Collecting Unwanted Medications

An Indiana guide to holding unwanted medication collections for pharmacies and community organizations

Indiana
Unwanted Medicines
Task Force

VERSION 1.0
MAY 2011
Acknowledgements
The Indiana Unwanted Medicines Task Force is a group of individuals representing pharmacy, medical, solid and hazardous waste, and governmental interests. The Task force would like to thank the following individuals for their participation in the development of this guide.

Ms. Christina Bailey Heritage Environmental Services, LLC
Ms. Jessie Biggerman Shelby County SWMD
Mr. Steven Boggs Indiana Department of Environmental Management
Mr. Tony Burrs Allen County SWMD
Ms. Sonya Carrico Criminal Justice Institute
Ms. Barbara Cole Indiana Poison Center
Ms. Tabitha Cross Indiana Pharmacists Alliance
Mr. Steve Cummings Marsh
Mr. Chris Gaal Monroe County Prosecutor
Ms. Monica Hartke-Tarr Indiana Department of Environmental Management
Ms. Beth Hirtzel Tipton County SWMD
Mr. Lance Hodge AISWMD
Ms. Jennifer Lawrence Boone County SWMD
Mr. Keith Jackson Parkview Health
Mr. Laurence Kennedy Butler University
Ms. Pam Kirklin Marion Utilities
Ms. Wendy LeMasters St. Vincent Hospital
Ms. Jean MacDonald Indiana Association for Home & Hospice Care
Ms. Gail Magsaysay Choice Community Council, Munster, Indiana
Ms. Rachel Marcum Heritage Environmental
Ms. Ginny McIntire UPS
Mr. Michael Mendenhall St. Vincent Hospital-Carmel
Mr. Randy Miller Drug-Free Marion County
Ms. Angela Morgan Tipton Hospital
Mr. Scott Morgan Monroe County SWMD
Mr. Jim Parker Nugenesis
Ms. Anu Patel Retail Pharmacist
Mr. Eric Pearcy Professional Licensing Agency
Ms. Angela Quast Washington, City of
Mr. Bob Reardon Retired
Mr. Jeff Rushforth Hamilton County SWMD
Mr. Kyle Schrink East Central IN SWD
Ms. Sara St. Angelo St. Vincent Heart Center
Ms. Carol Stradling Northwest Indiana SWD
Ms. Annie Stumm Hendricks County substance Abuse Task Force
Ms. Jean Svendsen IN State Dept of Health
Mr. Tim Thomas Pharmacy Licensing Agency
Ms. Nichole Upano Indiana Retail Council
Ms. Kim Vukobratovich Newton County Community Services
Ms. Donna Wall State Board of Pharmacy
Ms. Katie Wehri Indiana Association for Home and Hospice Care
Ms. Debra Wessels Newton County Community Services
Mr. Denis Wichern Drug Enforcement Agency
Mr. Phil Wickizer Indiana Board of Pharmacy
Mr. Jim Young Wishard Health Services
I. Introduction

The Indiana Unwanted Medicines Task Force is a multi-disciplinary group representing pharmacy, medical, solid and hazardous waste, and governmental interests. Concerns about prescription drug abuse, identity theft, accidental poisoning of children, and clean water brought a diverse group together to discuss household pharmaceutical waste and the safe collection and disposal of prescription and over-the-counter unwanted medicines.

This document is an adaptation of guidelines established by the Northeast Recycling Council, Inc. (NERC), a non-profit organization in Brattleboro, VT.

With the permission of NERC, the Indiana Unwanted Medicines Task Force has adapted the NERC’s materials into an Indiana guide that is specific to Indiana interest and concerns, and includes collections conducted by pharmacies, law enforcement, solid waste management districts, municipalities, as well as local drug taskforce.

Throughout this document, we refer to the materials being collected as "medication or medicine." This document does not address issues concerning illegal drugs. In addition, every effort has been made to make clear that the medications are “destroyed” and are not “reused” or “recycled” in accordance with applicable state and federal laws.

II. A Guide to Unwanted Medication Collections — A legal strategy for collecting medications

The collection and disposal of household Pharmaceuticals and Personal Care Products, or Unwanted Medications, involves complying with applicable state and federal law and regulation. These laws govern the collection, management, transportation, and disposal of unwanted medicines from homes. Following is an overview of applicable law and regulation.

