Title: MANAGEMENT OF MEDICATIONS/MEDICAL SUPPLIES  
Policy Number: EP 3.4  

Policy Statement:  
It is the policy of Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) that all medications and supplies with expiration dates will be checked at least monthly for expiration dates and discarded appropriately.

Scope and Distribution:  
This policy applies to all Texas Tech Physicians of El Paso ambulatory clinics.

Procedure:  

1. Management of Medication/Supplies  
   a. All stock supplies and medications will be checked by clinical departments monthly for expiration dates and discarded appropriately.  
   b. All expired medications will be discarded as per policy OP 75.17.  
   c. Each department will be accountable for expired supplies or medications in their clinics.  
   d. Whenever possible, non-latex supplies will be purchased and utilized in clinics.

2. Management of Abusable Supplies  
   a. Prescription pads will be kept secured and must not be visible to passing patients. Printers containing prescription paper must be secured to prevent easy access to the paper trays.  
   b. All providers will sign out for each prescription pad.  
   c. All needles and syringes must be stored in non-patient care areas and must not be visible to passing patients. These items will be kept in a locked cabinet or a locked medical supply storage room.  
   d. Used needles and syringes will be disposed of in accordance with policy EP 7.17.  
   e. All medications (including pills, oral suspension liquids, creams/ointments, eye drops, medication vials, vaccines, or any item needing to be obtained from a pharmacy) will be kept in a locked cabinet or locked medication room.  
   f. Chemicals and solutions must be stored in a locked cabinet or locked room.  
   g. It is the responsibility of each clinical department to maintain current and up-to-date lists of employees with access to secured supplies/medications.  
      i. A current list of employees with keys to locked cabinets/rooms must be kept by clinical departments.  
      ii. Rooms with coded locks will have the codes changed periodically.
3. Management of Oxygen Tanks
   a. Clinics should utilize “E” tank cylinders for their oxygen needs.
   b. Cylinders should be on a cart or in a storage rack. Cylinders should never be freestanding at any time.
   c. Cylinders must be tagged with an approved tag noting whether the tank is empty or full.
   d. Empty tanks must be stored separately from full tanks or tanks available to be used.
   e. Tanks will be considered empty once they reach 750 PSI. Tanks with a level less than 750 PSI will be taken out of rotation for use and labeled as empty.
   f. Tanks will be checked by the clinical departments on a monthly basis for current oxygen levels.

4. Management of Sterile Supplies
   a. All clean and sterile supplies should be stored at least six inches from the floor in a clean storage area.
   b. Storage shall be maintained a minimum of 18 inches below sprinkler heads.
   c. Open rack shelving will have a solid bottom to avoid contamination from floor mopping.
   d. Warehouse/transport boxes must not be kept in clean or patient care areas. These boxes must be discarded immediately after placing items in supply cabinets and supply rooms.
   e. If packaging of clean or sterile supplies become damaged, torn, soiled, or wet, items inside the packaged must be discarded.

5. Management of Linen
   a. Clean and dirty linen will always be stored separately to avoid contamination of clean linen.
   b. All clean linen should be stored covered and at least six inches from the floor.
   c. Soiled linen should be placed in hampers immediately after use.
   d. Heavily soiled or saturated linen should be individually red bagged in the exam room prior to placing in the hamper.
   e. Soiled linen bags should be carefully removed when full to avoid possible exposure via wet linen or inappropriately disposed sharps.