


<p style="text-align: center;">STATE OF IOWA DEPARTMENT OF CORRECTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>		Policy Number	Applicability
		HSP-405	<input checked="" type="checkbox"/> DOC <input type="checkbox"/> CBC
		Policy Code	Iowa Code Reference
		Public Access	N/A
Chapter 6 HEALTH SERVICES	Sub Chapter PHARMACY	Related DOC Policies	Administrative Code Reference
		N/A	Rule 657-8.32 (124, 155A)
Subject		PREA Standards	Responsibility
CONTROLLED SUBSTANCES		N/A	Dr. Jerome Greenfield Susan Shields
		Effective Date	Authority
		November 2022	

I. PURPOSE

To provide standards for, and to ensure control and accountability of, controlled substances within the Iowa Department of Corrections (IDOC) in accordance with state and federal regulations.

II. POLICY

It is the policy of the IDOC that standards for the accountability and control of controlled substances in the IDOC shall be maintained.

III. DEFINITIONS - See IDOC Policy **AD-GA-16** for additional definitions.

IV. PROCEDURES

- A. All appropriate state and federal laws, not otherwise specified herein, shall apply to the maintenance and use of controlled substances.
- B. The National Practitioners Data Bank will be researched prior to the hiring of any Licensed Medical Practitioner to work in the IDOC to determine that

the practitioner's records are clear of violations of controlled substance regulations. The history of any type of investigation involving the Licensed Medical Practitioner's license will be researched; Form **HSF-405A**, *Waiver of Right of Privacy*, may be used as part of the investigation. A license to practice medicine in the state of Iowa will not be the only criteria for a Licensed Medical Practitioner's suitability for employment.

- C. Medical and dental practitioners who are agents or employees of an IDOC institution and prescribe, dispense, and administer controlled substances in the course of their employment should maintain an individual federal Controlled Substance Registration (DEA number). That number should be provided to the IDOC and kept on record by the DOC pharmacies.
- D. All IDOC institutions maintaining a stock of controlled substances, whether patient specific or bulk stock, must maintain a state CSR. Permanently licensed practitioners must maintain an individual state CSR. Interns and residents who prescribe controlled substances may practice under the institution's state CSR. Practitioners prescribing controlled substances at multiple practice locations need only one state CSR (for their primary practice location) provided they do not maintain stock supplies of controlled substances at any practice location other than their primary practice location. The state CSR shall be posted in the medication room or other clearly visible site within the Health Services Department.
- E. The IDOC Pharmacy Director will assign each practitioner authorized to prescribe, dispense, and administer controlled substances under any institution's DEA(s) a suffix which must appear hyphenated to the institution's DEA number on all prescriptions written by that practitioner for controlled substances. Such prescriptions can be filled at any licensed pharmacy but may only be written in the usual course of practice at the institution where the practitioner is employed for an individual hospitalized or incarcerated at that institution.
- F. A central registry of practitioners' licenses, state CSRs, and suffix assignments and institution state CSR registrations shall be maintained for the IDOC at IMCC. The registry will be updated as new practitioners are hired or leave IDOC employment. Distribution of the registry is restricted to IDOC pharmacists.
- G. Prescription orders for controlled substances must be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his/her practice. Controlled substances may not be prescribed for a drug dependent person for the purpose of continuing his/her dependence.

- H. If extenuating circumstances, such as pregnancy, require continuation of methadone maintenance while a patient is incarcerated, the originating or initiating licensed Opioid Treatment Program assumes responsibility and delivers the methadone to the patient.
- I. Patients who were registered in the Iowa Department of Public Health Medical Cannabidiol Program and who possessed and used medical cannabidiol products prior to incarceration will NOT be allowed to continue doing so while in any IDOC facility (institution or CBC) or when under DOC supervision (parole, probation, etc.). IDOC providers are not routinely certified as participants in the Medical Cannabidiol Program and therefore cannot continue a patient's therapy during the time he/she is incarcerated. In addition, since cannabis products are still Schedule I controlled substances under federal law, making their use still technically illegal, the use of these products is not appropriate in any government facility which may receive federal funding, grants, or participate in other federal programs.
- J. In the absence of a Licensed Medical Practitioner-specified duration of therapy, orders for controlled substances expire automatically after 5 days. Licensed Medical Practitioner-specified durations of therapy for controlled substances other than pseudoephedrine, medications for seizure disorders, testosterone, and benzodiazepines, in excess of 5 days must be accompanied by clinical justification and may not exceed 30 days, after which the prescriber must document his/her examination of the patient and subsequent reassessment of his/her medical condition in a POMR progress note in the ICON Medical EMR prior to renewal of the prescription order. (Prescriptions for an un-specified number of doses shall expire after 5 days or after the specified number of doses has been administered, whichever comes first.) The maximum Licensed Medical Practitioner specified duration of therapy for pseudoephedrine, medications for seizure disorders, testosterone and benzodiazepines is 90 days, after which the prescriber must document his/her examination of the patient and subsequent reassessment of his/her medical condition in a POMR progress note in the ICON Medical EMR prior to renewal of the prescription order.
- K. Controlled substances may not be administered to patients by any person other than a nurse or other qualified person as defined in Rule 657-8.32 (124, 155A) of the Iowa Administrative Code.
- L. A proof of use document must be maintained for stock supplies of all Schedule II through V controlled substances stored or in use on nursing units and all patient-specific Schedule II controlled substances dispensed, stored, and in use on nursing units. This document shall show the name of

the drug, dosage form, strength, control number of manufacturer, date and quantity issued. In addition, each dose administered must be recorded on this document showing name and identification number of the patient, prescriber, drug name, strength and dosage form, time, date and quantity administered, and quantity remaining on hand. Pharmacy will issue a proof of use document with each package or dose of medication. When this package or dose of medication is depleted, the properly completed proof of use document shall be returned to Pharmacy.

- M. All stock supplies, (i.e. supplies not issued for an individual patient) of Schedule II through V controlled substances stored or in use, and patient-specific Schedule II controlled substances must be physically counted by a licensed nurse (RN or LPN) each shift. The results of the count shall be entered on a form detailing the name of the drug, strength, dosage form, perpetual inventory from proof of use documents, physical count, date, and nurse's initials. Any wasted medication (dropped/broken/spilled/refused etc.) must be witnessed and cosigned by another licensed health care professional. Any discrepancies shall be reported to the institution's nursing supervisor, pharmacist-in-charge or designee for that facility and the shift security supervisor.
- N. Controlled substances stored in locations other than the pharmacy shall be stored under double lock, (e.g., a locked cabinet or med cart in a locked room, or a locked drawer in a locked med cart.)
- O. Institutions who obtain controlled substances from sources other than the pharmacy serving that institution shall notify the pharmacy the next administrative day.