Environmental regulations are enforced by the Indiana Department of Environmental Management (IDEM). Indiana environmental regulations generally follow federal law.

Disposal of solid waste generated from homes is generally exempt from Indiana and federal hazardous waste regulation, even if the waste has hazardous characteristics. Waste household pharmaceuticals are included in this exemption. However, homeowners are required to ensure that proper disposal does not pose a health threat or create a public nuisance. Household waste, including pharmaceuticals, is exempt from hazardous waste regulations and liability.

Waste household pharmaceuticals are considered solid waste in Indiana, and should be disposed of in a permitted solid waste facility. This guide was developed to promote best management practices in collecting and disposing of unwanted medicines. Authors of the guide believe the best practice for disposal of unwanted medicines is through permitted solid or hazardous waste incineration.

IDEM’s Offices of Air and Land Quality oversee permits for operations that produce waste gases or particles that are released to the air and operations that handle, haul or dispose of solid waste, including incineration facilities. According to Indiana law, waste household pharmaceuticals can only be incinerated at a facility permitted to incinerate such waste. Hazardous waste disposal contractors and facility operators should be able to confirm whether an incineration facility’s permit allows for the disposal of pharmaceutical waste. For technical assistance in understanding environmental regulations, call IDEM’s Office of Pollution Prevention and Technical Assistance at 1-800-988-7901.

U.S. Department of Transportation (DOT) regulations governing the transportation of hazardous materials are enforced by the State Police in Indiana. The household waste exemption is not recognized in DOT regulations. DOT governs the commercial transportation of waste or hazardous materials. DOT regulations allow individuals to transport hazardous materials, not in commerce, to collection events or facilities. DOT sets standards applicable to commercial transporters of hazardous materials, and general requirements for shipments, packaging, and labeling waste. In preparation of hazardous materials for shipment, commercial shippers must ensure that wastes are:

- Segregated and classified according to DOT hazard class;
• Known chemicals are packaged according to DOT guidelines;
• Unknown or unlabeled waste are identified in order to classify and package the waste according to hazard class;
• Waste is transported on properly licensed and placarded vehicles according to hazard class, and;
• Waste is disposed or recycled at a permitted facility.

The U.S. Drug Enforcement Administration (DEA), Indiana Regional Office, is specifically charged with the oversight of the movement and handling of controlled substances. Congress established a "closed system" of distribution designed to prevent the diversion of controlled substance. In furtherance of the closed system, no controlled substance may be transferred between two entities unless the entities are DEA registrants or exempt from registration. In addition, registrants must maintain records of all transactions involving controlled substances. The closed system is monitored by a system that accounts for all controlled substances received, stored, distributed, dispensed, or otherwise disposed.

Individuals or "Ultimate users" are exempt from the requirement of registration if the ultimate user has a prescription for the substance, and possesses the controlled substance for his own use or for the use of a member of his household or for an animal owned by him or by a member of his household. This exception does not allow an individual to deliver a controlled substance to any other entity for any purpose, including disposal of the drug.

In order to promote the collection of unwanted medicines by community programs, DEA has utilized existing federal regulations to allow law enforcement agencies to conduct community "take-back" programs that collect unused pharmaceutical controlled substances. These "take-back" programs involve duly authorized law enforcement officials collecting unused controlled substances from ultimate users. Upon receipt, the authorized law enforcement agency must maintain custody of the controlled substances up to and including destruction. The manner of destruction must comply with applicable federal and state laws including those related to the public health and environment. When collecting controlled substances, it is imperative to secure the participation of law enforcement. While the participation of law enforcement is required in order to collect controlled substances, it is at their discretion whether to participate in the event and whether to take physical, permanent responsibility for the controlled substances.

When collecting controlled substances, they must be secure from the risk of diversion and handled as required by DEA and state law. All controlled substances must pass from the consumer to the custody of law enforcement. The collection strategy presented in this Guide relies upon the expertise of a pharmacist to determine which medications are regulated as controlled substances and to direct law enforcement to take custody of these materials. Law enforcement participation is not required if controlled substances are not collected.

The Indiana Board of Pharmacy regulates the licensing of pharmacists, pharmacy technicians, and the handling and dispensing of prescription medications. Information about Indiana code and regulations is listed in the appendices of this document.

