Form K1 - Hospital: Disposal of Controlled Medicines Book



This tool was prepared by Technical Working Group members from Federal Ministry of Health (FMoH), Pharmacists Council of Nigeria (PCN) and National Agency for Food and Drug Administration and Control (NAFDAC) with funding from the European Union (EU), under the framework of the Project "Response to Drugs and Related Organized Crime in Nigeria, implemented by the United Nations Office on Drugs and Crime (UNODC). This booklet does not reflect the views of either the EU or UNODC.







EUROPEAN UNION

IMPROVED AND STANDARDIZED RECORD KEEPING AND INVENTORY MANAGEMENT TOOLS FOR CONTROLLED MEDICINES

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Similarly, there exist National Guidelines for Quantification of Narcotic Medicines and National Guidelines on Estimation of Psychotropic Substances and Precursors. These two (02) Guidelines aim to standardize quantification practices and also assure realistic and evidence-based estimates of controlled medicines for medical and scientific uses in Nigeria.

However, findings from practice experiences, field studies and surveys have shown that most of the record keeping and inventory management tools were deficient to provide adequate and reliable data for quantification and estimation processes.

Over the years, issues around poor inventory management, defective/inefficient record keeping tools, improper completion of record keeping tools, non-availability of inventory management tools, scaring nomenclature of inventory management tools, et cetera, abound. All these have been associated with shortages, overages, expiration and leakages of controlled medicines, waste of financial resources and poor quality of care to patients who need the controlled medicines.

Good record/inventory management systems and practices are critical to ensure that adequate supply of controlled medicines are available and accessible for medical and scientific uses while preventing diversion, abuse and trafficking.

It is therefore imperative to improve and standardize all existing record keeping and inventory management tools used in the documentation and monitoring of controlled medicines.

The management of these improved and standardized record keeping and inventory management tools will assure data quality and integrity, ascertain suitability of the tools in practice, and ensure accountability in the distribution and consumption of controlled medicines within the value chain.

This will ultimately enhance legible, accurate, up-to-date and timely records that will be useful for planning, quantification, procurement, distribution and use of controlled medicines in line with the provisions of the Poisons and Pharmacy Act Cap 535, LFN, 1990, which mandates that records of disposal of controlled medicines shall be kept appropriately in Disposal of Poisons Book (Form K).

Other statutory provisions relating to good record keeping and inventory management of controlled medicines are enshrined in the National Agency for Food and Drug Administration and Control (NAFDAC), Decree No. 15 of 1993 (Now Cap N1, LFN, 2004) and Food and Drug Act, Cap 150, LFN, 1990 (Now Cap F32, LFN 2004), Dangerous Drug Act, Cap 91 of 1990 as well as the National Drug Policy, 2021.

This statutory inventory and record keeping tool is expected to be deployed and put to use contemporaneously in Primary, Secondary and Tertiary Hospital Pharmacies and Wards.

Form K1-Hospital: Disposal of Controlled Medicines Book

	Name of Facility:								
	Location Address:								
ľ	Name of Medicine/Strength/	Dosage Form:							
Date	Received from/Name of Patient		Patient Hospital No./Phone No.		Quantity Administered / Dispensed	Balance	Name & Reg. No. of Prescriber	Administered/Dispensed by (Name & Reg, No.)	Receiver's Signature
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Form K2 – Community Pharmacy: Disposal of Controlled Medicines Book



This tool was prepared by Technical Working Group members from Federal Ministry of Health (FMoH), Pharmacists Council of Nigeria (PCN) and National Agency for Food and Drug Administration and Control (NAFDAC) with funding from the European Union (EU), under the framework of the Project "Response to Drugs and Related Organized Crime in Nigeria, implemented by the United Nations Office on Drugs and Crime (UNODC). This booklet does not reflect the views of either the EU or UNODC.







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The management of these improved and standardized record keeping and inventory management tools will assure data quality and integrity, ascertain suitability of the tools in practice, and ensure accountability in the distribution and consumption of controlled medicines within the value chain.

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This statutory inventory and record keeping tool is expected to be deployed and put to use contemporaneously in Community Pharmacies.

Form K2-Community Pharmacy: Disposal of Controlled Medicines Book

	Name of Facility:								
	Location Address:								
	Name of Medicine/Streng	th/Dosage Form:	Ra						
Date	Received from/Name of Patient	Patient Address	Patient Phone No.	Quantity Received	Quantity Dispensed	Balance I	Name & Reg. No. of Prescriber	Dispensed by (Name & Reg. No. of Pharmacist)	Receiver's Signature
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							1		
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		4	muy 3	1	AMM.	-83	R		
—	+		<u> </u>		+	1	+	+	

Form K3 - Distributors and Wholesalers: Disposal of Controlled Medicines Book



This tool was prepared by Technical Working Group members from Federal Ministry of Health (FMoH), Pharmacists Council of Nigeria (PCN) and National Agency for Food and Drug Administration and Control (NAFDAC) with funding from the European Union (EU), under the framework of the Project "Response to Drugs and Related Organized Crime in Nigeria, implemented by the United Nations Office on Drugs and Crime (UNODC). This booklet does not reflect the views of either the EU or UNODC.





