



# RIVERSIDE MEDICAL CENTER, INC.



**METRO PACIFIC HEALTH**  
THE HEART OF FILIPINO HEALTHCARE

<b>DEPARTMENT:</b> Pharmacy Division		<b>POLICY NUMBER:</b> DPOTM-MPP-PHAR-P017-(01)	
<b>TITLE/DESCRIPTION:</b> <b>MANAGEMENT OF NARCOTICS AND CONTROLLED SUBSTANCES</b>			
<b>EFFECTIVE DATE:</b> February 28, 2025	<b>REVISION DUE:</b> February 27, 2028	<b>REPLACES NUMBER:</b> DPOTMH-J-P17	<b>NO. OF PAGES:</b> 1 of 11
<b>APPLIES TO:</b> Pharmacy Department, Nursing Service Division, Pharmacy and Therapeutics Committee (PTC)		<b>POLICY TYPE:</b> Multi Disciplinary	

## PURPOSE:

1. To provide guidelines governing the adequate control of distribution, prescribing, dispensing, storage and disposal of Narcotic and Controlled Drugs in all Riverside Medical Center, Inc. (RMCI) in accordance with the rules of Food Drug Administration (FDA) and of Philippine Drug Enforcement Agency (PDEA) regulations and requirements.
2. To define the responsibilities of hospital personnel with regard to prescribing, dispensing, administering, storage and record-keeping of these drugs.

## DEFINITIONS:

**Dangerous Drugs** - include those listed in the Schedules annexed to the 1961 Single Convention on Narcotic Drugs, as amended by the 1972 Protocol, and in the Schedules annexed to the 1971 Single Convention on Psychotropic Substances as enumerated in the attached annex which is an integral part of RA 9165 and include those classified as such by the Dangerous Drugs Board pursuant to Section 93 Article XI of RA 9165 for domestic control.

**Narcotic Drugs** - are addictive drugs that reduce the user's perception of pain and induce euphoria (a feeling of exaggerated and unrealistic well-being). They are substances that lead to increasing tolerance and physiological dependence.

**Controlled Drugs** - any drug or therapeutic agent with a potential for abuse or addiction, which is held under strict control.

**Opioid** - means any morphine-like synthetic narcotic that produces the same effects as drugs derived from the opium poppy (opiates), such as pain relief, sedation, constipation and respiratory depression

**Psychotropic Drugs** - any drug capable of affecting the mind, emotions, and behavior.

## RESPONSIBILITY:

Pharmacy Managers, Pharmacists, Pharmacy Technicians, Physicians and Nurses, all Clinical Department Heads/Chairman/Directors, Pharmacy and Therapeutics Committee (PTC)

## POLICY:

1. The Pharmacy Department has a policy on the proper handling of narcotic and sedative-hypnotic drugs for inpatients as well as outpatients, according to the rules and regulations of the World Health Organization (WHO), FDA and of PDEA regulations and requirements.





DR. PABLO O. TORRE  
MEMORIAL HOSPITAL

# RIVERSIDE MEDICAL CENTER, INC.



METRO PACIFIC HEALTH  
THE HEART OF FILIPINO HEALTHCARE

<b>DEPARTMENT:</b> Pharmacy Division		<b>POLICY NUMBER:</b> DPOTM-MPP-PHAR-P017-(01)	
<b>TITLE/DESCRIPTION:</b> <b>MANAGEMENT OF NARCOTICS AND CONTROLLED SUBSTANCES</b>			
<b>EFFECTIVE DATE:</b> February 28, 2025	<b>REVISION DUE:</b> February 27, 2028	<b>REPLACES NUMBER:</b> DPOTMH-J-P17	<b>NO. OF PAGES:</b> 2 of 11
<b>APPLIES TO:</b> Pharmacy Department, Nursing Service Division, Pharmacy and Therapeutics Committee (PTC)		<b>POLICY TYPE:</b> Multi Disciplinary	