The federal privacy law, the U.S. Department of Health and Human Services’ Health Insurance Portability and Accountability Act of 1996 (HIPAA), does apply in the case of unwanted medication collections. Ensure that all personal information is marked off of prescription containers before being handed to either the pharmacist or law enforcement official, and do not record any personal information.
The Overriding Goals of any unwanted medication collection must be to:

1. Be in full compliance with federal and state laws.
2. Avoid illegal diversion of the medications.
3. Ensure the safe and environmentally sound destruction of the medications.

III. Preparing for the Collection Event

The event organizer is responsible for pre-event planning and organization. Collection events require the participation and successful coordination of various organizations, individuals and contractors. This section summarizes event organizer responsibilities in advance of the collection.

A. Budget
B. Site selection
C. Agreement with law enforcement
D. Arrange for staffing
E. Hazardous waste management
F. Determine site set-up
G. Arrangements for waste handling
H. Secure equipment and supplies
I. Inventorying medicines
J. Promote and advertise the event

A: Determining the budget and securing funding is the initial step in preparing for the collection event. Data from Indiana events show that cost for a two hundred participant event usually do not exceed $750.00. This is assuming that all personnel except the contractor are volunteers. It is recommended that unwanted medication collections be provided at no cost to the public. Particularly with the high cost of purchasing medications, charging a disposal fee is likely to be a disincentive to participation.

B: Various factors will determine where the event will be held. In selecting the location, the organizer will need to consider the expected participation, facilities or sites available, and planned duration of the event. If the collection will take place in a pharmacy, the collection should not take place behind the counter. Municipal events can be held either inside or outside. If large participation is anticipated, you may want to hold the event in a parking lot where traffic can enter from one direction and exit another direction. Keeping participants in their vehicles will help keep the line moving smoothly.

C: An absolute pre-requisite to holding a collection of controlled substances is the agreement of law enforcement to participate and provide all of the essential services, including taking physical possession of the controlled substances and being responsible for their destruction. Participating officers must be on-duty and in uniform. Without this, collecting controlled substances cannot occur.

The request for assistance should be in writing, and there should also be a follow-up memo sent to confirm the collection specifics and duties of the officer(s). Of course, if controlled substances are not collected then law enforcement participation is not required.

D: Arranging for staffing is an important first step for the event organizer. The number of individuals required in each role will be a function of the potential participation of the event. We recommend the following staffing levels:

**STAFFING**

Event organizer
Pharmacist(s) – 1 or 2, and/or
1 or 2 Pharmacy Technicians
Sorter – 1
Volunteers, Greeters – 2
Law Enforcement – 2

For large urban areas, it is worthwhile to consider a higher level of staffing. Be sure that the pharmacist(s) is licensed and in good standing (verify at www.in.gov/pla) with the Indiana Board of Pharmacy. If pharmacy technicians or students will participate, ensure that a licensed pharmacist in good standing will be on site and will act as their supervisor.
For some collections, which may have smaller participation, the pharmacist or technician can serve as sorters. Some contractors may be able to provide a pharmacist or technicians as a part of their service agreement.

It may take several weeks to arrange for law enforcement and pharmacists. Do not advertise a program until arrangements for these essential participants have been finalized.

E: When selecting a contractor it is essential to select one that can manage and transport the collected waste. While current law limits contractors’ ability to transport controlled substances, you should select a contractor that can transport and manage the ninety plus percent of medicines that are not controlled substances. And even though household pharmaceuticals are exempt from hazardous waste regulation, they are not exempt from DOT regulations and must be packaged for shipment according to DOT hazard class.

The event organizer should instruct the contractor (at least one week in advance) of the number and size of containers to be delivered. Too many rather than too few should be the approach to how many containers to have delivered by the contractor in advance of the event. And, be sure the contract has no cost for empty containers; they will remove the unused ones along with the full ones at the end of the event. While it is impossible to predict exactly how much material will be received, see Table 1 for recommended number and size of containers to have delivered.

