Subject: Coronavirus, consultant pharmacist visitation schedule during declared state of emergency—nursing homes, custodial care facilities, and detention centers

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During the declared state of emergency in New Mexico due to COVID-19, unless otherwise amended:

- The Board does not intend to take action against a licensee who is in non-compliance with the visitation schedule for a consultant pharmacist inspection of a nursing home, custodial care facility, or detention center, during and due to the declared state of emergency. Pharmacists should follow CDC and state-issued guidelines relative to infection control and prevention recommendations related to the Coronavirus pandemic.

- A custodial care facility on a 3 month schedule impacted by late visitation during the emergency should be inspected as soon as practicable after the state of emergency ends.

- The duties and responsibilities of the consultant pharmacist are otherwise unchanged, including 16.19.4.11 NMAC (http://164.64.110.134/parts/title16/16.019.0004.html). Consultant pharmacists are to complete all required inspection activities as possible by remote technologies (e.g. chart review, and corresponding documentation of activities).

- Provided that the requirements of 16.19.11.8 (B) NMAC are met, the pharmacist may, during the declared emergency, inventory and witness drug destruction remotely as technology allows. The pharmacist is responsible for documenting this.

**16.19.11.8 MINIMUM STANDARDS:**

(B) (10) Destruction of dispensed drugs for patients in health care facilities or institutions:  

(a) The drugs are inventoried and such inventory is verified by the consultant pharmacist. The following information shall be included on this inventory:

(i) name and address of the facility or institution;  
(ii) name and pharmacist license number of the consultant pharmacist;  
(iii) date of drug destruction;  
(iv) date the prescription was dispensed;  
(v) unique identification number assigned to the prescription by the pharmacy;

(vi) name of dispensing pharmacy;  
(vii) name, strength, and quantity of drug;  
(viii) signature of consultant pharmacist destroying drugs;  
(ix) signature of witness(es); and  
(x) method of destruction.

(b) The drugs are destroyed in a manner to render the drugs unfit for human consumption and disposed of in compliance with all applicable state and federal requirements.

(c) The actual destruction of the drug is witnessed by the consultant pharmacist and one of the following:

(i) An agent of the New Mexico board of pharmacy;  
(ii) Facility administrator;  
(iii) The director of nursing.

(11) A consultant pharmacist may utilize a waste disposal service or reverse distributor to destroy dangerous drugs and controlled substances in health care facilities, boarding homes or institutions provided the following conditions are met:

(a) The inventory of drugs is verified by the consultant pharmacist. The following information must be included on this inventory:

(i) Name and address of the facility or institution;
(ii) Name and pharmacist license number of the consultant pharmacist;

(iii) Date of packaging and sealing of the container;

(iv) Date the prescription was dispensed;

(v) Unique identification number assigned to the prescription by the pharmacy;

(vi) Name of dispensing pharmacy;

(vii) Name, strength and quantity of drug;

(viii) Signature of consultant pharmacist packaging and sealing container; and

(ix) Signature of the witness.

(b) The consultant pharmacist seals the container or drugs in the presence of the facility administrator, the director of nurses or an agent of the board of pharmacy.

(c) The sealed container is maintained in a secure area at the facility or pharmacy until transferred to the waste disposal service or the reverse distributor by the consultant pharmacist, facility administrator, director of nursing or agent of the board of pharmacy.

(d) A record of the transfer to the waste disposal service or reverse distributor is maintained and attached to the inventory of drugs. Such records shall contain the following information:

(i) Date of the transfer;

(ii) Signature of the person who transferred the drugs to the waste disposal service or reverse distributor;

(iii) Name and address of the waste disposal service or reverse distributor;

(iv) Signature of the employee of the waste disposal service or the reverse distributor who receives the container; and

(v) The waste disposal service or reverse distributor shall provide the facility with proof of destruction of the sealed container.

(12) Record Retention: All records required above shall be maintained by the consultant pharmacist and the health care facility or institution for three years from the date of destruction.