

**SECTION: Personnel****POLICY AND PROCEDURE: Personnel  
Training: Dispensing Sample Drugs**

Approved date: \_\_\_\_\_

Approved by: \_\_\_\_\_

Effective date: \_\_\_\_\_

Revised date: \_\_\_\_\_

Revised date: \_\_\_\_\_

**POLICY:**

To ensure that the dispensing of sample drugs/medications follow state and federal pharmacy regulations as processes that do not screen for drug interactions, duplicate therapy, allergies, or contraindications with sample drugs/medications can pose patient safety risks.

**PROCEDURE:****ACCEPTING/STORING SAMPLE DRUGS**

- Store all sample medications in an area inaccessible to unauthorized persons
- Separate the medications by route of administration
  - Reserve storage shelves based upon route of administration (oral medications grouped together and topical medications grouped together)
- Organize samples by drug or drug group with labels facing out
- At the time samples are received, visibly note expiry date on the drug/medication packaging and document sample received on the SAMPLE MEDICATION LOG:
  - date received
  - quantity received
  - expiry date
  - lot number
- Rotate stock, so that the oldest medications are dispensed first
- Store medications according to the manufacturer's instructions
- Check medications monthly for outdates, deterioration, and appropriate location and finalize documentation on the SAMPLE MEDICATION LOG

**DISPENSING SAMPLE DRUGS**

- Only physicians with prescribing authority may dispense medications
- The provider should discuss the administration, storage, potential interactions, and side effects of the medication with the patient
- When retrieving sample medications, the authorized personnel should:
  - Confirm the expiration date of the medication
  - Double-check the name and second identifier (i.e., date of birth) of patient receiving the sample medication
  - Verify the patient's allergies to medications
  - Log the distribution of the drug/medication on the SAMPLE MEDICATION LOG
    - date dispensed
    - patient identifier (patient name and medical record#)
    - # of boxes/bottles and doses recommended to patient
    - Lot number
    - Staff/dispenser initial
    - Physician's initial

# Sample Medication Log

Drug Name children's motrin Strength Ibuprofen 100mg / 5ml Drug Company J&J Consumer Health  
 Amount Remaining From Previous Month \_\_\_\_\_ Month and Year Aug-22

Date Received	Quantity Received	Expiration Date	Lot Number	Date Out	MR#	Patient's Name	Boxes/ Bottles and Doses	Lot Number	Staff/ Dispenser Initial	Physician's Initial
	2	7/31/23	KHB2B00	8/11/22	<del>          </del>	<del>                    </del>	1Box/5ml	KHB2B00	<del>      </del>	<del>      </del>
	3	11/30/23	LAB0700							
Total Received			5	Total Dispensed/Expired						

Amount Remaining from Previous Month 0  
 PLUS Total Qty. rec'd during Month 5  
 Subtotal 5  
 LESS Total Disp./Exp.During Month 0  
 Total and of Month Inventory 5

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