

1
2
3 Title: Safe Disposal of Controlled Substances Prescribed for Home Hospice
4 Patients

5
6 Introduced by: David Whalen, MD, for the Kent County Delegation

7
8 Original Author: Jayne E. Courts, MD, FACP

9
10 Referred To: Reference Committee B

11
12 House Action: WITHDRAWN BY AUTHOR
13

14
15 Whereas, patients who have a terminal illness often elect to receive hospice care, and

16
17 Whereas, many hospice patients choose to receive hospice care in their private
18 residence/home due to the often-cited preference to die at home, and

19
20 Whereas, patients in hospice care often receive controlled substances, including but not
21 limited to opioid-containing medications or benzodiazepines, to ease pain and discomfort, and/or
22 agitation during the dying process, and

23
24 Whereas, the controlled substances may be accessible to family members, people who live
25 in the home, and visitors to a patient's home during the dying process and shortly after the
26 patient's death, and

27
28 Whereas, safe disposal of these controlled substances may be performed by the hospice
29 nurse, family members, or people who live in the home with proper instruction, and

30
31 Whereas, this potential access to controlled substances may lead to other people misusing
32 the controlled substances, potentially fostering or supporting the development of substance use
33 disorder; therefore be it

34
35 RESOLVED: That MSMS collaborate with the Michigan Home Care and Hospice Association
36 to determine safe disposal guidelines for controlled substances that have been dispensed for
37 hospice patients in the home-based setting that are no longer needed after the patient has died;
38 and be it further

39
40 RESOLVED: That the Michigan Delegation to the American Medical Association (AMA) ask
41 our AMA to collaborate with the National Hospice and Palliative Care Organization and other
42 stakeholders to determine safe disposal guidelines for controlled substances that have been
43 dispensed for hospice patients in the home-based setting that are no longer needed after the
44 patient has died.
45

46
47 WAYS AND MEANS COMMITTEE FISCAL NOTE: \$2,000-\$4,000 to engage in collaborative outreach
48 activities.

Relevant MSMS Policy:

None

Relevant AMA Policy:**Proper Disposal of Unused Prescription and Over-the-Counter (OTC) Drugs H-135.936**

1. Our AMA supports initiatives designed to promote and facilitate the safe and appropriate disposal of unused medications.
2. Our AMA will work with other national organizations and associations to inform, encourage, support and guide hospitals, clinics, retail pharmacies, and narcotic treatment programs in modifying their US Drug Enforcement Administration registrations to become authorized medication collectors and operate collection receptacles at their registered locations.
3. Our AMA will work with other appropriate organizations to develop a voluntary mechanism to accept non-controlled medication for appropriate disposal or recycling.

Safe Use, Storage and Disposal of Leftover Opioids and Other Controlled Substances D-95.971

Our AMA and its Opioid Task Force: (1) will continue to adapt current educational materials to distribute to prescribers and patients, emphasizing the importance of safe storage and disposal of opioids, and encouraging prescribers and patients to investigate and advocate for more local drug take back programs; (2) encourages all prescribers to work with local organizations and pharmacists to develop and disseminate the most up-to-date information on local Take Back resources; and (3) will continue to educate all prescribers on the importance of optimal use of opioids, including appropriately limiting the quantities of opioid prescriptions and advocating for e-prescription capabilities for controlled substances.