2. Narcotic and controlled drugs shall be prescribed for a legitimate medical indication and may only be written or countersigned by a consultant or specialist.
3. The Pharmacist in-charge along with the Nursing Service Division Head/ Manager of the station shall conduct periodic inspections regarding safe storage and appropriate record keeping of narcotics and controlled medications.
4. Telephone order for narcotic and controlled medications is not acceptable.
5. Physicians cannot prescribe controlled medications for self or family use. Instead, they shall obtain such drugs from clinic utilizing system.
6. Only the Pharmacy Department shall receive, store (behind a steel door with double lock), and dispense narcotic & controlled drugs to patients, and maintain proper documentation of drug count and accountability (including that of empty containers of narcotics).
7. Floor stock of Narcotic drugs at patient wards and selected client service areas shall be allow given that proper documentation is observed, allowable dosage limits are maintained, periodic audits are conducted and access to these drugs are restricted through proper storage using locked medication cabinets.
8. When it is necessary for narcotic drugs to be available in select client service, there shall be a documentation of the rationale for availability to be reviewed by the Pharmacy and Therapeutics Committee (PTC) prior to approval.
9. Only registered pharmacists shall be allowed inside the Narcotic and Controlled Drugs room.
10. No borrowing or special delivery of controlled and narcotic drugs from and to the RMCI hospital.





# RIVERSIDE MEDICAL CENTER, INC.



**METRO PACIFIC HEALTH**  
THE HEART OF FILIPINO HEALTHCARE

<b>DEPARTMENT:</b> Pharmacy Division		<b>POLICY NUMBER:</b> DPOTM-MPP-PHAR-P017-(01)	
<b>TITLE/DESCRIPTION:</b> <b>MANAGEMENT OF NARCOTICS AND CONTROLLED SUBSTANCES</b>			
<b>EFFECTIVE DATE:</b> February 28, 2025	<b>REVISION DUE:</b> February 27, 2028	<b>REPLACES NUMBER:</b> DPOTMH-J-P17	<b>NO. OF PAGES:</b> 3 of 11
<b>APPLIES TO:</b> Pharmacy Department, Nursing Service Division, Pharmacy and Therapeutics Committee (PTC)		<b>POLICY TYPE:</b> Multi Disciplinary	

## **PROCEDURE (SOP):**

### **GENERAL CONSIDERATIONS:**

- Consultants are authorized to write prescriptions for drugs that fall under their area of expertise only. Narcotics are only to be prescribed by specialists and consultants who have a valid S2 license.
- In prescribing narcotic & controlled medications, the following requirements are mandated:
  - The strength and quantity of the medication to be dispensed should be written clearly and legible in words and figures.
  - There should be no strike over, erasures or misspellings of the drug name, strength or quantity.
  - Identification number should be written with physician's name.
  - The S-2 license of prescribing doctor shall be written in the prescription.
- Telephone order for narcotics and controlled medications is NOT acceptable; in-house physician (fellow) can prescribe it and must be countersigned by the consultant within 24 hours.
- The psychotropic drugs are restricted to psychiatric clinics while other specialists are allowed to prescribe one (1) month only of the psychotropic drugs, except during emergency situations in which a psychiatrist or specialist is not immediately available.
- Storage and administration of patient's own controlled and narcotic drugs is prohibited.
- Safeguard controlled and narcotic drug's prescriptions against improper use.





<b>DEPARTMENT:</b> Pharmacy Division		<b>POLICY NUMBER:</b> DPOTM-MPP-PHAR-P017-(01)	
<b>TITLE/DESCRIPTION:</b> <b>MANAGEMENT OF NARCOTICS AND CONTROLLED SUBSTANCES</b>			
<b>EFFECTIVE DATE:</b> February 28, 2025	<b>REVISION DUE:</b> February 27, 2028	<b>REPLACES NUMBER:</b> DPOTMH-J-P17	<b>NO. OF PAGES:</b> 4 of 11
<b>APPLIES TO:</b> Pharmacy Department, Nursing Service Division, Pharmacy and Therapeutics Committee (PTC)		<b>POLICY TYPE:</b> Multi Disciplinary	

## 1. Record-Keeping, Floor Stock and Dispensing

- 1.1 Pharmacy Personnel logs all controlled medications in the Narcotic Record Form.
- 1.2 Narcotics and controlled drugs received by the Pharmacy Department are placed in a double-locked container immediately.
- 1.3 For floor stock requisitions, the head nurse requests narcotic drugs and controlled substances thru stock requisition via the hospital's computer system, then fill up the Requisition for Dangerous Drug Preparation or Drug Preparation Containing Controlled Chemical for In-Patient Use Form (DPOTMH-PHARM-F028)
- 1.4 Once the request is approved, the pharmacist dispenses narcotic drugs and pharmacy provides a Controlled Drug Administration Sheet (CDAS) (DPOTMH-PHARM-F029).