Advance arrangements with the contractor should include:
- Agreement on the contractor’s ability to manage materials
- Agreement on fee schedule
- Agreement that collected medicines be sent for permitted solid or hazardous waste incineration
- Guidance on packing of materials (e.g., can mercury-containing medications go into the same container as the other medications?)
- Discuss with contractor whether medicines will be shipped under hazardous waste manifest
- Proof of insurance
- Size and number of containers to be provided
- Agree on inventorying of medications requirements
- When and where to deliver the containers
- Who will pay for their services
- Sign a contract, if necessary
- Contractor to provide an EPA ID number
- Schedule pick-up at the close of the event (Medications should never be stored on site, or even off-site. This presents an extremely unsafe situation with a grave potential for diversion.)
- Arrange for certificate(s) of destruction
- Contact phone numbers for day of event
- Directions to container drop-off and collection site(s)

It is the responsibility of the event organizer to make these arrangements and ensure that all terms are satisfactorily fulfilled.

<table>
<thead>
<tr>
<th>Population of Service Area</th>
<th>55 gallon</th>
<th>30 gallon</th>
<th>16 gallon</th>
<th>5 gallon</th>
</tr>
</thead>
<tbody>
<tr>
<td>50,000</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>100,000</td>
<td>6</td>
<td>5</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>&lt; 500,000</td>
<td>10</td>
<td>5</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>&gt; 500,000</td>
<td>15</td>
<td>10</td>
<td>8</td>
<td>15</td>
</tr>
</tbody>
</table>
F: Determine site set-up, and placement of the work area, law enforcement, and supplies is an important component of the program design. Key considerations include:

- Law enforcement should be able to observe the public as they bring medications to the collection and movement of the medications from the public to the work area.
- Room for the hazardous waste containers (in use and awaiting use)
- Room for workstations
- Traffic flow

Each pharmacist, student, technician, data entry person, and law enforcement official will need a chair. The pharmacist, students, and technicians will require a six-foot table for every two people.

If data entry is to be a component of the event, the data entry person may be able to share a table or may require an additional four-foot table. There should be extra chairs for greeters. In addition, there needs to be room for a hazardous waste drum next to each pharmacist or data entry person, as well as recycling and trash containers.

Once it is determined what will be collected, the event organizer will be able to determine placement of containers required for each material, such as used household needles or sharps and thermometers.

Whether or not you plan to accept used sharps at a collection, you must be equipped to handle them. Used sharps are a biohazard. Many companies offer special containers or mail-back service for sharps. Be sure to have the collection containers on site.

Safety instructions should be provided regarding sharps. They should only be accepted if they are in a hard plastic container such as a detergent bottle, with the lid taped shut and the container marked “contains sharps.” If possible, it is better that collection staff do not handle sharps containers and persons bringing the sharps place them in the shipping container.

Even if the advertising says “do not bring thermometers” be prepared to receive them by having a container dedicated to collecting these materials – a plastic container with a tight fitting lid or a five-gallon pail with some kitty litter in the bottom is ideal. Preventing the mercury thermometers from getting broken will save money. Arrangements as to where the mercury thermometers can be recycled should be made in advance: contact your local solid waste management district, or the Indiana Department of Environmental Management at 800-988-7901.

G: It is essential that the event organizer arrange for all required equipment and supplies.

- If planning to create an inventory of collected medications, tools (trays) for counting medications (one for each pharmacist) are a critical tool. Electronic counting devices can make the task go more quickly.
- Reference documents for researching unknown tablets (e.g., book, CD format, online access). Lists of DEA controlled substances can be found online at the DEA website. This printed listing is sometimes quicker than referring to computer lookup. There are several other resources available, but perhaps the most comprehensive is “Ident-a-Drug Reference,” written by Jeff M. Jellin, PharmD, published by the Therapeutic Research Center. It is available in paperback, CD, PDA, and online.
- Back-up memory (e.g. memory stick, CD)
- Printer (Compatible with laptop. Be sure there is enough ink and paper)
- Tables and chairs
- Tents, if collection is held outdoors
- 6 to 10 Plastic Tubs (12x16)
• Hazardous waste containers: these need to be on-site the day before the collection.
• Containers for trash, recycling containers for cardboard, paperboard, and plastic bags.
• Sealable plastic bags (One-gallon with external slide mechanism and lunch bag size).
• Extension cords, grounded
• Pens, paper, survey forms, clipboard(s), indelible markers
• Latex gloves, face masks
• Packing tape
• Drinking water
• Toilet and sink
• Hand cleaner/sanitizer
• Phone
• Mercury spill kit
• Containers of water

H: If creating a ledger of collected medicines, you should consider arranging for laptop(s) with spreadsheet software and compatible with printer for each pharmacist. If you plan to only inventory controlled substances, it is usually feasible to utilize the pre-printed “Controlled Substance Inventory form” found in the appendices of this guide. Copies can be made for law enforcement and the event organizer.

