7 REMOVAL AND DISPOSAL OF MEDICINES

7.1 Scope

This chapter covers the removal and disposal of :-

- 1. Stock and patient's own medicines
- 2. Prescription only medicines (POM), controlled drugs and cytotoxic medicines
- 3. Medicines contained in syringes

7.2 Introduction

Pharmaceutical waste is classed as 'special waste'. Healthcare professionals must never dispose of medicines into the mains sewerage system i.e. sink or toilet. Therefore:

- It must be disposed of by incineration, in approved containers, at high degree temperatures in order to completely destroy all potent substances;
- Prosecution will occur if such waste is consigned as anything other than 'special waste,' eg. it is discovered in landfill tips, and it can be traced back to the user.
- Cytotoxic and cytostatic medicines are classified as hazardous waste and must be segregated from other pharmaceutical waste and placed in the correct hazardous waste bin
- Cytotoxic Please refer to East Midlands Cytotoxic Policy for guidance on disposal
- Controlled Drugs are subject to further legislative controls and procedures. Special arrangements should be in place. Please refer to individual Trust policy.
- Disposal of pharmaceutical waste must be in accordance with local waste management policy. Refer to the policy for further information.
- A consignment note must accompany pharmaceutical waste removed for incineration.

7.2.1 Empty Containers

- Empty medicine containers must <u>be disposed of at ward / department level</u>. These should be placed in the appropriate glass, plastic or household waste bin. Liquid bottles must be rinsed with water, before placing into the glass bin.
- Ensure that patient names are obliterated from empty containers before disposal
- **7.2.2** Empty ampoules and ampoules/ syringes with drug remaining in them must be disposed of in the sharps bin.

7.3 Return and Disposal Of Medicines within Hospital Areas including Community Hospitals

Each clinical area is responsible for making arrangements for return or disposal of obsolete medicines:

LEICESTERSHIRE MEDICINES CODE

7.3.1 Patient Own Medicines (ie medicines that patient has brought in with them)

Obsolete Patient Own Medicines may be

- Returned back to the patient or their carer with advice on how to safely dispose of it. A risk assessment must be undertaken for patients/carers who are at risk of confusion, self-harm or for drugs with an abuse potential.
- Returned to their Trust Pharmacy for safe disposal.

Pharmacy will place the obsolete medicines in their DOOP* bins

It is the responsibility of the registered nurse/midwife or member of pharmacy removing the medicine for destruction to ensure that the appropriate patient verbal consent, has been obtained prior to disposal of medicines.

7.3.2 Return Of Ward Stock

- Unwanted complete or part packs of stock items should be returned to Pharmacy in the pharmacy green return bin or distribution boxes.
- Provided the medicines have been stored in appropriate conditions, pharmacy may be able to re-use them hence reducing waste.
- A review of the stock list quantities should be undertaken if it is necessary to return stock to the Pharmacy.

7.3.3 Medicines Dispensed by the Trust Pharmacy for an Individual Patient

If unwanted these should be returned to Pharmacy where they may be able to re-use the medicine if:

- The medicine has not left the Trust AND
- The medicine has been stored in appropriate conditions
- The medicine is not a single patient use item

7.3.4 Theatre Injectable Drugs (IVs):

All drugs within the theatre environment and excess IV drugs must be disposed of in the DOOP* containers available in each anaesthetic room and Recovery/PACU areas

7.4 Return and disposal of medicines by Healthcare Professionals Providing Care in Patient's Homes

Responsibility for the return and disposal of obsolete patient medicines in the community lies with the patient/ carer in the first instance. Healthcare professionals should advise the patient/ carer to return the obsolete medicines to a community pharmacy.

If the healthcare professional judges that there is a risk to the patient and/or public by leaving the medicines with the patient/care, following a risk assessment, they can take the decision to return the medicines to a community pharmacy on the patient's behalf. Consent from the patient/carer should be sought first.

*Disposal of old Pharmaceuticals