

Stock Protocol

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Stock Protocol

I. Purpose

The purpose of this protocol is to describe Oklahoma Department of Correction’s (ODOC) process for ensuring proper control of, and accountability for, stock medications used by its inmates. This protocol applies only to non-scheduled stock medications, which are not subject to the stringent controlled-substance regulations set forth by the Oklahoma Bureau of Narcotics and Dangerous Drugs and/or federal Drug Enforcement Administration.

II. Definitions

A. Stock Medication

Medications, including both prescription-only (legend drugs) and over-the-counter drugs (OTCs), that have been approved by ODOC’s Pharmacy and Therapeutics Committee for either the purpose of initiating an inmate’s drug therapy or maintaining continuity of care until a patient-specific prescription is received from the contract pharmacy services provider (pharmacy vendor). The list of approved stock medications is reviewed and authorized annually by the Chief Medical Officer (CMO) or his/her designee.

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B. Administering Medication

Medication administration is defined as the direct application of a drug, whether by ingestion, application, inhalation or any other means, to the body of a patient. Administration is accomplished on a dose-by-dose (single dose) basis by qualified health care professionals (QHCPs) to a patient at the time the dosage is required (for immediate application). Direct administration is not subject to the same packaging, labeling or record-keeping requirements as dispensing; however, it is subject to mandatory documentation as described in [OP-140143](#), entitled "Nursing Service".

C. Dispensing Medication

Any act other than the direct and immediate administration of a single dose of the prescribed drug can be considered dispensing. Such acts of dispensing include labeling (i.e., altering existing or affixing a prescription label on a medication), transferring more than one dosage unit (quantity prescribed for a single dose) from one container to another, and issuing doses of the prescribed drug for future administration.

III. Prescriptive and Dispensing Authority; Accountability; and Control

ODOC's CMO, or his/her designee (facility health care provider), is responsible for ensuring prescriptive control and accountability for stock medications. All dispensing activities will be performed in compliance with all rules and regulations as promulgated by: The Oklahoma State Board of Pharmacy, The Oklahoma Pharmacy Act, The Oklahoma Nursing Practice Act, and any regulatory/licensing agencies governing the practice of physician assistants, advanced nurse practitioners, and other health care professionals, and ODOC's policy and procedure, including [MSRM 140130-02](#), entitled "Stock Protocol."

A. Dispensing Medication

1. Authorized Practitioners

- a. In Oklahoma, dispensing privileges are limited to practitioners specifically granted such authority by the Oklahoma Pharmacy Act, which lists all practitioner types whose scope of practice includes dispensing.

Such practitioners allowed to dispense (authorized dispensers) are limited to pharmacists, physicians (allopathic, osteopathic, and podiatric), dentists, veterinarians, and optometrists.

- b. Non-Authorized Practitioners. Practitioner types not included on the Act's authorized dispenser list do not have dispensing privileges. Because neither physician assistants nor advanced nurse practitioners are included on the list, neither practitioner type may lawfully dispense medication.

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2. Exclusive Privileges and Responsibilities

- a. Only authorized dispensers can lawfully perform any act(s) of dispensing, which include(s):
 - 1) labeling medications (affix patient name, directions, drug info, etc.),
 - 2) altering labeling information,
 - 3) selecting and verifying product;
 - 4) dispensing stock medication (convert stock drug to patient-specific)
- b. Labeling must be in conformance with all labeling criteria mandated by state and federal labeling laws/rules/regulations.
- c. No dispensing act, function, or task can be delegated to another, even if performed on behalf of and/or at the request of an authorized dispenser (i.e., doctors must physically affix each labeling requirement to the package themselves, not have another affix some/all labeling on their behalf).

B. Issuing Medication

Under the authority of the health care provider (e.g., verbal order or nursing protocol), QHCPs may issue OTC medications directly to the inmate for self-administration.

C. Administering Medication

1. Under the authority of the health care provider, QHCPs may use pill line to administer ONE dose of an inmate's prescribed medication from stock, in accordance with the date(s) and time(s) specified in the order, until the patient-specific prescription is received from pharmacy vendor.
2. QHCP administering medication will comply with all provisions, criteria, and constraints delineated in [OP-140143](#), entitled "Nursing Service".

D. Documentation

All medications issued, administered, or dispensed from stock must have a corresponding health care provider's order or approved nursing protocol documented in the electronic health record. Quarterly performance improvement audits will be done by the pharmacy vendor to verify compliance. Each health care provider is responsible for strict adherence to [OP-140143](#), entitled "Nursing Service," which requires chart documentation for medications issued, dispensed, and/or administered from stock.

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IV. Inventory Accountability and Control

The facility health services administrator (CHSA) is responsible for the inventory control and accountability of stock medications by determining and re-evaluating the stock level of each drug maintained in medical services.

A. Ordering

Non-controlled stock medications are ordered using the “Stock Order Form” ([DOC 140130A](#)) and the “Stock Practitioner Cards” ([DOC 140130B](#)).

B. Inventory and Accountability

The facility CHSA is responsible for determining the appropriateness of each drug maintained in stock, inventory with regard to usage, packaging, and quantity. A monthly inventory of stock drugs will be conducted by the facility CHSA using the “Monthly Stock Inventory Form” ([DOC-140130C](#)). The completed inventory will be kept on file by the CHSA.

C. Assessment and Reporting

On a quarterly basis, the Pharmacy and Therapeutics Committee will assess the stock prescribing patterns of facility health care providers. The evaluation will include the name and number of doses of each medication issued/dispensed, the appropriateness of stock usage, and the date/time of issuance/dispensing. Prescriptive outliers must be reported to the CMO or his/her designee.

V. References

OP-140130, entitled “Pharmacy Operations”

OP-140143, entitled “Nursing Service”

Oklahoma Pharmacy Practice Act

Oklahoma Nursing Practice Act

VI. Action

The medical services administrator will be responsible for compliance with this procedure.

The Chief Medical Officer, Health Services will be responsible for the annual review and revisions.

Any exceptions to this procedure will require prior written approval from the director. This procedure will be effective as indicated.

Replaced: Medical Services Resource Manual 140130-02 entitled, "Starter Stock Protocol" dated June 18, 2018.

Distribution: Medical Services Resource Manual

Referenced Forms	Title	Location
DOC 140130A	"Stock Order Form"	OP 140130
DOC 140130B	"DOC Practitioner Cards Form"	OP 140130
DOC-140130C	"Monthly Stock Inventory Form"	OP 140130