



**Department
of Health**

NEW YORK STATE DEPARTMENT OF HEALTH BUREAU OF NARCOTIC ENFORCEMENT

***Application to Conduct a Pharmaceutical Collection Event
(Controlled Substances)***

Instructions and Application (DOH-4446)

*[Instructions and Application are available on the
DOH website as separate downloads]*

www.health.ny.gov/professionals/narcotic/

**New York State Department of Health
Bureau of Narcotic Enforcement
Riverview Center
150 Broadway
Albany, New York 12204**

866-811-7957

narcotic@health.ny.gov

January 2019

The New York State Department of Health's Bureau of Narcotic Enforcement is responsible for approving the manner and detail of disposal/ destruction of controlled substances by those entities registered by the Federal Drug Enforcement Administration, as well as those licensed by the Department of Health. Similarly, disposal of household pharmaceuticals is guided by the New York State Department of Environmental Conservation. The Departments of Health and Environmental Conservation have developed a collaborative approval process for community-sponsored pharmaceutical collection events as one method of ensuring proper pharmaceutical disposal that both protects the environment and minimizes the potential for diversion. While pharmaceutical collection events have, to date, been limited to the disposal of household pharmaceuticals, the disposal of pharmaceutical waste generated by facilities/programs licensed by the Department of Health as Class 3A Institutional Dispensers Limited may now also be managed at such events, subject to very specific conditions and approvals, as outlined below.

Pharmaceutical collection events require approval by the Department of Health's Bureau of Narcotic Enforcement and the Drug Enforcement Administration.

Contact information for each agency can be found on Page 2 of these instructions.

The pharmaceutical collection event application process encompasses reasonable requirements and procedural safeguards to ensure that controlled substances surrendered are not subject to diversion. **Specifically, law enforcement must be on-site at all times during each event and take immediate possession of all controlled substances surrendered for subsequent disposal.**

Since the inception of the pharmaceutical collection event program, it has been the preference of the Bureau of Narcotic Enforcement that licensed pharmacists be involved in the events to identify and inventory controlled substances. The Bureau's goal has been to ensure that any controlled substances surrendered to law enforcement for subsequent disposal are accurately identified and accounted for. However, in cases where law enforcement takes possession of **all** pharmaceuticals (both controlled and non-controlled) surrendered at an event, the identification and inventorying of controlled substances becomes essential only for purposes of evaluation. Accordingly, the involvement of a pharmacist is not required (but most certainly welcomed). If law enforcement takes possession of controlled substances only, the participation of a licensed pharmacist is required to ensure that the controlled substances are accurately identified and not integrated with any non-controlled substances collected.

To obtain approval to conduct a pharmaceutical collection event, an ***Application to Conduct a Pharmaceutical Collection Event (Controlled Substances)*** must be submitted to the Bureau of Narcotic Enforcement **at least 30 days in advance of the event**, along with supporting documentation, including:

- ✓ An event plan which outlines the logistics of the event, including site, collection information, and security arrangements.
- ✓ A letter from the law enforcement agency, on their agency letterhead, to be present at the event, which includes a statement that the agency agrees to take possession of all controlled substances surrendered during the event, as well as a plan for their ultimate disposal.

****SEE PAGE 2 FOR PHARMACEUTICAL COLLECTION EVENTS SPONSORED BY
CLASS 3A FACILITIES/PROGRAMS****

Pharmaceutical Collection Events Sponsored by Class 3A Facilities/Programs

A facility/program licensed by the Department of Health as a Class 3A Institutional Dispenser Limited may sponsor a pharmaceutical collection event to manage the disposal of pharmaceutical waste subject to the following conditions:

- ✓ Each event must be open to households and publicized accordingly. At the discretion of the sponsoring facility/program, the event may be open to other Class 3A facilities/programs.
- ✓ Pharmaceuticals surrendered by Class 3A facilities/programs must be kept segregated from the waste surrendered by the public.
- ✓ No Class 3A facility/program may dispose of any pharmaceutical waste that is classified as hazardous, including conditionally exempt small quantity generator (CESQG) waste, at a collection event sponsored by a Class 3A facility/program. Pharmaceuticals generated by a facility/program that are classified as hazardous wastes are subject to applicable Department of Environmental Conservation regulations. All generators of solid waste are responsible for determining whether the waste is hazardous. Additional information may be obtained at the Department of Environmental Conservation's web site at: www.dec.ny.gov.
- ✓ Each event sponsored by a Class 3A facility/program requires a separate Department of Health Bureau of Narcotic Enforcement approval.
- ✓ The sponsoring Class 3A facility/program must obtain written approval from the disposal facility to dispose of surrendered pharmaceuticals.
- ✓ Class 3A facilities/programs seeking to dispose of pharmaceutical waste by sponsoring or participating in a pharmaceutical collection event must complete and submit to the applicable Bureau of Narcotic Enforcement office the requisite disposal/destruction forms identifying all controlled substances to be surrendered at the event.