## 2. Inpatient and Out-Patient

### 2.1 Narcotic Drugs:

- 2.1.1 The treating physician orders narcotics on an order sheet for each ampule used and the order is on daily basis otherwise an *Automatic Stop Order* will be applied.
- 2.1.2 The pharmacist checks the prescription order carefully and make sure that all the information is complete, as well as the consumed amount in the ampule is indicated, and the remaining balance is properly discarded, documented, signed and stamped (including witnesses of the discarding).
- 2.1.3 Controlled and narcotic drugs should not be kept in the patient's cubicles in the nursing stations and wards. Instead, they are to be kept in a safeguarded container that is allowed to be opened only when the medication is ready to use. A logbook will be kept to monitor the contents of the container and to which patient the medication is to be used.
- 2.1.4 Telephone orders for narcotic and controlled medication is not acceptable.
- 2.1.5 Nursing stations and selected patient care areas are allowed to keep a floor stock of narcotic drugs and controlled substances given that they are limited to the following doses:
  - a) Morphine ampules or vials 15 mg in adult care areas and 2mg in pediatric care areas
  - b) Midazolam ampules or vials 5 mg
  - c) Diazepam ampules or vials 10 mg





DR. PABLO O. TORRE  
MEMORIAL HOSPITAL

# RIVERSIDE MEDICAL CENTER, INC.



METRO PACIFIC HEALTH  
THE HEART OF FILIPINO HEALTHCARE

<b>DEPARTMENT:</b> Pharmacy Division		<b>POLICY NUMBER:</b> DPOTM-MPP-PHAR-P017-(01)	
<b>TITLE/DESCRIPTION:</b> MANAGEMENT OF NARCOTICS AND CONTROLLED SUBSTANCES			
<b>EFFECTIVE DATE:</b> February 28, 2025	<b>REVISION DUE:</b> February 27, 2028	<b>REPLACES NUMBER:</b> DPOTMH-J-P17	<b>NO. OF PAGES:</b> 5 of 11
<b>APPLIES TO:</b> Pharmacy Department, Nursing Service Division, Pharmacy and Therapeutics Committee (PTC)		<b>POLICY TYPE:</b> Multi Disciplinary	

d) Nalbuphine ampules 10 mg

## 2.2 Controlled Drugs:

- 2.2.1 The pharmacist checks the prescription for completion and dispense the drugs as a unit-dose.
- 2.2.2 The unused drugs, due to discontinuation as a result of discharge or expiration of the patient, must be returned to the pharmacist in-charge.

## 2.3 A Complete Prescription Should Contain the Following:

- 2.3.1 Patient's name, Age, Sex, Nationality
- 2.3.2 Address of the patient
- 2.3.3 Diagnosis
- 2.3.4 Allergy
- 2.3.5 Date Prescribed
- 2.3.6 Drug name (Generic & Brand Name)
- 2.3.7 Quantity of the prescribed drug in words
- 2.3.8 Dose (written in figures and letters)
- 2.3.9 Route and frequency of administration
- 2.3.10 Doctor's name, stamp, Identification/S2 number, address, contact number and signature

## 2.4 Disposal of Narcotics and Controlled Substances:

- 2.4.1 The aliquot part of controlled drugs used for dose: Where the nurse withdraws the required amount of ampoules from stock and records the number of ampoules used and the dose given in the proper columns on controlled drugs administration record sheet. He/She shall, in arriving at the predetermined aliquot part, keep that portion of the solution that is not used in a designated container to be audited by pharmacy prior to proper disposal.
- 2.4.2 Prepared Dose refused by Patient or Cancelled by Doctor: When a dose has been prepared for a patient but was not used, due to refusal by the patient or cancellation by the doctor, the attending nurse returns the drug to the pharmacy for proper disposition and records why the drug was not administered. The nurse in charge of the ward countersigns the statement of





