Care Home Medication Returns

Date	Patient name	Medication	Strength	Quantity	Discontinued	Deceased	Date Expired	Other Appropriate Waste (specified)	Signature

(use this form if you do not already complete medication return documentation for your pharmacy)

Notes: Medication should only be returned for one of the four reasons listed above. Food supplements, non-medicated dressings and appliances such as catheters or stoma bags can be disposed of in the general waste providing all patient identifying material, i.e. dispensing label has been removed.

I verify that the medication returns dated have been checked by myself as care home manager (or nominated deputy in the absence of manager) and meet NHS Borders procedures for medication returns and wastage.

Care h	ome	manager	signature:
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Date: