

San Bernardino County Department of Behavioral Health PAP Log Instructions

CCR TITLE 22 §§, 73361, 73313 (f), 73351, and 73353

The Department of Behavioral Health (DBH) is committed to providing necessary medication to the clients we serve. All medications shall be recorded in and recorded out by designated DBH licensed medical staff. Each log form shall contain the name of each medication and the dosage. Medication is received by either the pharmaceutical representative, mail delivery or pick up from the pharmacy. The packing slips shall be checked for accuracy and/or discrepancies and reconciled with the actual medication received and recorded in to the medication log books prior to medication placed in the storage cabinets or refrigerator. Below is an example of how the record is to be filled out.

Example:

Incoming					Outgoing			Total Quantity on Hand
Medication Name	Strength	Date Ordered	Pharmaceutical Company	Printed Name of DBH Medical Staff	Quantity Out	Date Administered	Printed Name of DBH Medical Staff	
Ordering Doctor Name	Quantity In	Date Received	Expiration Date	Signed Name of Medical Staff		Time Administered	Signed Name of Medical Staff	
1	2	3	4	5	6	7	8	9
Abilify	50 mg	8/1/14	Bristol-Myers	John Doe	1 bottle/30	8/14/14	Jane Doe	0
Dr. Doe	1 bottle/30	8/7/14	10/1/15	<i>John Doe</i>		8:00 am	<i>Jane Doe</i>	

Step	Action
1	Enter the medication name on the top line and the ordering Doctor name on the second line.
2	Enter the strength on the top line and the quantity received (i.e. 1 bottle of 30 tablets).
3	Enter the date medication was ordered on the top line and the date it was received on the bottom line.
4	Enter the name of the Pharmaceutical Company on the top line and the expiration date of the meds on the bottom line.
5	Print your name on the top line and sign your name on the bottom line, if you are the person logging in PAP medication.
6	Enter the quantity of medication given to the client.
7	Enter the date medication is administered on the top line and the time administered on the bottom line.
8	Print your name on the top line and sign your name on the bottom line if you are the person who administered/dispensed PAP medication.
9	Enter the quantity of remaining medication.

IMPORTANT: The total in step 10 shall be verified with a physical count of medication left on the shelf. Step 4 minus step 8 should equal the amount left on the shelf and the number in step 10.

NOTE: DISCREPANCIES OR MISSING MEDICATION SHALL BE IMMEDIATELY REPORTED TO THE DBH CLINIC MEDICAL DIRECTOR OR DESIGNEE AND CLINIC SUPERVISOR FOR REQUIRED ACTION