REQUIRED

Controlled Substance Disposal Record

Service Provider: **MAP Registered Site:** **MAP MCSR No.:**

Item #:		Date:	
Individual's Name:		Date Last Filled:	
Medication:		Strength:	
Amount Disposed:	Take Back ☐	Reason:	
Countable Controlled Substance Book Number:	Page Number:	Rx Number:	
		Pharmacy:	
Signatures: Staff:		Site Supervisor:	

Item #:		Date:	
Individual's Name:		Date Last Filled:	
Medication:		Strength:	
Amount Disposed:	Take Back ☐	Reason:	
Countable Controlled Substance Book Number:	Page Number:	Rx Number:	
		Pharmacy:	
Signatures: Staff:		Site Supervisor:	

Item #:		Date:	
Individual's Name:		Date Last Filled:	
Medication:		Strength:	
Amount Disposed:	Take Back ☐	Reason:	
Countable Controlled Substance Book Number:	Page Number:	Rx Number:	
		Pharmacy:	
Signatures: Staff:		Site Supervisor:	

Item #:		Date:	
Individual's Name:		Date Last Filled:	
Medication:		Strength:	
Amount Disposed:	Take Back ☐	Reason:	
Countable Controlled Substance Book Number:	Page Number:	Rx Number:	
		Pharmacy:	
Signatures: Staff:		Site Supervisor:	

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Amount Disposed:	Take Back ☐	Reason:	
Countable Controlled Substance Book Number:	Page Number:	Rx Number:	
		Pharmacy:	
Signatures: Staff:		Site Supervisor:	

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Medication:		Strength:	
Amount Disposed:	Take Back ☐	Reason:	
Countable Controlled Substance Book Number:	Page Number:	Rx Number:	
		Pharmacy:	
Signatures: Staff:		Site Supervisor:	

All expired or discontinued medications must be rendered unusable per MAP Policy Section 15. According to Regulations at 105 CMR 700.003(E)(3)(c): Disposal occurs in the presence of at least two witnesses and in accordance with any policies at the Department of Public Health (DPH). DPH Policy requires disposal to occur in the presence of two Certified and/or licensed staff of which one of the two is supervisory staff (i.e., Site Supervisor). If the Site Supervisor is unavailable when an individual refuses a prepared medication, or a pill/tablet/capsule, etc. is inadvertently dropped, then two Certified and/or licensed staff may render these medications unusable in accordance with acceptable MAP disposal practices. Disposal of all prescription medications in Schedule II-VI shall be documented on the DPH approved *Disposal Form*. This *Disposal Form* may also be used for OTC medications and Dietary Supplements. Each disposal page number should be updated sequentially (e.g., page 1, page 2, etc.). Item numbers are to be separate and unique and may not be repeated. When turning to the next page, the item number should also continue to be updated sequentially (e.g., item 7, item 8, item 9, etc.).

Failure to maintain complete and accurate records of medication disposal could result in potential Drug Diversions and revocation of the MAP Registered site's MCSR.

06/28/23

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