

# Eight Principles for Managing Prescription Medications in the Athletic Training Room

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Over the last 10 years the use of prescription and over-the-counter medications in the athletic training room has increased exponentially. This is a result, in part, of new medications being introduced to the marketplace that are specifically designed for sports medicine, an increased economy affording a wider variety of services for athletes, more

physicians specializing in team sports, and older athletic training rooms being updated, remodeled, or rebuilt to include physician offices, exam rooms, and dispensing areas. These increases in drug use should be incrementally reflected in management systems for ordering, storing, dispensing, and administering medications. There have been many changes over the last 10 years to the state and federal regulations concerning the handling of

medications by team physicians wishing to administer or dispense medication in the athletic training room (see the sidebar).

The purpose of this article is to suggest some general principles or guidelines that every professional, university, or college sports-medicine department should add to their existing policies and programs. These suggestions

should be considered minimum criteria, and in fact an aggressive program could incorporate up to 10 times this number.

## The Problem

There have been many reports and allegations from across the country concerning professional teams and private universities and colleges with regard to inappropriate handling of prescription and over-the-counter medications. State and federal rules and regulations have been violated. In some cases, arrests, fines, and citations have been levied. In most cases those involved have lost their jobs or had their positions dramatically changed.

If you are currently working as a certified athletic trainer, physical therapist, or team physician in an athletic training room, also referred to as an athletic training medical office, it is vital that your facility implement policies and procedures to help manage the handling of prescription medications. State and federal regulations are applicable whether or not the facility has an inventory of a single medication or an entire team-physician pharmacy.

According to Kahanov et al.'s<sup>1</sup> 2003 study investigating the adherence to drug-dispensing and -administration laws and guidelines for college athletic training rooms, there has not been an improvement in the handling of medications at the university and college level over the last 10 years. This might be because quite often the “old guard” is teaching the “new guard” without implementing

## KEY POINTS

▶ Prescription and over-the-counter medications have serious state and federal restrictions when used in athletic training rooms.

▶ It is time for our industry to become proactive in the policies and procedures for managing medications in the athletic training room.

▶ You should be aware of the various state and federal regulations that might affect you if you are handling prescription medications in the athletic training room.

▶ Key Words: team physician, sample drugs, repackaging, sports pharmacy

## Federal Regulations Specific to Managing Prescription Medications in Athletic Training Medical Facilities

### Prescription Drug Marketing Act

- 21 C.F.R. 5.115—Sample-medication control
- 21 C.F.R. 1301.23(1)—DEA certificate required for separate locations
- 21 C.F.R. 1301.75—Storage of controlled substances
- 21 C.F.R. 1301.44—DEA certificate readily retrievable
- 21 C.F.R. 1301.90—Security of personnel for handling of controlled substances
- 21 C.F.R. 1304.4—Record-keeping requirements for controlled substances
- 21 C.F.R. 1304.02(d)—Definition of a physician who prescribes, administers, and dispenses controlled substances
- 21 C.F.R. 1304.11-12(b)—Inventory requirements for controlled substances
- 21 C.F.R. 1304.13—Reconciliation requirements for controlled substances
- 21 C.F.R. 1305.12—Reporting a theft of a controlled substance
- 21 C.F.R. 1301.92—Responsibility to report drug diversion

### Food, Drug, and Cosmetic Act

- 21 U.S.C. 360(g)—Requirement to utilize an FDA-licensed pharmacy repackager
- 21 U.S.C. 353(b)(2)—Labeling of prescription medications

### Poison Prevention Packaging Act

- 15 U.S.C. 1471—Packaging of controlled substances and prescription medications
- 15 U.S.C. 1473 (b)—Exception to PPPA for prescriber dispensing of non-child-safety container

### Federal Controlled Substance Act

- 21 U.S.C., 824(a)(f)—DEA certificate required
- 21 U.S.C. 802(10)—Prescriber dispensing
- 21 U.S.C. 823 (f)—DEA certificate required for separate locations
- 21 U.S.C. 802(10)—Definition of a dispensing physician vs. an individual practitioner
- 21 U.S.C. 827<sup>(c)</sup>(1)(A)(B)—Acquisition and disposition record-keeping requirements for individual practitioners dispensing controlled substances

many of the new regulations approved by our government on an ongoing basis. It could also be because of the lack of properly educating and informing our athletic and medical directors, inadequate teaching of the fundamentals in school to our future certified athletic trainers, or the team physicians not comprehending the full scope of the responsibility placed on their licenses. I believe that pushing forward with educating and informing those involved in any way whatsoever in the management of prescription medications is a primary way to have a positive impact in the athletic setting.

### Eight Principles

I am suggesting that the following eight principles be implemented in universities and colleges across the

country as an initial step toward establishing practice standards for the management of prescription medications in athletic training rooms.

### Develop and Continually Revise a Policy and Procedure Manual (PPM)

The PPM is the first step toward managing prescription and over-the-counter medications and is used as the “road map” and instruction guide for all athletic trainers, medical staff, and team physicians authorized to assist with the management of prescription medications. The PPM should include policies and procedures describing the systems for ordering, receiving, storage, security, dispensing, administration, treatment, transportation, disposal, inventory, and audit and reconciliation. The PPM should be renewed, reviewed, and