



The Manitoba Pharmaceutical Association

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NARCOTIC & CONTROLLED DRUG ACCOUNTABILITY GUIDELINES

Goal: To establish self monitoring procedures for pharmacy managers, which will provide accountability for narcotic and controlled drug transactions, detect drug diversion, and deter pilferage.

Background: Due to the federal Bureau of Drug Surveillance's redefinition of responsibilities and the discontinuation of routine inspections of community pharmacies.

Required Procedures:

The specific drugs included shall be all products covered under the triplicate prescription program, and other such drugs as determined by Council.

Perpetual Inventory Records

Either manual count sheets or the equivalent in computer software may be used. Each pharmacy will establish a start count by completing a full physical count.

Received quantities (including medication dispensed, but not picked-up and returns from personal care home to the contract provider for re-dispensing) will be added to the start count, and dispensed drug will be subtracted from the total.

Physical Inventory Counts

Each pharmacy manager will be responsible for doing and recording a physical count of these drugs at least once every three months.

The records of stock on hand will be compared with the net count from the perpetual inventory sheets, and, any discrepancies are to be investigated by the pharmacy manager where it would be deemed prudent to do so.

Change of Manager Inventory Count

Every change of pharmacy manager, resulting in the re-issuing of a pharmacy license, will require an additional physical count of these drugs by both the departing manager and the new manager. The signature of each manager shall be recorded on the count documents, which shall be retained for two years.

Reporting Discrepancies

Should discrepancies be identified during inventory counts, the manager shall record the incident on an “incident report” and keep a record at the pharmacy. The manager shall initiate the necessary steps to identify the cause of the shortage, the responsible staff person and the initiate corrective actions. Significant shortages or diversion incidents must be reported to the M.Ph.A. and Health Canada.

Other Policies

Patient reports of shortages on individual prescriptions.

Where a patient reports a shortage in their prescription, the inventory control system would verify or refute the shortage.

If the prescription is redispensed, documentation of the date, time and reason for redispensing shall be noted on the prescription and cosigned by the manager and, except in sole practice situations, one other pharmacist.

Breakage of “Controlled Substance”

When a breakage occurs, a report shall be filed on the pharmacy records of perpetual inventory, as a negative quantity. Documentation of the date, time and place of breakage could be co-signed by the manager and, except in sole practice situations, one other pharmacist.

Disposal

Narcotic and Controlled medication to be destroyed shall receive prior authorization from Health Canada and, at the time of destruction, shall be witnessed and documented by two health care professionals.

