

## **Introduction**

All licensed providers are subject to DHHS rules pertaining to the destruction of prescription medications and over the counter drugs. For prescription medications other than schedule II through V drugs, the long time practice of flushing medications into the sewer or septic system conflicts with statutory requirements administered by the Maine Department of Environmental Protection (DEP).

The DHHS and the DEP are working together to find ways for residential long term care and treatment providers to be in compliance with DEP statutes. They consider the medications in these facilities to belong to the residents and thus facilities are eligible to participate in these programs. Law enforcement take back programs and mail back programs are becoming more available.

This document will provide information on frequently asked questions about the drug take back program.

**Question:** The rules require that medications be flushed. How can we participate in this program if the DHHS rules prohibits it?

**Answer:** DHHS is waiting the rules which require the medications to be flushed because they conflict with the DEP statutes. The DHHS waiver authority will be in place until acceptable alternatives are identified and put into place.

**Question:** What unused drugs can we provide to law enforcement?

**Answer:** On April 30, 2011, participating law enforcement officials will “take back” all unwanted or unused medications. This includes all classes of drugs, including Schedule II through V drugs prescriptions and over the counter medications of any kind.

**Question:** How will law enforcement know where we are?

**Answer:** A list of all residential long term care and treatment providers and their addresses was sent to DEP and the Department of Justice to share with local law enforcement agencies.

**Question:** Is there a charge to facilities to participate?

**Answer:** The program is free. Participating law enforcement will pick up medications at the facility instead of having the staff deliver the drugs to law enforcement.

**Question:** Will the medications be picked up in their containers or in bulk?

**Answer:** Either method will be acceptable. If the containers are also disposed of, please black out any personally identifying information, such as the resident’s name.

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**Question:** Will the facility have to provide the box or will law enforcement bring a container?

**Answer:** Facilities may prepare their own boxes for the program. The boxes should not exceed 20" x 16" x 16". A standard box that photocopy paper is sold in may be just right. Keep unused medications, as usual, in a secure, double-locked area apart from all other drugs and do not place them in the box until the day of pick up. A nurse and pharmacist may oversee the placement of medications in the box, seal the box with tape and sign their names along with the date/time over the sealing tape. The law enforcement officer can then provide a receipt for just the box and make the transition timely. If you do not have a nurse on staff, in the case of other residential programs, you may have a member of management and the pharmacist perform this task. As a last resort, the law enforcement officer may be willing to seal the box and have you sign your name over the sealing tape.

**Question:** How will DHHS know what we have disposed of?

**Answer:** Providers must keep an inventory of the drugs being disposed of as they normally would, and indicate what was provided to law enforcement. Inventory forms for scheduled and non-scheduled drugs will help standardize this process and help the state quantify the amount of unused medications that otherwise might flow into the environment.

Law enforcement will initial your copy of the inventory as evidence that you have turned the inventory over to them. Please use the facility identification form on the website as well as a copy of your internal inventory forms (initialed by law enforcement), with the names of patients blacked out, and affix it to the box/envelope. If there is any Schedule II through V drugs in the box/envelope, you must tape a copy of the bound book inventory, initialed by the law enforcement officer, to the box/envelope, after blacking out personally identifying information. The facility identification form and internal inventory forms will be removed from the box/envelope by a DEA agent at the time of destruction. This will provide a chain of custody and protect the facility.

**Question:** What do we do after this drug take back program? Can we continue to flush medications or do we incinerate them ourselves?

**Answer:** Do not flush or incinerate medications yourself. DEP laws do not allow this. Store the medications for the additional two take back programs that will take place over the next year. Federal rules are being reviewed to determine whether there are other ways to dispose of controlled substances, such as mail back programs or other disposal programs. The DEP is speaking with vendors about their capacity to provide disposal options. This is not the same process as facilities may use for disposing of hazardous medical wastes. Please continue to watch this website for updates.

**Question:** Will they take syringes and liquid medications?

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**Answer:** Liquid medications can be included in the take back program. Please keep it in a container so it will not spill. The only syringes that may be placed in the take back program are syringes that have left over medication in them. The **MUST** be capped. All other used or unused syringes must be disposed of as hazardous waste.

**Question:** Can we add over the counter medications in the take back boxes.

**Answer:** Yes, any gels, lotions or other over the counter medications may be returned.

Please contact [catherine.cobb@maine.gov](mailto:catherine.cobb@maine.gov) if you have any questions. Ann E. Pistell at [anne.e.pistell@maine.gov](mailto:anne.e.pistell@maine.gov) is my counterpart at DEP working on this program.