The amount and type of data collected will be a function of how you intend to use the data. An inventory of the controlled substances received may be required by law enforcement. The point of collection is the moment at which that data should be recorded. Table 2, is an example controlled substance inventory (a full page inventory form is on page 13). When accounting for the amount of material, be sure to indicate if it is in a form other than a tablet, and what that form is. Unknowns should include a brief description of the item.

I: In addition to promoting the collection event, advertising serves the purpose of educating the public about the need to properly manage and dispose of unwanted medications. It is important to provide information about the specific collection opportunity, as well as to provide basic education to avoid improper disposal. Critical information for the public to know:

• Medications stay in their original containers
• Personal information crossed out – keep information about medication legible
• Do not remove labels
• No sharps
• No thermometers
• No medical waste – no waste from

| Table 2. Example of controlled substance inventory |
| Federally Controlled Substances Received |
| Date: ____________________________________________________________________ |
| Received by: ____________________________________________________________ |
| Name, signature and Badge Number of law enforcement ____________________________ |
| Witnessed by: ____________________________________________________________ |

<table>
<thead>
<tr>
<th>DRUG</th>
<th>DOSAGE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acetaminophen/codeine</td>
<td>#3</td>
<td>62 tablets</td>
</tr>
<tr>
<td>Alprazolam</td>
<td>0.25 mg</td>
<td>30 tablets</td>
</tr>
<tr>
<td>Ambien</td>
<td>10 mg</td>
<td>198 tablets</td>
</tr>
<tr>
<td>Clonazepam</td>
<td>.5 mg</td>
<td>177 tablets</td>
</tr>
<tr>
<td>Codeine sulphate</td>
<td>30 mg</td>
<td>49 tablets</td>
</tr>
<tr>
<td>Concerta</td>
<td>27 mg</td>
<td>27 tablets</td>
</tr>
<tr>
<td>Darvocet</td>
<td>100 mg</td>
<td>6 tablets</td>
</tr>
<tr>
<td>Diazepam</td>
<td>5 mg</td>
<td>2 tablets</td>
</tr>
<tr>
<td>Duragesic</td>
<td>75 mcg</td>
<td>1 patch</td>
</tr>
<tr>
<td>Endodan</td>
<td>4.88/325</td>
<td>42 tablets</td>
</tr>
<tr>
<td>Hydrocodone -acetaminophen</td>
<td>650 mg</td>
<td>13 tablets</td>
</tr>
<tr>
<td>Hydrocodone/apap</td>
<td>5/500</td>
<td>120 tablets</td>
</tr>
<tr>
<td>Robitussin with codeine liquid</td>
<td>230 ml</td>
<td>4 white oval tablets</td>
</tr>
</tbody>
</table>

9
Collecting Unwanted Medications

doctor’s offices, clinic, or medical facilities – only household materials accepted

• Medications will be destroyed by incineration
• No refunds and medications will not be resold or used
• Where, when, hours of operation, and who to contact for more information
• No cost to participate

Advertising may include newspaper ads, flyers (posted at municipal buildings and pharmacies), press releases, and community cable announcements, email announcements distributed to groups, newsletters, websites companies, etc.

IV. The Collection Process – beginning to end

On the day of the collection, the event organizer will need to arrive on-site one hour before the event’s scheduled start time.

The contractor will need to drop-off containers at least one day before the event. The contractor should return for pick-up of the non-controlled medications and unused containers at the end of the scheduled event. Medications should never be stored on-site. It creates too great of a risk of theft.

Law enforcement should be on-site at least one-half hour before the event begins and should remain on-site until the hazardous waste hauler has completed all of its paperwork, closed the containers, and put the containers on the hazardous waste truck. At that time, the law enforcement official should return to their office, complete whatever paperwork is necessary, and secure the controlled substances in the evidence storage locker or take it directly for witnessed destruction.

Greeter and sorters should be on-site at least one-half hour before the event begins.

If data is to be entered into a computer, the data entry person should arrive at least one hour before the event starts in order to set up the laptop(s) and ensure that the printer is operational. This person will have to remain onsite until all of the medications have been segregated into controlled and non-controlled and the controlled medications inventory has been completed and printed.

