

Medication Storage & Disposal

General Discussion:

Proper, secure medication storage is critical for many reasons:

- If medications are not properly stored, they may lose efficacy or potency, therefore compromising the desired effect.
- All expired, damaged, or contaminated medications must be stored separately until they are removed.
- Improper storage may increase the potential for medication errors.
- If medications are not properly secured, the opportunity for theft is increased, which can have tragic consequences. Medications must be secured in accordance with laws and regulations to prevent access by unauthorized persons, and controlled substances must be stored and secured according to state and federal laws and regulations to prevent diversion.

Drug disposal is an emerging and complex issue, and there are various regulations that apply to pharmaceuticals with respect to public health and safety and the environment. Medication waste generally falls into one of three regulatory categories: hazardous waste, infectious waste (commonly called biohazardous waste), and solid waste.

Relevant regulations:

ADC:

Standard I.F.(3)(c) Over-the-counter and prescription medications shall remain in the original labeled containers and be stored in a locked, safe place.

FAMILY ADC:

Standard I.D.(3)(c) Over-the-counter and prescription medications shall remain in the original labeled containers and be stored in a locked, safe place.

AFH:

DHS 88.07(3)(a) Every prescription medication shall be securely stored, shall remain in its original container as received from the pharmacy and be stored as specified by the pharmacist.

DHS 88.07(3)(e)1. The licensee shall keep a record of all prescription medications controlled, dispensed or administered by the licensee which show the name of the resident, the name of the particular medication, the date and time the resident took the medication and errors and omissions. The medication controlled by licensee shall be kept in a locked place.

RCAC:

DHS 89.13(22) "Medication management" means oversight by a nurse, pharmacist or other health care professional to minimize risks associated with use of medications. Medication management includes proper storage of medications; preparation of a medication organization or reminder system; assessment of the effectiveness of medications; monitoring for side effects, negative reactions and drug interactions; and delegation and supervision of medication administration.

CBRF:

DHS 83.37(1)(g)1. When a resident is discharged, the resident's medications shall be sent with the resident.

DHS 83.37(1)(g)2. If a resident's medication has been changed or discontinued, the CBRF may retain a resident's medication for no more than 30 days unless an order by a physician or a request by a pharmacist is written every 30 days to retain the medication.

DHS 83.37(1)(g)3. The CBRF shall develop and implement a policy for disposing unused, discontinued, outdated, or recalled medications in compliance with federal, state and local standards or laws. The CBRF shall arrange for the stored medications to be destroyed in compliance with standard practices. Medications that cannot be returned to the pharmacy shall be separated from other medication in current use in the facility and stored in a locked area, with access limited to the administrator or designee. The administrator or designee and one other employee shall witness, sign, and date the record of destruction. The record shall include the medication name, strength and amount.

DHS 83.37(2)(a)2. Except as specified under [sub. \(4\)](#), when a resident self-administers medications, prescribed and over-the-counter medications and dietary supplements shall remain under the control of the resident. The CBRF shall provide a secure place for the storage of medications in the resident's room.

DHS 83.37(3)(a) The CBRF shall keep medications in the original containers and not transfer medications to another container, unless the CBRF complies with all of the following:

DHS 83.37(3)(a)1. Transfer of medications from the original container to another container shall be done by a practitioner, registered nurse, or pharmacist. Transfer of medication to another container may be delegated to other personnel by a practitioner, registered nurse or pharmacist.

DHS 83.37(3)(b) For use during unplanned or non-routine events or activities, employees who have completed medication administration training as required in [s. DHS 83.20 \(2\) \(d\)](#) may transfer unit doses of medications into packages for the resident.

DHS 83.37(3)(c) The CBRF shall keep medicine cabinets locked and the key available only to personnel identified by the CBRF.

DHS 83.37(3)(d) Medications stored in a common refrigerator shall be properly labeled and stored in a locked box.

DHS 83.37(3)(e) The CBRF may not store prescription and over-the-counter medications or dietary supplements next to chemicals or other contaminants.

DHS 83.37(3)(f) The CBRF shall physically separate medications for internal consumption from medications for external application.

DHS 83.37(3)(g) The CBRF shall provide separately locked and securely fastened boxes or drawers or permanently fixed compartments within the locked medications area for storage of schedule II drugs subject to 21 USC 812 (c), and Wisconsin's uniform controlled substances act, [ch. 961, Stats.](#)

Relevant DQA Memos:

DQA Memo 08-003 Medication Waste and Collection Programs

DQA Memo 07-008 Medication Return, Donation, and Disposal

BQA Memo 06-016 Insulin and Assisted Living

BQA Memo 05-003 Destruction of Medications

BQA Memo 04-029 Sample Medications

Other Resources:

Department of Natural Resources Pharmaceutical Waste

U.S. Pharmacopeia Storage Requirements:

Wisconsin Department of Agriculture, Trade and Consumer Protection – Clean Sweep

Wisconsin Department of Natural Resources – Pharmaceutical Waste

UW – Extension, Solid & Hazardous Waste Education Center,
Medicine Collection Days Database

Best Practice, Tools & Forms:

Proper Disposal of Prescription Drugs

http://www.whitehousedrugpolicy.gov/publications/pdf/prescrip_disposal.pdf

Medication Disposition Sheet – Multiple Residents (sample form – Med-Pass, Inc.):

http://www.med-pass.com/Docs/Products/samples/MP5213_sp.pdf

Medication Disposition Sheet – Individual Resident (sample form – Med-Pass, Inc.):

http://www.med-pass.com/Docs/Products/samples/MP5214_sp.pdf

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