DR. PABLO O. TORRE  
MEMORIAL HOSPITAL

# RIVERSIDE MEDICAL CENTER, INC.



METRO PACIFIC HEALTH  
THE HEART OF FILIPINO HEALTHCARE

<b>DEPARTMENT:</b> Pharmacy Division		<b>POLICY NUMBER:</b> DPOTM-MPP-PHAR-P017-(01)	
<b>TITLE/DESCRIPTION:</b> <b>MANAGEMENT OF NARCOTICS AND CONTROLLED SUBSTANCES</b>			
<b>EFFECTIVE DATE:</b> February 28, 2025	<b>REVISION DUE:</b> February 27, 2028	<b>REPLACES NUMBER:</b> DPOTMH-J-P17	<b>NO. OF PAGES:</b> 6 of 11
<b>APPLIES TO:</b> Pharmacy Department, Nursing Service Division, Pharmacy and Therapeutics Committee (PTC)		<b>POLICY TYPE:</b> Multi Disciplinary	

- the attending nurse.
- 2.4.3 Accidental Destruction and Contamination of Drugs: When a solution, ampoule, is accidentally destroyed or contaminated in the ward, the person responsible indicates the loss on the CDAS under remarks column and the nurse-in-charge of the ward returns the contaminated drug to the pharmacy for proper disposition.
- 2.4.4 Disposal method: In a flushing unit, the pharmacist verifies that the portion of ampoule have been flushed. If disposed of under running water, the water should run for at least 30 seconds after the medications go down the drain to ensure that they have been washed through the tap. Used ampules, vials, syringes and medication containers are to be kept in a separate container in the nursing stations for audit purposes. Pharmacy staff collects these containers on a designated time each day. Disposal is done by the pharmacist during daily audit rounds and this is witnessed by an assigned nurse per station and/or area.





# RIVERSIDE MEDICAL CENTER, INC.



**METRO PACIFIC HEALTH**  
THE HEART OF FILIPINO HEALTHCARE

<b>DEPARTMENT:</b> Pharmacy Division		<b>POLICY NUMBER:</b> DPOTM-MPP-PHAR-P017-(01)	
<b>TITLE/DESCRIPTION:</b> <b>MANAGEMENT OF NARCOTICS AND CONTROLLED SUBSTANCES</b>			
<b>EFFECTIVE DATE:</b> February 28, 2025	<b>REVISION DUE:</b> February 27, 2028	<b>REPLACES NUMBER:</b> DPOTMH-J-P17	<b>NO. OF PAGES:</b> 7 of 11
<b>APPLIES TO:</b> Pharmacy Department, Nursing Service Division, Pharmacy and Therapeutics Committee (PTC)		<b>POLICY TYPE:</b> Multi Disciplinary	

### 3. Recording:

- 3.1 There is a Narcotics and Controlled Log Book for daily recording for each narcotic and/or controlled substance.
- 3.2 Pharmacy Manager checks the inventory bi-annually with an assigned pharmacist monitoring the usage of narcotics in every patient care area that store narcotics.

### 4. Administration

- 4.1 Refer to policy "*Medication Management Standards*" under Nursing Service Division.
- 4.2 The Nurse in charge double checks the order for the narcotic or controlled substance prior to administration.
- 4.3 The Nurse in charge may use the floor stock of narcotic and controlled substances provided that they request replenishment of the used stock.
- 4.4 The CDAS form accomplishes prior to administration. The nurse in charge logs the name of the patient in the CDAS. The physician's S2 license and signature and the signature of the administering nurse is also to be documented in the CDAS prior to drug administration.
- 4.5 Two Pharmacist monitors daily administration in all areas covered to confirm CDAS compliance.