Personal protective equipment and practices are important to protect everyone working the event. Everyone who may have contact the containers of medications must wear gloves (latex or non-latex) at all times when handling this material. Facemasks should be considered, especially for pharmacists and others who are doing the physical segregation of the medications.

Drinking or eating directly in the area that the medications are being collected and handled should be avoided – be sure to take off the gloves before handling any food or beverages. Used gloves should be discarded in the hazardous waste container and replaced with new gloves after any breaks.

Once everyone is on-site, set up and prepared, the collection can begin. Greeters will direct people to the collection and answer questions. If the collection is not accepting used sharps, greeters will ask participants if they are bringing any needles or sharps. If they say yes, the greeter will explain that the only needles that can be accepted are ones that are part of a drug delivery system; for example EpiPens™ and Lovenox™. If possible, the greeter can provide information about used sharps disposal programs. Other sharps will need to be taken back by the customer with disposal guidance. Greeters should also have markers so individuals bringing medications can mark out all personal information.

The greeter will then direct people bringing medications to place the materials in a plastic tub. It is essential that law enforcement be in a
Collecting Unwanted Medications

position to have visual contact with the individuals dropping off the medications at the point of drop-off.

Under observation by law enforcement, the sorter will remove any items that are not pharmaceuticals and place them in appropriate containers. The sorter will then pass the tub to the pharmacist.

The pharmacist will determine if a medication is a controlled substance. If it is a controlled substance (or an ‘unknown’), law enforcement will be alerted. (S)he should watch the physical inventory that will be conducted by the pharmacist and the return of the medications to the original vial. Then the vial of controlled substances should be placed in a container, usually a five-gallon pail with a screw-on lid.

If a written inventory is required, its completion should be observed by law enforcement. The controlled substances must then remain in the sole physical possession of law enforcement throughout the collection and until placed in the evidence storage locker or until destruction. At no time may the container of medications leave the physical possession of law enforcement.

At the end of the event, an inventory of controlled substances will be printed out, if required. The pharmacist will sign as a witness that the inventory accurately represents what went into the custody of law enforcement. The law enforcement official will sign as well, verifying that (s)he received these materials. An original of the signed and witnessed inventory will be provided to accompany the controlled substances back to the evidence storage locker or to destruction. Depending on the preference of the law enforcement agency, the inventory may be physically attached to the container of controlled substances, placed inside, or carried separately. The inventory should be printed and signed in duplicate, and the collection event organizer retains a copy for his/her records.

Depending on the type of container the law enforcement agency chooses for transporting and storing the controlled substances in the evidence storage locker, the law enforcement official may also be required to initial over a seal securing the container of medications – for example if a sealable plastic bag is used.

For security sake, law enforcement should stay on site until the container(s) of non-controlled substances are closed, labeled, and placed in the hazardous waste hauler’s truck, effectively removing them from the site and public access.

The hazardous waste company will seal containers, prepare paperwork, and transport non-controlled substances for solid or hazardous waste incineration, according to DOT requirements.

Controlled and non-controlled medications are packed separately. In both instances the medications are packed in their original containers.

There should be no loose pills in the hazardous waste container. Non-controlled substances in their original containers are placed in a hazardous waste drum or container for destruction. Sometimes pills will be brought in outside of the original container. It is important that the pharmacist (or other staff) make a best faith effort to identify the medication. This will include using reference materials. Once identified, put the medication in a sealable plastic bag and mark the bag with an indelible marker indicating the type of medication and dosage. If the tablets remain unidentifiable, mark the bag “unknown” and manage it as a controlled substance. It is possible to save space by removing unnecessary packaging, specifically pressboard outer-packaging. This is commonly found around blister packaging and around unopened bottles of over-the-counter medications.
Collecting Unwanted Medications

While the majority of non-controlled substances will go in one container, several types must be separated. Be sure to clarify in advance with the hazardous waste hauler what their packing requirements are as they relate to how the materials must be segregated. The following categories of medications are likely to require separate packing (in 5-gallon pails):

- Items under pressure
- Needle delivery medications
- Certain mercury-containing medications
- Nitroglycerin medications

Items under pressure are, most typically, inhalers. Use a five-gallon pail because it is very unlikely that you will receive more than this and smaller containers are generally not available. Remove the plastic housing from the inhalers in order to ship less material to the hazardous waste company. If pricing is by weight or volume, this can help control costs.

