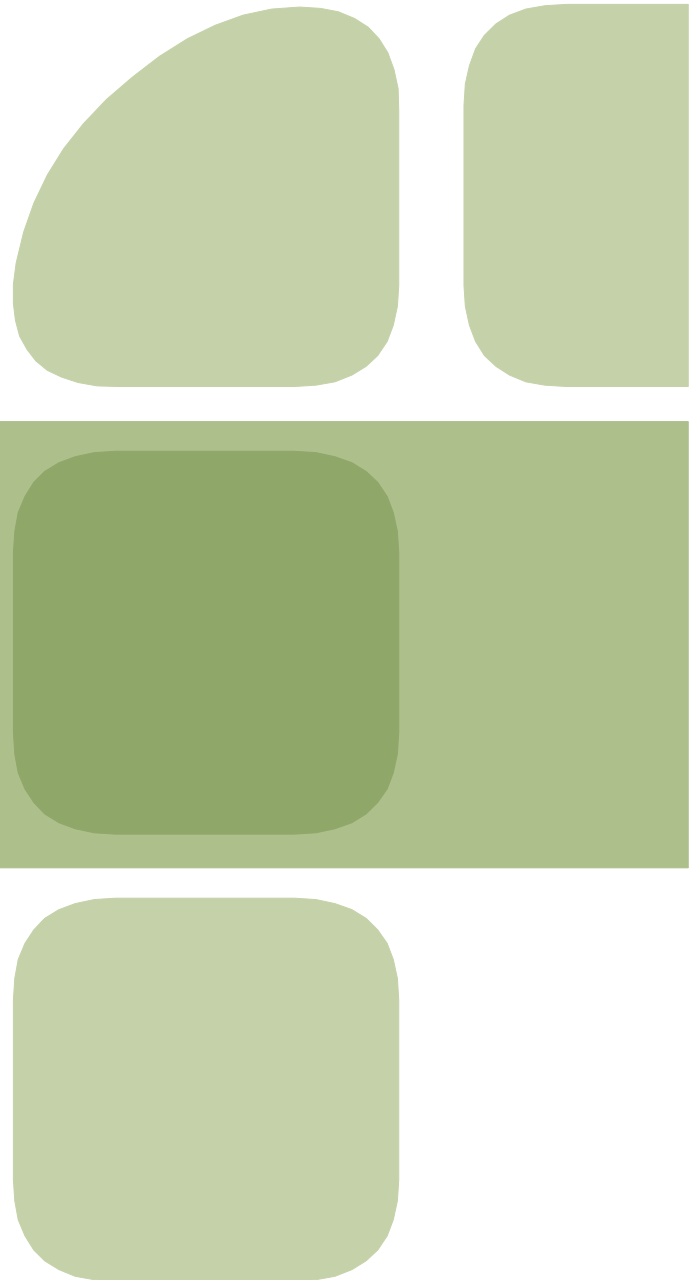




Storage and recording of Restricted Schedule 4 (S4R) medicines





TITLE: STORAGE AND RECORDING OF RESTRICTED SCHEDULE 4 (S4R) MEDICINES

1. BACKGROUND

Legislative requirements for the prescribing, administration, recording and storage of Schedule 4 prescription medicines by authorised persons are outlined in the [Poisons Regulations 1965](#).

Certain Schedule 4 prescription medicines are liable to abuse and may cause dependence. This includes benzodiazepine and other hypnotic sedatives, and opioid or opioid like analgesics such as codeine containing compound analgesics and tramadol.

As S4R medicines may be targeted for unauthorised use or diversion into illicit activities, suitable controls must be in place to prevent theft, unauthorised use or unaccounted losses.

The investigation and reporting of discrepancies in a S4R medicine inventory balances is to comply with the [Reporting of medicine discrepancies in public hospitals and licensed private facilities which provide services to public patients in Western Australia: OD 0377/12](#).

The measurement, recording and reporting of oral liquid S4R medicines is to comply with the [Management of Schedule 8 and Restricted Schedule 4 oral liquid medicines: OD 0492/14](#).

2. POLICY

2.1 RESTRICTED SCHEDULE 4 MEDICINES

The following medicines in all brands, formulations and strengths are to be treated as S4R medicines:

- Bromazepam
- Clobazam
- Clonazepam
- Codeine containing preparations in Schedule 4
- Dextropropoxyphene
- Diazepam
- Lorazepam
- Midazolam
- Nitrazepam
- Oxazepam
- Propofol (in ward and pharmacy areas)*
- Temazepam
- Tramadol
- Triazolam
- Zolpidem
- Zopiclone

*for management of procedural use of propofol refer to [Storage and Recording of Propofol: OD 0529/14](#).