# RIVERSIDE MEDICAL CENTER, INC.



**METRO PACIFIC HEALTH**  
THE HEART OF FILIPINO HEALTHCARE

<b>DEPARTMENT:</b> Pharmacy Division		<b>POLICY NUMBER:</b> DPOTM-MPP-PHAR-P017-(01)	
<b>TITLE/DESCRIPTION:</b> <b>MANAGEMENT OF NARCOTICS AND CONTROLLED SUBSTANCES</b>			
<b>EFFECTIVE DATE:</b> February 28, 2025	<b>REVISION DUE:</b> February 27, 2028	<b>REPLACES NUMBER:</b> DPOTMH-J-P17	<b>NO. OF PAGES:</b> 8 of 11
<b>APPLIES TO:</b> Pharmacy Department, Nursing Service Division, Pharmacy and Therapeutics Committee (PTC)		<b>POLICY TYPE:</b> Multi Disciplinary	

<b>WORK INSTRUCTION:</b>	
<b>KEY TASKS</b>	<b>PERSON RESPONSIBLE</b>
1. Logs all controlled medications in the Narcotic Record Form.	Pharmacist
2. Places controlled drugs received in a double-locked container immediately.	
3. Checks the prescription order carefully and makes sure that all the information is complete, as well as the consumed amount in the ampule is indicated, and the remaining balance is properly discarded, documented, signed and stamped.	
4. Orders narcotic on an order sheet for each ampule used and the order is on daily basis otherwise an <i>Automatic Stop Order</i> will be applied.	Treating Physician
5. Returns the unused drugs to the pharmacist in-charge.	Nurse
6. Disposes the remaining narcotic drugs through flushing, and verifies that it has been flushed completely.	Nurse/Pharmacist
<div>MASTER COPY</div>	





DR. PABLO O. TORRE  
MEMORIAL HOSPITAL

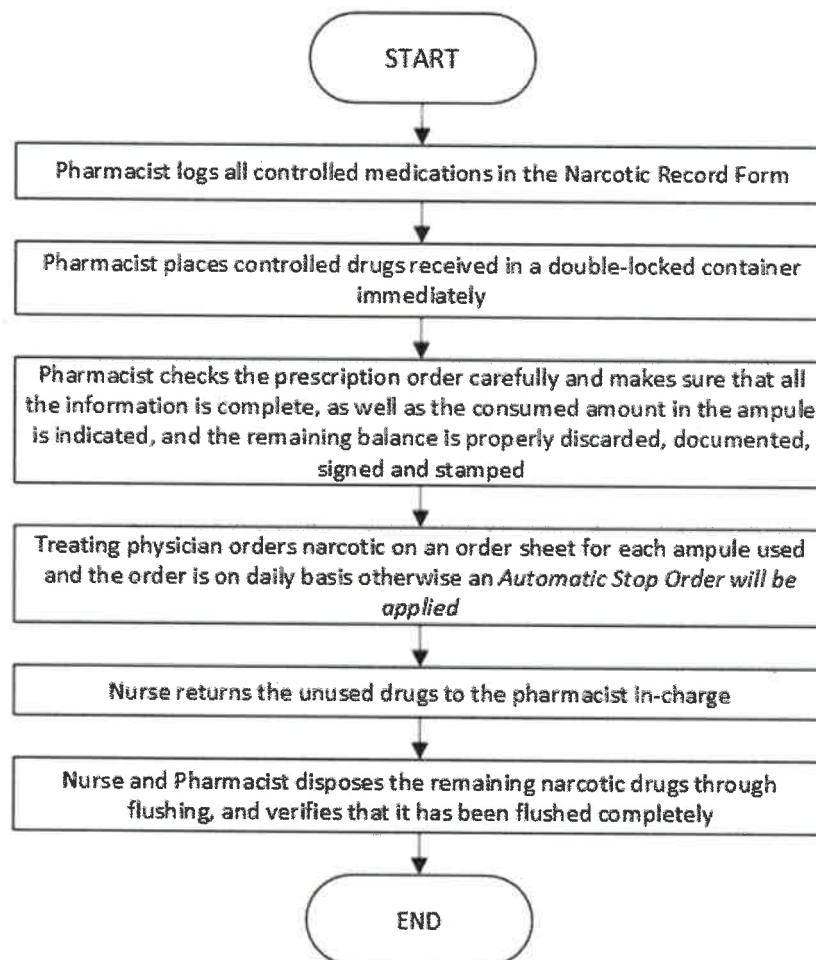
# RIVERSIDE MEDICAL CENTER, INC.



