If you have any questions or comments regarding the information in this guideline, please contact the Policy & Forms Department at policy@albertahealthservices.ca. The Policy & Forms website is the official source of current approved policies, procedures and directives.

OBJECTIVE

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

APPLICABILITY

This guideline applies to 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). This guideline does not limit any legal rights to which you may otherwise be entitled.

GUIDELINE

1. Restricted Products

1.1 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 total dose greater than 100 micrograms (mcg) per container;

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

c) morphine ampoules or vials with total dose greater than 15 mg per container in adult care areas; and
d) morphine ampoules or vials with total dose greater than two (2) mg per container in pediatric care areas.

**Note:** 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 Alberta Health Services Management of High-alert Medications Policy and Procedure.

2. **Exceptions**

   2.1 When it is necessary for a restricted high-potency narcotic (opioid) to be available in selected patient settings (i.e., wardstock), a *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.

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

3. **Labelling and Storage**

   3.1 Labelling and storage requirements are a shared responsibility between clinical departments or programs (e.g., nursing or care settings) and Pharmacy Services. Assignment of responsibility shall be determined by the site.

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

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

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

4. **Dispensing**

   4.1 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.

   4.2 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.
4.3 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 Labelling Requirements
- Alberta Health Services High-alert Medications: Electrolytes Guideline
- Alberta Health Services High-alert Medications: Heparins Guideline
- Alberta Health Services Management of High-alert Medications Policy
- Alberta Health Services Management of High-alert Medications Procedure
- Accreditation Canada QMentum Program, Medication Management Standards (For Surveys Starting After: January 1, 2014)
- Required Organizational Practice (ROP) Exception Request Form

REVISIONS

N/A
## Appendix A

### Narcotic Labelling Requirements

**Cautionary Labels to be used in addition to High-alert Medication Label**

<table>
<thead>
<tr>
<th>Label Type</th>
<th>Medication Class</th>
<th>Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>All narcotics (opioids)</td>
<td>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.</td>
<td></td>
</tr>
</tbody>
</table>
| **High-potency narcotics (opioids):** | • HYDROmorphine with total dose greater than two (2) mg per container  
• morphine with total dose greater than 15 mg per container  
• fentaNYL with 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)