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This statutory inventory and record keeping tool is expected to be deployed and put to use contemporaneously by Distributors (Federal Central Medical Stores, Zonal Narcotics Stores, State Drug and Medical Consumable Agencies et cetera) and Wholesale Pharmacies.

Form K3 - Distributors and Wholesalers: Disposal of Controlled Medicines Book

	Name	e of Facility:											_
	Locat	tion Address of Facility:											
	Type	of Facility:			4								
	Name	e of Medicine/Strength/Dosag	ge Form:		100			M					
	Unit	of issue:		5	71111	MAN Y	MIN		~	STREAM TO THE			
ate	SRV/SIV/ Inv. No.	Received From/Issued to (Name & Location Address)		Expiry Date	Received	Quantity Issued/ Sold		<mark>Adju</mark> st (kg)	ments	Stock Balance	Name & Reg. No. of Pharmacist	Signature of Pharmacis	Remarks
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			7	7						15			
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Form K4 - Local Manufacturers: Disposal of Controlled Substances Book



This tool was prepared by Technical Working Group members from Federal Ministry of Health (FMoH), Pharmacists Council of Nigeria (PCN) and National Agency for Food and Drug Administration and Control (NAFDAC) with funding from the European Union (EU), under the framework of the Project "Response to Drugs and Related Organized Crime in Nigeria, implemented by the United Nations Office on Drugs and Crime (UNODC). This booklet does not reflect the views of either the EU or UNODC.







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This statutory inventory and record keeping tool is expected to be deployed and put to use contemporaneously by local Manufacturers only for entries of disposal/use of controlled substances (API).

Form K4 – Local Manufacturers: Disposal of Controlled Substances Book

Name and address of Local	Manufacturer:		
Name of Active Pharmaceu	atical Ingredient (API):		
Batch No:	Manufacturing Date:	Expiry Date:	
Country of Origin:	CAR MININA	<u> </u>	
Quantity imported (kg):		N 6 B	

Date	Quantity Used per	Purpose		Date of	Date of		Adjust (kg)	ments			of Supt.	Remarks
	Batch (kg)			finished product	finished product		+ve	-ve		(h)	Pharmacist	
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Form K5 - Importers and Local Manufacturers: Disposal of Controlled Medicines Book



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This statutory inventory and record keeping tool is expected to be deployed and put to use contemporaneously by local Manufacturers and Importers for entries tracking disposal of finished Controlled products.

Form K5 – Importers and Local Manufacturers: Disposal of Controlled Medicines Book

Name of Medicine/Strength/Dosage Form: Brand name:	1	Name and	address o	i Importer	/Local Ma	anufactu	rer:		10. 7							
Country of Origin: Quantity Quantity Quantity Batch No. Manufac. Expiry Quantity Quantity Loss Adjustments Balance Balance Name & Reg. No. of Supt. Signature Of Supt. Signature Of Supt. Country Cou	ľ	Name of I	Medicine/S	trength/Do	osage Fori	m:	7	31			À					
Quantity Quantity Batch No. Manufac. Expiry Quantity Loss Adjustments Balance Balance Name & Reg. No. of Supt. Signature Grack Sold Sol	I	Brand na	me:				7//	m	WYK	M	M	_	Un	it of Issue:		
Imported/ Imported/ Manufac. Date Date Sold Sold (kg) (kg) (Kg) (Pack) (Pack) Pharmacist of Supt. Pharmacist Pharmacist	(Country (of Origin: _		-	K.		TDV	WW.		M	_				
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Pharmacy Schedule I and Related Narcotics Records Book



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This statutory inventory and record keeping tool is expected to be deployed and put to use contemporaneously by bulk stores in Secondary and Tertiary Hospitals.

Pharmacy Schedule I and Related Narcotics Records Book

		acility:address:		A						_
		ledicine/Strength/Dosage For								
	Unit of Issu	ue:	The state of the s			AVVIII	75/1			
te	SRV/SIV/ Inv. No.	Received From/Issued To	Quantity Received	Quantity Issued	Balance	Batch No.		Name & Reg. No. of Pharmacist	Signature of Pharmacist	
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Schedule I and Related Narcotics Order Book



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This statutory inventory and record keeping tool is expected to be deployed and put to use contemporaneously in Community Pharmacies, Wholesale Pharmacies, Primary, Secondary and Tertiary Hospital Pharmacies and Wards.

FEDERAL MINISTRY OF HEALTH

Schedule I and Related Narcotics Order Book

'N	Name and Dosage Form of Medicines	Strength	Quantity Required	Quantity Supplied	Batch No.	Expiry Date
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				7		
	4611 5				1011	
		7			J) ///	
) /					
deı	red by (Name / Signature of Unit Head and	Date):	and a			
nnl	ied by (Name / Signature of Pharmacist and	d Data):				

Original to be retained in the Issuing Pharmacy

Bin Card for Controlled Substances/Medicines

imum Stock:				Quantity Received	I Winnill		Adjus	tments	Stock Balance	Name & Signature	
	om/Issued to	Batch No.			N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Losses	6			Name & Signature	Remarks
			J.				+ve	-ve	X		
		Y D	F			1			X		
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DISCLAIMER

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