**METRO PACIFIC HEALTH**  
THE HEART OF FILIPINO HEALTHCARE

<b>DEPARTMENT:</b> Pharmacy Division		<b>POLICY NUMBER:</b> DPOTM-MPP-PHAR-P017-(01)	
<b>TITLE/DESCRIPTION:</b> <b>MANAGEMENT OF NARCOTICS AND CONTROLLED SUBSTANCES</b>			
<b>EFFECTIVE DATE:</b> February 28, 2025	<b>REVISION DUE:</b> February 27, 2028	<b>REPLACES NUMBER:</b> DPOTMH-J-P17	<b>NO. OF PAGES:</b> 9 of 11
<b>APPLIES TO:</b> Pharmacy Department, Nursing Service Division, Pharmacy and Therapeutics Committee (PTC)		<b>POLICY TYPE:</b> Multi Disciplinary	

## WORK FLOW:





# RIVERSIDE MEDICAL CENTER, INC.



**METRO PACIFIC HEALTH**  
THE HEART OF FILIPINO HEALTHCARE

<b>DEPARTMENT:</b> Pharmacy Division		<b>POLICY NUMBER:</b> DPOTM-MPP-PHAR-P017-(01)	
<b>TITLE/DESCRIPTION:</b> <b>MANAGEMENT OF NARCOTICS AND CONTROLLED SUBSTANCES</b>			
<b>EFFECTIVE DATE:</b> February 28, 2025	<b>REVISION DUE:</b> February 27, 2028	<b>REPLACES NUMBER:</b> DPOTMH-J-P17	<b>NO. OF PAGES:</b> 10 of 11
<b>APPLIES TO:</b> Pharmacy Department, Nursing Service Division, Pharmacy and Therapeutics Committee (PTC)		<b>POLICY TYPE:</b> Multi Disciplinary	

**FORMS:**

1. (DPOTMH-PHARM-F028) - Requisition for Dangerous Drug Preparation or Drug Preparation Containing Controlled Chemical for In-Patient Use Form
2. (DPOTMH-PHARM-F029) - Controlled Drug Administration Sheet (CDAS)

**EQUIPMENT:** N/A**REFERENCES:**

1. Accreditation Canada Qmentum International Standards, Medication Management 2015.
2. Joint Commission International 5<sup>th</sup> Edition. Medication Management and Use. 2014
3. Central Board for Accreditation of Healthcare Institutions (CBAHI) standards, Pharmacy Standards 2016.





# RIVERSIDE MEDICAL CENTER, INC.



**METRO PACIFIC HEALTH**  
THE HEART OF FILIPINO HEALTHCARE

<b>DEPARTMENT:</b> Pharmacy Division		<b>POLICY NUMBER:</b> DPOTM-MPP-PHAR-P017-(01)	
<b>TITLE/DESCRIPTION:</b> <b>MANAGEMENT OF NARCOTICS AND CONTROLLED SUBSTANCES</b>			
<b>EFFECTIVE DATE:</b> February 28, 2025	<b>REVISION DUE:</b> February 27, 2028	<b>REPLACES NUMBER:</b> DPOTMH-J-P17	<b>NO. OF PAGES:</b> 11 of 11
<b>APPLIES TO:</b> Pharmacy Department, Nursing Service Division, Pharmacy and Therapeutics Committee (PTC)		<b>POLICY TYPE:</b> Multi Disciplinary	

APPROVAL:				
	Name/Title	Signature	Date	TQM Stamp
<b>Prepared by:</b>	<b>STEPHANIE CAMILLE O. SAMONTE</b> Inpatient Clinical Pharmacist		2/21/25	
<b>Reviewed by:</b>	<b>WENDY MAE D. GOMEZ</b> Accreditation and Documentation Manager		2-21-25	
<b>Approved by:</b>	<b>MIRIAM HOPE D. BRAVO</b> Inpatient Pharmacy Manager		2/21/25	
	<b>HANNAH KHAY S. TREYES</b> Chief Nursing Officer		02/25/25	
	<b>JOSE PEPITO B. MALAPITAN, MD</b> Medical Director		02-28	
	<b>MA. ANTONIA S. GENSOLI, MD</b> VP/Chief Medical Officer		2.28.25	
<b>Final Approved by:</b>	<b>GENESIS GOLDI D. GOLINGAN</b> President and Chief Executive Officer		02/26/25	