2.2 CLINICAL AREAS

All clinical areas, including wards, emergency departments and theatres are to manage S4R medicines as described in this section.

Ordering

The ordering and transfer of S4R medicines is to be undertaken using a requisition book clearly identified for that purpose, or an electronic ordering system approved by the hospital or Chief Pharmacist.

The receipt of a S4R medicine is to be signed for by two authorised persons. The authorised person ordering the medicine is to be clearly identified. Requisition records are to be kept for two years.

Storage

S4R medicines are to be stored in a separate cupboard or secure storage area apart from other S4 and S8 medicines. The storage cupboard or area is to be kept locked when not in immediate use.

A S4R cupboard is to be securely attached to a wall or floor. Other goods, including keys, cash or documents are not to be kept in this cupboard.

Any S4R medicines brought in by a patient are to be stored in this cupboard or secure storage area.

Access

Only authorised persons are to have access to S4R storage areas. A local policy is to be in place to ensure accountability of all keys or other access devices used.

Where a key is used, the key that provides entry to the S4R cupboard is not to provide access to other S4 or S8 storage areas or safes. A key to a S4R cupboard is not to provide access to another S4R cupboard.

The key is to be kept on the physical person of the nurse in charge, or other authorised person(s) delegated by the nurse in charge. If multiple keys to a S4R cupboard are in use, a key accountability system for issue and return of keys after each shift is to be in place.

Where an electronic access device is used, such as a proximity card, the system must be able to identify each individual authorised person accessing the cupboard or storage area, and keep a record of this access.

Recording

All inward and outward transactions of a S4R medicine are to be recorded in a Register or software approved by the hospital or Chief Pharmacist. Register records are to be kept for two years.

The minimum transaction data to be included in the Register is to consist of date, time, medicine including quantity, patient name for administration, or receiving or supplying area

and order requisition number, name and signature (or electronic equivalent) of authorised person(s).

Issue of a S4R medicine for dose administration to a patient requires one authorised signature in the Register. The receipt of a S4R medicine is to be signed in the Register by two authorised persons. The return or destruction of stock (not including disposal of unused portions of a unit dose) is to be signed in the Register by two authorised persons.

A daily stock inventory of each S4R medicine is to be performed and signed in the Register by two authorised persons.

2.3 EMERGENCY RESUSCITATION

Storage

Any S4R medicine held as part of stock in a clinical area specifically for the purpose of emergency resuscitation, is exempt from the clinical area storage requirements above.

The S4R must be stored in a designated resus box or trolley. The resus box or trolley is to contain the minimum S4R stock required for an emergency. The storage system is to provide clear evidence of tampering or use.

Recording

Emergency resuscitation S4R stock is to be regularly checked. The check is to include a record of date performed and the name of person completing the check.

2.4 PHARMACY

Storage

S4R medicines are to be stored in a separate cupboard or secure storage area apart from other S4 and S8 medicines. The storage cupboard or area is to be kept locked when not in immediate use.

Access

Only authorised persons are to have access to S4R storage areas. A local policy is to be in place to ensure accountability of all keys or other access devices used.

A key to a S4R cupboard or area may not provide access to another S4R or S8 cupboard or area. The key is to be kept on the physical person of the pharmacist, or person delegated by the Chief Pharmacist. If multiple S4R cupboards or multiple keys to a S4R cupboard or storage area are in use, a key accountability system for the issue and return of keys after each day is to be in place.

Where an electronic access device is used, such as a proximity card, the system must be able to identify each individual authorised person accessing the cupboard or storage area, and keep a record of this access.

Recording

All inward and outward transactions of a S4R medicine are to be recorded in a Register or software approved by the hospital or Chief Pharmacist. Register records are to be kept for two years.

The minimum transaction data to be included in the Register is to consist of date, time, medicine including quantity, patient name if dispensed, receiving or supplying area and requisition number, name and signature (or electronic equivalent) of the authorised person.

Issue of a S4R medicine requires the signature of one authorised person in the Register. The return or destruction of stock is to be signed by two authorised persons.

A weekly stock inventory of each S4R medicine is to be performed and signed in the Register by two authorised persons.

