

INTERNAL CONTROLS QUESTIONNAIRE

PHARMACY

1. NMC/MTF/HOSPITAL/CLINIC NAME

2. Pharmacy Location

QUESTIONNAIRE

PART I - Pharmacy

a. Control and Accountability by Pharmacy Personnel

1. When not in use, are bulk (stock) controlled medications (III-V) stored in an appropriate safe or locked storage? (4 day working stock may be distributed/shelved with other non-scheduled drugs) YES NO

2. Are Schedule II controlled substances storage spaces locked, except when access is required? YES NO

3. Are Schedule II controlled substances used by the pharmacy for the manufacture of stock preparations accounted for by a prescription or appropriate compounding form signed by the designated person per local standard operating procedures? YES NO

4. Does the outpatient dispensing branch maintain a working quantity of controlled substances in a breakout locker or other appropriately locked storage? YES NO

5. Is an inventory of the breakout locker items completed and documented with each change of shift? (Unless continuously documented via automation used for storage.) YES NO

6. Are prescriptions of Schedule II items filed separately from Schedules III-V? YES NO

7. Are separate narcotics perpetual forms (NAVMED 6710/5, Perpetual Inventory of Narcotics Alcohol and Controlled Drugs) maintained for each Schedule II item unless retrievable in a report from automation that continuously tracks medication inventory? YES NO

b. Issue of Controlled Substances from the Pharmacy to Branch Health Clinics, Wards, or Clinics

1. Are discrepancy reports sent per local instruction to cognizant department head/director/charge nurse for institutions that have automated dispensing machines (ADMs)? (i.e. Pyxis, Omnicell) YES NO

2. Are discrepancy reports reconciled and returned to the pharmacy as per local instruction? YES NO

3. Are the requests for Schedule II items, and other command designated substances accomplished using a properly prepared DD Form 1289, Prescription Form, signed by a pharmacy officer, senior pharmacy technician, or officer appointed in writing by the commanding officer to have access to pharmacy bulk storage? YES NO

4. Is a separate NAVMED 6710/1, Narcotic and Controlled Drug Account Record prepared for each item ordered? (Except where pharmacy automatically restocks ADMs an electronic audit trail must be available.) YES NO

5. Are completed Narcotic and Controlled Drug Account Records (NAVMED 6710/1, Narcotic and Controlled Drug Account Record) returned to the core facility pharmacy within 30 days of completion? YES NO

6. Is adequate security provided when transferring controlled substances between the core facility and branch medical clinics? YES NO

7. Are Schedule III, IV, and V substances ordered on a properly prepared DD Form 1348-1A, Issue Release/Receipt Document; DD Form 1348-2, Issue Release/Receipt Document with Address Label; or DD Form 1289, Prescription Form? (Except where pharmacy automatically restocks ADMs an electronic audit trail must be available.) YES NO

c. Issue of Controlled Substances from Supply Service

1. Have all DD Form 1348-1A, Issue Release/Receipt Document; DD Form 1348-2, Issue Release/Receipt Document with Address Label; or other authorized forms submitted to the supply department for Schedule III, IV, and V items been signed by command authorized individuals? YES NO N / A

d. Deteriorated Controlled Substances

(For items not processed by Medication Returns Contractor)

1. Are all controlled substances (II-V) that have become deteriorated or of questionable potency reported in writing to the commanding officer? YES NO

2. If destruction is directed by the commanding officer, it is accomplished in the presence of a member of the CSIB? YES NO

3. Is a report, signed by the officers witnessing destruction, retained with the controlled substances inventory report as authority for deleting the items from inventory record and report is retained in the pharmacy for 2 years? YES NO

