

Controlled Substance Wastage Audit **Readiness Checklist**



Check ☐ Yes/No as applicable

For Pharmacy Staff Use

Date: _____

Prepared by: _____

Policies and Procedures

- | | |
|--------------------------|---|
| ☐ | Written policy exists addressing controlled substance controls from receipt to administration, including wastage , security, disposition, and return to storage. |
| ☐ | Policy requires witnessing (second person or electronic) for partial/unused dose wastage. |
| ☐ | Policy aligns with DEA non-retrievable destruction standard (permanently unusable/ irrecoverable). |
| ☐ | Policy covers hazardous controlled substances (if applicable) per EPA/RCRA rules. |
| ☐ | Policy is current, approved, and accessible to all staff. |

Staff Training and Competency

- | | |
|--------------------------|---|
| ☐ | All relevant staff trained on wastage procedures (documented in personnel files). |
| ☐ | Competency assessments completed annually or as required. |
| ☐ | Staff can verbally explain wastage process during interviews/observations. |

Wastage Processes and Documentation

- | | |
|--------------------------|--|
| ☐ | Partial doses wasted with witness (two signatures or electronic verification). |
| ☐ | Wastage documented in real-time (e.g., ADC logs, electronic health record, or wastage log) including drug, amount wasted, reason, and witnesses. |
| ☐ | Wasted substances rendered non-retrievable (e.g., deactivation kits, secure disposal systems). |
| ☐ | No recoverable amounts left in syringes/vials/ampules before disposal. |

Records and Audits

- | | |
|--------------------------|--|
| ☐ | Accurate inventories (biennial and ongoing) with no unresolved discrepancies. |
| ☐ | Recent internal audits of wastage records show timely resolution of variances. |
| ☐ | Theft/loss reports (DEA Form 106) filed promptly if needed. |
| ☐ | Records retained for at least 2 years (DEA requirement). |

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Storage and Security

☐ Controlled substances stored securely (locked, limited access).

☐ Waste containers are secure and prevent recovery/diversion.

Diversion Monitoring

☐ Proactive monitoring program in place (e.g., discrepancy reports, peer comparisons).

☐ No outstanding unresolved diversion concerns.

Observation Readiness

☐ Staff prepared for live demonstration of wastage process.

☐ Supplies available (witnesses, deactivation methods, documentation tools).

An educational audit-readiness resource developed by **Frank Breve, PharmD, Opioid Consulting Education Solutions**.

This checklist is intended for educational guidance only and should not be relied upon as a substitute for professional legal, regulatory, or clinical judgment.