

Weigh Method for Controlled Drug Log/Audit

Equipment:

- Scale (0.01g preferred)
- Bottles you are auditing
- Audit log sheet
- Dispensing log sheets

** Weigh the medications on the same surface each time. Varying surfaces will alter your weight ** ** Using the weighing method on your dispensing logs and audit sheets is the gold standard**

Pros for the weighing method:

- FASTER!
- More accurate- accounts if bottles are under/over filled
- Less chance of contamination/ mix up of drugs
- Less drug loss (no hub loss)
- Less supply wastage

Using the Dispensing Log Sheet:

- **Place bottle of medication on the scale prior to drawing from it**
- **Record the weight- Start Weight**
- Draw the medication from the bottle and reweigh the bottle
- Record the end weight-End Weight
- Record the mLs drawn up, including hub loss
- The next patients start weight should be the end weight of the previous entry. If it is a big discrepancy, it will need investigating (entries missed?)

Auditing:

- Done with two people that the DR has specified to do audits. Can also be the DR themselves.
- **If using the weighing method on your dispensing log:**
- Record the last end weight from your dispensing log in the expected amount column
- Weigh the bottle (measured/actual amount column)

- The weight should be the same as the last recorded End Weight from your dispensing log
- **If using mls on your dispensing log and weights in your audit log:**
- Take the weight from your last audit and using $1\text{mg}=1\text{ml}$ calculate your expected weight of drugs used since your last audit from your dispensing log (remember to add in for hub loss too). Subtract the weight of the drugs used since your last audit. (enter it in the expected amount column)
- Weigh the bottle- they should be close (measured/actual amount column)
- Any discrepancies will need to be investigated for the differences. See below.
- Add notes to your audit log to explain the volume discrepancy
- Closed bottles can be recorded as full if the seal is not removed
- Both individuals sign off on the audit

If volumes do not match:

- Check the math from previous entries
- Check that you are accounting for hub loss (usually 0.05 ml/withdrawal)
- Check the surgery log for any missed entries
- Check computer for any charges that have been missed
- Reweigh the bottles for a final check
- Add notes to your audit log to explain the volume discrepancy
- If there is an irreconcilable loss or theft of drugs, it must be reported to the police immediately and to Health Canada within 10 days.

Tips:

- Weight your bottles on receipt and mark on your invoice or inventory log with your expiry dates, lot #'s etc.
- Can enter the weight on your bottle too
- Start new dispensing log sheets for each bottle/box (enter starting weight upon receipt ideally)
- Drugs are not exactly $1\text{gm}=1\text{ml}$ but it is close- you can calculate the exact g/ml if you prefer for your calculations
- *We are tracking trends for volumes under or over at the end of each bottle*