OBJECTIVES

- To establish guidelines for the restrictions, exceptions, labelling, storage, and dispensing of narcotic (opioid) products in order to minimize the risk of medication errors and prevent harm to patients.

APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, students, volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).

ELEMENTS

1. Exemptions

   1.1 This guideline does not apply to the following:

   a) Emergency Medical Services (EMS);
      (i) EMS staff shall continue to follow the AHS EMS Provincial Medical Control Protocols: Adult and Pediatric and any other EMS documents with regard to high-alert medications.

   b) Home Living, Supportive Living, and facilities operated by contracted Long-Term Care Service Providers (refer to the AHS Medication Management Policy [Continuing Care]).
2. **Restricted Products**

2.1 The following select high-potency parenteral narcotic (opioid) products are restricted by Accreditation Canada Required Organizational Practice and shall not be stored in patient care areas (i.e., wardstock):

   a) fentanyl ampoules or vials with a total dose greater than 100 micrograms (mcg) per container;

   b) hydromorphone ampoules or vials with a total dose greater than two (2) milligrams (mg) per container;

   c) morphine ampoules or vials with a total dose greater than 15 mg per container in adult care areas; and

   d) morphine ampoules or vials with a total dose greater than two (2) mg per container in pediatric care areas.

2.2 Lower dose formats and pre-made parenteral solutions of the narcotic (opioid) may be routinely stocked in patient care areas (i.e., wardstock) with appropriate labelling and storage in compliance with the AHS Management of High-alert Medications Policy and Procedure.

3. **Exceptions**

3.1 When it is necessary for a restricted high-potency narcotic (opioid) to be available in selected patient care areas (i.e., wardstock), an AHS Required Organizational Practice (ROP) Exception Request Form must be submitted to the provincial Pharmacy Services Medication Quality and Safety Team (MQST).

   a) A restricted high-potency narcotic (opioid) may only be stocked in a patient care area if an exception request has been approved.

3.2 Approved Required Organizational Practice exceptions are located through Insite at the Pharmacy Services, Medication Quality and Safety Team, High-alert Medications web page.

4. **Labelling and Storage**

4.1 Narcotic (opioid) storage containers and products shall be labelled per Appendix A: Narcotic (Opioid) Labelling Requirements.

4.2 Restricted high-potency narcotics (opioids) should be stored separately and securely from other narcotics (opioids), whenever possible.

4.3 Oral narcotics (opioids) with long-acting dosage formats should be segregated from those with short-acting dosage formats.
5. Dispensing

5.1 When an approved Required Organizational Practice exception is not in place, restricted high-potency narcotics (opioids) shall be provided on a patient-specific basis, when required.

a) It is preferable for Pharmacy to provide high-potency narcotic (opioid) products in a dilute ready-to-administer format whenever possible.

5.2 Narcotics (opioids) shall be delivered to designated secure areas within each patient care area and appropriate documentation for the delivery shall be completed per site processes.

5.3 High-potency narcotics (opioids) shall be removed from patient care areas and returned to Pharmacy when no longer required for the patient for whom the medication was originally dispensed (e.g., patient is discharged or transferred, or medication is discontinued).

DEFINITIONS

None

REFERENCES

- Appendix A: Narcotic (Opioid) Labelling Requirements
- Alberta Health Services Governance Documents:
  - EMS Provincial Medical Control Protocols: Adult and Pediatric
  - High-alert Medications: Electrolytes Guideline (#PS-46-02)
  - High-alert Medications: Heparins Guideline (#PS-46-03)
  - Management of High-alert Medications Policy (#PS-46)
  - Management of High-alert Medications Procedure (#PS-46-01)
  - Medication Management Policy (Continuing Care) (#HCS-220)
- Alberta Health Services Forms:
  - Required Organizational Practice (ROP) Exception Request Form
- Non-Alberta Health Services Documents:
  - Medication Management Standards (For Surveys Starting After: January 1, 2019) (Accreditation Canada QMentum Program)
Narcotic (Opioid) Labelling Requirements

| Cautionary Labels to be used in addition to the High-alert Medication Label (High-alert Medication Label to be affixed to the storage containers only) |
|---|---|---|
| **Label Type** | **Medication Class** | **Use** |
| ![LONG ACTING](image1) | All narcotics (opioids) | To be affixed to:  
- the stock storage containers (i.e., wardstock and pharmacy stock) and  
- to each stock product if the narcotic (opioid) is available in both long- and short-acting formulations (printing on the package is also acceptable). |
| ![SHORT ACTING](image2) | High-potency narcotics (opioids):  
- hydromorphone with a total dose greater than two (2) mg per container  
- morphine with a total dose greater than 15 mg per container  
- fentanyl with a total dose greater than 100 mcg per container |  
- To be affixed to the stock storage containers.  
- To be affixed to products dispensed for specific patient(s) or alternatively, to the container in which the vials or ampoules are dispensed (e.g., resealable bag). |

Pharmasystems labels can be ordered by calling Pharmasystems Customer Service Toll-Free at 1-888-475-2500.

The website can be accessed at [www.pharmasystems.com](http://www.pharmasystems.com).