

**San Bernardino County
 Department of Behavioral Health
 RETURN MEDICATION TO PHARMACY LOG**

MHP CONTRACT, EXHIBIT A, ATTACHMENT 1, SECTION 4.L.1

Outgoing								
Date Rtn'd	Amt Being Rtn'd	Client Name	Medication Name & Medication Strength	Lot/Vial Number	Reason for Return	DBH Staff Printed Name Returning	DBH Witness Printed Name	Signature of Pharmacy Courier, if applicable
		Medical Record Number				Signature of DBH Staff Returning	DBH Witness Signature	

San Bernardino County Department of Behavioral Health

RETURN MEDICATION TO PHARMACY LOG INSTRUCTIONS

MHP CONTRACT, EXHIBIT A, ATTACHMENT 1, SECTION 4.L.1

The Department of Behavioral Health (DBH) is committed to adhering to regulations and/or state requirements regarding the storage, maintenance and logging of medication. All medications shall be recorded by authorized medical staff. Below is an example of how the log is to be completed:

Example:

Outgoing								
Date Rtn'd	Amt Being Rtn'd	Client Name	Medication Name & Medication Strength	Lot/Vial Number	Reason for Return	DBH Staff Printed Name Returning	DBH Witness Printed Name	Signature of Pharmacy Courier, if applicable
		Medical Record Number				Signature of DBH Staff Returning	DBH Witness Signature	
07/01/14	1 unit	Donald Doe	Risperdal Consta/25 mg	F12245	Refrigerator not operational	Suzy Que	John Doe	<i>Joe Courier</i>
		1234567				<i>Suzy Que</i>	<i>John Doe</i>	
1	2	3	4	5	6	7	8	9

Step	Action
1	Enter date DBH returned medication
2	Enter the amount of medication being returned
3	Enter the name and medical record number of the client whose medication is being returned
4	Enter the name of the medication and strength of the medication
5	Enter the lot or vial number located on the bottle/box on the log
6	Enter the reason the medication is being returned
7	Write your name on top line and sign your name on the bottom line if you are the person logging out the medication
8	Witness shall print name on top line and sign name on bottom line
9	Obtain the signature of the courier who is picking up the medication, if applicable

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