.

Culturally and Linguistically Competent Policies

The Department of Behavioral Wellness is committed to the tenets of cultural competency and understands that culturally and linguistically appropriate services are respectful of and responsive to the health beliefs, practices and needs of diverse individuals. All policies and procedures are intended to reflect the integration of diversity and cultural literacy throughout the Department. To the fullest extent possible, information, services and treatments will be provided (in verbal and/or written form) in the individual's preferred language or mode of communication (i.e. assistive devices for blind/deaf).