

RS 40:2191

§2191. Disposal of deceased patient's unused controlled substances

A. Upon death of a patient receiving hospice services, ownership of the patient's unused Schedule II, III, IV, or V controlled substances under 21 CFR 1308 may transfer to the hospice for immediate disposal pursuant to the following provisions:

(1) Each hospice shall establish a written procedure to ensure safe disposal of unused controlled substances by a hospice nurse at the time of a patient's death.

(2) Upon the death of a patient receiving hospice services, in the presence of a witness, the hospice nurse shall record in the medical record the name and quantity of each unused controlled substance.

(3)(a) The hospice nurse shall conduct immediate disposal of the controlled substance at the site of care by complying with the Environmental Protection Agency and Drug Enforcement Administration guidelines for safe disposal or immediate mail-back to a registered authorized collector pursuant to 21 CFR 1317.40.

(b) If conducting immediate disposal at the site of care, the hospice nurse shall perform the disposal in the presence of a witness, who shall sign a document indicating their witnessing the disposal.

(c) If participating in immediate mail-back to a registered authorized collector, the hospice nurse shall deposit the unused controlled substance into the mail-back envelope and seal the envelope at the site of care. This shall be done in the presence of a witness, who shall sign a document indicating their witnessing the hospice nurse sealing the controlled substance in the mail-back envelope. The hospice nurse shall immediately initiate its delivery to the registered authorized collector.

(4) Hospice employees shall not remove any controlled substances from the site of care, except for the hospice nurse responsible for disposal pursuant to Subparagraph (3)(c) of this Subsection.

(5) The hospice nurse shall record the method of disposal in the medical record.

B. A copy of the written policy established pursuant to this Section shall be furnished to each patient and to the patient's healthcare representative at the time the patient is enrolled in hospice.

Acts 2018, No. 23, §1.