

Carrying Forward Medication

ANY medication that remains from the previous month, which is within its manufacturer's expiry date and is still prescribed for that person, **CAN** be carried forward to the next medication cycle.

It should **NOT** be returned to the pharmacy for destruction, destroyed on site or a new supply requested if there is enough for the next medicines cycle.

To support trained care staff to make this decision it is important for all staff to:

- ✓ Record the date of opening of medications that have a limited expiry (e.g. eye drops, nasal sprays, some liquids) on the dispensing label, or a 'Date Opened' sticker.
- ✓ Record the quantity carried forward as a separate figure to a newly received quantity. This provides a full audit trail and enables internal audits to be carried out more easily. (See example MAR sections).
- ✓ Ensure 'when required' medicines are dispensed in their original packaging so the manufacturer's expiry can be seen on the packaging.
- ✓ Avoid unnecessary use of monitored dosage systems (MDS).
- ✓ Changes made to prescribed medications should be promptly actioned according to the care home medicines policy.

Steps when recording the 'Carry Forward' balance:

1. Check the label on the dispensed medication to make sure it is the same as the new Medicines Administration Record (MAR):
 - ✓ the person's name
 - ✓ name, strength, and formulation of the medication
 - ✓ directions and dose.
2. Check the medication is still within its expiry date
 - ✓ see packaging for the manufacturer's expiry date
 - ✓ see Patient Information Leaflet (PIL) for further details of any guidance on reduced expiry after opening.
3. Physically count the quantity of medicine and enter onto the MAR in the box provided (highlighted orange in the example MAR).
4. Record the date and the initials of the person responsible for making the entry.

Example MAR – Carrying forward medication:

- A person is prescribed Paracetamol 500mg tablets, 1-2 tablets four times a day when required.
- Last month they had a prescription for 100 tablets but did not take them that often.
- This left 48 tablets at the end of the month.
- They are still being prescribed Paracetamol so the remaining tablets can then be carried forward.

				Commencing		Week 1							Week 2							Week 3							Week 4						
Medication Profile				Time: Dose		1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Paracetamol 500mg Tabs 1-2 tablets four times a day, when required				8:00																													
				12:00																													
				16:00																													
				20:00																													
Dr Sig.		Carried forward	48	recd.			quant.				by				returned: destroyed				quant.				by										
Commenced			route																														

- Depending on how many tablets are taken this month, some more Paracetamol may need to be ordered for the following medicines cycle.
- Any carry forward stock should be noted in the **carry forward box**.
- Any newly received stock should be entered in the **received box**.
- This gives a balance of the **total** quantity at the start of 'Day 1' of that medicines cycle.

				Commencing		Week 1							Week 2							Week 3							Week 4							
Medication Profile				Time: Dose		1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3	4	5	6	7	
Paracetamol 500mg Tabs 1-2 tablets four times a day, when required				8:00																														
				12:00																														
				16:00																														
				20:00																														
Dr Sig.		Carried forward	12	recd.	100	quant.		112	by		returned: destroyed				quant.				by															
Commenced			route																															

All medicines received into the home must be accounted for.

The figures detailed on each residents' MAR should **accurately reflect the physical stock**.

There should be a complete audit trail:

- ✓ order
- ✓ supply
- ✓ administration/use
- ✓ disposal (if appropriate).

If this is not correctly documented at the start of the new medication cycle, it will make auditing difficult.