e. Controlled Substances Returned to the Pharmacy by Patients

1. Is there evidence of adherence to the local policy addressing the return of controlled substances by patients? YES NO

PHARMACY	
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PART II - Wards/Clinics/Branch Health Clinics's Pharmacies, E.R., etc.	
a. Control and Accountability	
1. Are bulk (stock) controlled medications and medicinal alcohol, when not in use, stored in an appropriate safe, locked storage, or ADM?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
2. Is custodial responsibility assigned to a commissioned officer, equivalent civilian, or staff member designated in writing by the commanding officer ?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
3. Is an inventory of the narcotic and controlled drug stock book completed by the appropriate supervisor as required by local directives?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
b. When ADMs not utilized. Arrangement of Narcotic and Controlled Drug Book (The branch health clinic/ ward/clinic maintains a loose-leaf notebook which should be audited for the following)	
1. Is NAVMED 6710/4, Narcotic and Controlled Drug Inventory-24 Hours in the front of the book?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
2. Are separate serially numbered NAVMED 6710/1, Narcotic and Controlled Drug Account Records received from the pharmacy for each issue of a Schedule II item and other command designated substances?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
c. Use of the NAVMED 6710/4, Narcotic and Controlled Drug Inventory-24 Hours (Only required when ADMs are not being utilized.)	
1. Has a medical officer, responsible pharmacy staff member, or designated individual from each shift signed the inventory after medications have been inventoried and at each shift change?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
2. Are the serial numbers from completed NAVMED 6710/1, Narcotic and Controlled Account Records returned to the core pharmacy, and has the pharmacy representative acknowledged receipt by placing his or her initials in the appropriate column?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
3. Is the NAVMED 6710/4, Narcotic and Controlled Drug Inventory-24 Hours, dated and signed upon completion of the inventory?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
d. Use of NAVMED 6710/1, Narcotic and Controlled Drug Account Record (Only required when ADMs are not being utilized.)	
1. Is the heading of each NAVMED 6710/1, Narcotic and Controlled Drug Account Record completed by the pharmacy at the time of issue?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
2. Is the body of the NAVMED 6710/1, Narcotic and Controlled Drug Account Record used for recording expenditures and balances only?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
3. Are all entries made in indelible ink?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
4. Are errors corrected by drawing a single straight line through the erroneous entry and initialed by the person making the correction?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
5. Each time a drug is expended, is the complete information recorded on the NAVMED 6710/1, Narcotic and Controlled Drug Account Record, and the amounts recorded in Arabic numerals, i.e., 0.5 ml?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
6. If a fraction of the amount expended is administered to a patient, is the remaining quantity recorded as waste in the appropriate column of the NAVMED 6710/1, Narcotic and Controlled Drug Account Record?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
7. If a single dose of a controlled substance is accidentally damaged or contaminated during preparation for administration, or is refused by the patient after being prepared, is it entered on the NAVMED 6710/1, Narcotic and Controlled Drug Account Record or documented in the Automated Dispensing Machine	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
8. Is the signature of the person witnessing destruction of partial or refused doses of controlled substances entered on the NAVMED 6710/1, Narcotic and Controlled Drug Account Record or appropriately documented in the ADM?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
9. Are the NAVMED 6710/4, Narcotic and Controlled Drug Inventory-24 Hours over 3 months old removed from the clinic book and transferred to the pharmacy monthly?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A

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PART III - Supply/Pharmacy Supply		
a. Are Schedule II and command designated items stored in a safe or vault?		<input type="checkbox"/> YES <input type="checkbox"/> NO
b. Are safe or vault combinations changed at least twice a year or when there has been a change in custodians, or a breach in security?		<input type="checkbox"/> YES <input type="checkbox"/> NO
c. Are Schedules III, IV, and V bulk (stock) items stored in a controlled environment or locked cabinet and inventoried at least biennially (every two years on or about 1 May on odd numbered years)?		<input type="checkbox"/> YES <input type="checkbox"/> NO
d. Does a person other than the requestor sign for receipt of ordered narcotics "(Schedules II) and controlled substances (Schedules III, IV, V)" in the pharmacy?		<input type="checkbox"/> YES <input type="checkbox"/> NO
e. Is a physical inventory of controlled substances conducted upon change of custodial responsibility?		<input type="checkbox"/> YES <input type="checkbox"/> NO
PART IV - Officials		
a. Member Conducting Inventory		
1. Name	2. Rank / Rate	3. Telephone Number <i>(Include Area Code)</i>
4. Signature		5. Date
b. Senior Board Member		
1. Name	2. Rank / Rate	3. Telephone Number <i>(Include Area Code)</i>
4. Signature		5. Date