Medications such as EpiPen™ and Lovenox™ can usually be accepted by the hazardous waste hauler, but arrangements need to be made in advance. Some hazardous waste companies may require that nitroglycerin medications be packed separately.

Mercury-based antiseptics, such as Mercurochrome, may need to be packed separately. Mercury-containing preservatives, a more common form of mercury in medications, such as Thimerosal, do not require separate handling and can be packed with the rest of the non-controlled substances.

Although advertising for programs should specifically state not to bring thermometers, one or two will probably come in. They can be shipped with the mercury-containing medications, but preferably, the thermometers will be diverted to a mercury-recycling program.

Controlled substances should remain in their original containers. There can be no loose pills. There are no set rules for how the controlled substances should be packed or transported to the evidence storage locker. This is at the discretion of the law enforcement agency.

Inevitably, someone will bring materials that you might decide to put in the trash. For example: sun block, lipstick, deodorant, or skin cream. You will also throw out the rigid plastic housing from the inhalers.

Possible recyclables that will be generated include the cardboard over-packing from medications that can be removed around blister packs, plastic grocery bags, and cardboard boxes. Otherwise, this will be part of the solid waste stream.

V. Conclusion

The Indiana Unwanted Medicines Task Force thanks Northeast Recycling Council (NERC) for its cooperation and assistance in the development of this guide.

There is growing interest in and demand for environmentally responsible and legal ways to dispose of unwanted medications. Holding an unwanted medication collection event requires careful compliance with state and federal legal requirements. This guide provides a roadmap for conducting such an event.

VI. Additional Resources

- Indiana Department of Environmental Management
  Office of Pollution Prevention and Technical Assistance
  100 North Senate Avenue, MC 64-01, Room IGCS W041
  Indianapolis, Indiana, 46204-2251
  800-988-7901
  www.in.gov/recycle/6141.htm

- Indiana Board of Pharmacy
  402 W. Washington Street, Room W072
  Indianapolis, Indiana
  317-234-2067
  www.in.gov/pla/pharmacy.htm

- Illinois/Indiana Sea Grant
  On-line Unwanted Medicines Toolkit:
  http://iisgcp.org/unwantedmeds/index.html
VII. Helpful Websites for Identifying Drugs

- Drugs.com, www.drugs.com
- RxList, www.rxlist.com
- Healthline, www.healthline.com/pill-identifier
- AARP, http://healthtools.aarp.org

VIII. Appendices

Indiana code can be found on the Indiana General Assembly website at: http://www.in.gov/legislative/index.htm. Below are citations for code of interest to pharmaceuticals collection programs.

Article 48, (IC 35-48-1) Controlled Substances, Indiana Pharmacy Statutes and Rules defines all Controlled Substances in the State of Indiana as well as infractions making it illegal for a person to possess a Controlled Substance without a valid prescription or Drug Order.

IC 35-48-1-27 “Ultimate user” defined
Sec. 27. “Ultimate user” means a person who lawfully possesses a controlled substance for the person's own use, for the use of a member of the person’s household, or for administering to an animal owned by the person or by a member of the person's household.

Title 21 is the portion of the Code of Federal Regulations that governs food and drugs within the United States for the Food and Drug Administration (FDA), the Drug Enforcement Administration (DEA), and the Office of National Drug Control Policy (ONDCP). Title 21 can be found at www.fda.gov, look for the Code of Federal Regulations link.

IX. Sample Controlled Substances Inventory Form - See page 14.
**Federally Controlled Substances Received**

<table>
<thead>
<tr>
<th>DRUG</th>
<th>DOSAGE</th>
<th>AMOUNT or NUMBER of PILLS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Date:  
Received by: *Name and signature of law enforcement*  
Witnessed by: *Name and signature of pharmacist*
For information or questions about this guide:

Steven Boggs
800-988-7901 or (317) 233-6660
sboggs@idem.in.gov

Pollution Prevention and Recycling Branch
Office of Pollution Prevention and Technical Assistance
Indiana Department of Environmental Management
100 North Senate Avenue, MC 6401
Room W041, Indiana Government Center South
Indianapolis, Indiana 46204-2251

Collecting Unwanted Medications can be found at www.in.gov/recycle.