3. DEFINITIONS

Schedule 4	Schedule 4 (prescription medicines) as defined in the Poisons Act 1964.
Restricted Schedule 4 medicine	Medicines listed in OD 0528/14 subject to additional storage and recording requirements within public hospitals.
Authorised person	Persons permitted to obtain, possess or use a Schedule 4 medicine. This includes medical practitioners, nurse practitioners, registered nurses, registered midwives, medicines competent enrolled nurses, pharmacists.
Inventory	Balance of stocks of medicine stored.
Register	Approved written or electronic record of transactions and stock balances.
Discrepancy	Any difference in balance between physical stock and Register stock.
Proximity Card	Electronic identity card issued by the hospital to employees, that provides selective staff access to hospital areas.
Resus Box / Trolley	Vessel or mobile cart used in to store equipment and medicines for use in medical emergencies.

4. ROLES AND RESPONSIBILITIES

All health professionals handling medicines in WA Health and authorised under the Poisons Legislation to obtain or possess Schedule 4 medicines are required to adhere to this Policy on *Storage and recording of Restricted Schedule 4 (S4R) medicines*.

5. COMPLIANCE

Compliance with this Policy on *Storage and recording of Restricted Schedule 4 (S4R) medicines* is a requirement for all authorised health professionals. Those who fail to comply with this policy may face disciplinary action relating to ethical standards and misconduct.

6. EVALUATION

Monitoring of compliance with this document is to be carried out by Poisons Permit Holders, nominated Medicine Incident Coordinators, authorised persons in control of a S4R safe/cupboard, and persons authorised to possess medicines under the Poisons Act 1964. Monitoring of compliance is to occur periodically.

7. REFERENCES

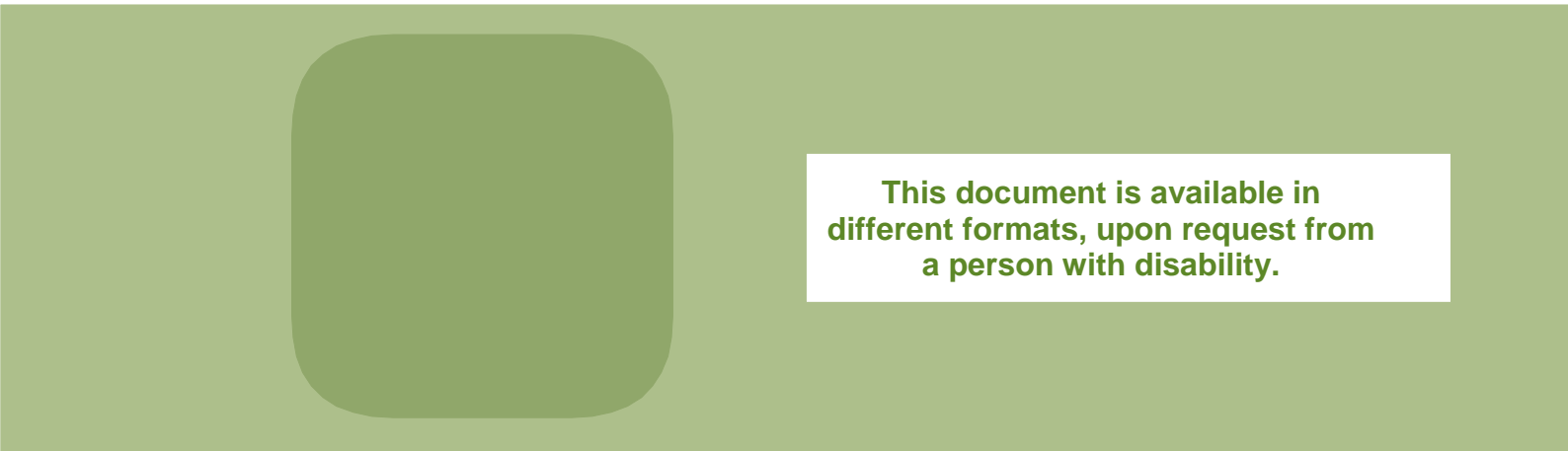
[Poisons Regulations 1965.](#)

8. RELATED DOCUMENTS

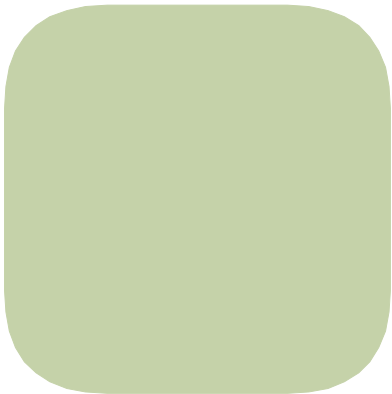
[Storage and Recording of Propofol: OD 0529/14.](#)

[Reporting of medicine discrepancies in public hospitals and licenced private facilities which provide services to public patients in Western Australia: OD 0377/12.](#)

[Management of Schedule 8 and Restricted Schedule 4 oral liquid medicines OD: 0492/14.](#)



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