# Working Instructions: Form I – Dangerous Drug Destruction Log

### Definitions:

1. Dangerous Drug - means any drug other than a drug contained in any schedule of Article 2 of this chapter, which, under the federal Food, Drug, and Cosmetic Act (52 Stat. 1040 (1938)), 21 U.S.C. Section 301, et seq., as amended, may be dispensed only upon prescription.  In addition to subsection (a) of this Code section, a “dangerous drug” means any other drug or substance declared by the General Assembly to be a dangerous drug; to include any of the following drugs, chemicals, or substances; salts, isomers, esters, ethers, or derivatives of such drugs, chemicals, or substances which have essentially the same pharmacological action; all other salts, isomers, esters, ethers, and compounds of such drugs, chemicals, or substances unless specifically exempted and the following devices, identified as “dangerous drugs”: [List of drugs can be found here.](https://advance.lexis.com/documentpage/?pdmfid=1000516&crid=9803fea1-d6d4-44e5-b07f-197160811ee2&nodeid=AAQAAOAAEAAE&nodepath=%2FROOT%2FAAQ%2FAAQAAO%2FAAQAAOAAE%2FAAQAAOAAEAAE&level=4&haschildren=&populated=false&title=16-13-71.+%E2%80%9CDangerous+drug%E2%80%9D+defined.&config=00JAA1MDBlYzczZi1lYjFlLTQxMTgtYWE3OS02YTgyOGM2NWJlMDYKAFBvZENhdGFsb2feed0oM9qoQOMCSJFX5qkd&pddocfullpath=%2Fshared%2Fdocument%2Fstatutes-legislation%2Furn%3AcontentItem%3A686B-H2R3-GXF6-84BH-00008-00&ecomp=bgf5kkk&prid=224b3608-f1c6-4ea1-b5d0-291f5c53e680)
2. Registrant – A person licensed and registered with the Georgia Board of Pharmacy (GBP) to distribute, manufacture, administer, and/or dispense a dangerous drug.

### Box 1: Registration Information

1. Complete the Registrant’s Name, Georgia Board of Pharmacy (GBP) #, and address in this section. The information must appear exactly (in its entirety), as it does on the Registrant’s GBP License. This is the information of the Registrant and not the user.

### Box 2: Destruction Information

1. Complete Box 2 by filling in the information pertaining to the method of destruction. Note: Dangerous drugs should be destroyed through EHSO.
2. Record the date of destruction. The date of destruction is the date the dangerous drug physically left the registered location to be destroyed. Use one form per date of destruction.

### Box 3: Destruction Log

1. On this form, each vial/bottle/container with its unique bottle ID should be listed separately on its own individual line. This aids in recordkeeping compliance.
2. Record the date of destruction.
3. Record the dangerous drug name, concentration/strength, total volume/quantity to be destroyed, drug form, and the unique bottle ID. This information should be located on the current use form (C, D, F, G or H). Each bottle with the unique bottle ID is to be recorded separately. The total volume/quantity to be destroyed must appear exactly as it does on the use log.
4. Mark the box “Destruction log continued on additional page” if more than one form is used per date of destruction.

# Sample Form I: Dangerous Drug Destruction Log

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| **Box 1: Registrant Information** | | |
| **Registrant’s Name:** John Smith | **GBP #:** RS1234567 | **Registered Address:** 123 Main Street, Room 5100C, Atlanta, GA, 30325 |

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| **Box 2: Destruction Information** |  |
| **Method of Destruction:** EHSO | **Date of Destruction:** 02/11/23 |

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| **Box 3: Dangerous Drug Destruction Log** | | | | | | |
| **Date of Destruction** | **Name of Dangerous Drug** | **Concentration/Strength** | **Total Volume/Quantity to be destroyed** | **Drug Form** | **Unique Bottle ID** |
| 02/11/23 | Isoflurane | 100 | 17ml | liquid | ISO001 |
| 02/11/23 | Meloxicam | 5mg/ml | 20ml  SAMPLE | liquid | MEL0010 |
| 02/11/23 | Amoxicillin | 200mg/5ml | 10ml | powder | AMOX003 |
| 02/11/23 | Tamoxifen Citrate | 98% | 2g | powder | TMX0013 |
| 02/11/23 | Lidocaine 1% | 500mg/50ml | 7ml | liquid | LID0001 |
| 02/11/23 | Isoflurane | 100 | 125ml | liquid | ISO003 |
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# Form I : Dangerous Drug Destruction Log

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| **Box 1: Registrant Information** | | |
| **Registrant’s Name:** | **GBP #:** | **Registered Address:** |

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| **Box 2: Destruction Information** |  |
| **Method of Destruction:** | **Date of Destruction:** |

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| **Box 3: Dangerous Drug Destruction Log** | | | | | | |
| **Date of Destruction** | **Name of Dangerous Drug** | **Concentration/Strength** | **Total Volume/Quantity to be destroyed** | **Drug Form** | **Unique Bottle ID** |
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