Submit the application DOH-4446, along with any other documentation required:

Emailed submissions preferred to: narcotic@health.ny.gov

Or, mail to:

New York State Department of Health
Bureau of Narcotic Enforcement
Riverview Center
150 Broadway
Albany, New York 12204

Questions? Email narcotic@health.ny.gov

New York State Department of Health
Bureau of Narcotic Enforcement
Riverview Center
150 Broadway
Albany, New York 12204
1-866-811-7957

www.health.ny.gov/professionals/narcotic/

U.S. Department of Justice
Drug Enforcement Administration
New York Division
99 Tenth Avenue
New York, New York 10011
(212) 274-4520

<https://www.deadiversion.usdoj.gov>

Application to Conduct a Pharmaceutical Collection Event (Controlled Substances)

****PLEASE PRINT OR TYPE****

APPLICANT INFORMATION			CONTACT INFORMATION	
Applicant Name			Contact Name	
Street			Title	
City	State	Zip	Telephone	
Telephone	County		Fax	
Class 3A License # (if applicable)			E-Mail	

EVENT INFORMATION				
Site# 1: <i>(If more than one date or location will be used, list locations on page 2)</i> <input type="checkbox"/> Multiple Locations <input type="checkbox"/> Household Event <input type="checkbox"/> Institutional/Household Event				
Date of Event	Start Time	End Time	Location Name and Address Where Controlled Substances Will be Collected	
Law Enforcement Agency to be Present				
On-Site Law Enforcement Contact			On-Site Telephone	
On-Site Applicant Contact			On-Site Telephone	
<input type="checkbox"/> Law Enforcement will take possession of all pharmaceuticals (both controlled and non-controlled) <input type="checkbox"/> Law Enforcement will take possession of controlled substances only (Note: The participation of a licensed pharmacist is required)				
On-Site Pharmacist (if applicable) (attach additional names/license # as necessary)			License #	

SUPPORTING DOCUMENTATION
Attach the following documentation to the application: <input checked="" type="checkbox"/> An event plan which outlines the logistics of the event, including site, collection information, and security arrangements. <input checked="" type="checkbox"/> A letter from the law enforcement agency to be present at the event, on agency letterhead, which includes a statement that the agency agrees to take possession of all controlled substances surrendered during the event, as well as a plan for their ultimate disposal.

APPLICANT SIGNATURE	
I hereby attest that I am authorized by the applicant to sign this application and that no controlled substances will be collected or surrendered without written authorization from the New York State Department of Health's Bureau of Narcotic Enforcement. Upon authorization, I attest that the applicant will comply with all requirements set forth by the Bureau of Narcotic Enforcement, the Department of Environmental Conservation for the disposal of pharmaceuticals surrendered, and that all activities will be conducted in accordance with all Federal, state and local laws.	
Name	Title
Signature of Applicant (or Authorized Representative)	Date

Email documents to:
narcotic@health.ny.gov

Or
Fax documents to:
518-402-0709

Or
Mail, only if necessary to:
Bureau of Narcotic Enforcement
Riverview Center
150 Broadway
Albany, NY 12204

Office Use Only	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Approved by	
Name	
Log #	
Date	

EVENT INFORMATION			
Site# 2: <input type="checkbox"/> Household Event <input type="checkbox"/> Institutional/Household Event			
Date of Event	Start Time	End Time	Location Name and Address Where Controlled Substances Will be Collected
Law Enforcement Agency to be Present			
On-Site Law Enforcement Contact			On-Site Telephone
On-Site Applicant Contact			On-Site Telephone
<input type="checkbox"/> Law Enforcement will take possession of all pharmaceuticals (both controlled and non-controlled) <input type="checkbox"/> Law Enforcement will take possession of controlled substances only (Note: The participation of a licensed pharmacist is required)			
On-Site Pharmacist (if applicable) (attach additional names/license # as necessary)			License #

EVENT INFORMATION			
Site# 3: <input type="checkbox"/> Household Event <input type="checkbox"/> Institutional/Household Event			
Date of Event	Start Time	End Time	Location Name and Address Where Controlled Substances Will be Collected
Law Enforcement Agency to be Present			
On-Site Law Enforcement Contact			On-Site Telephone
On-Site Applicant Contact			On-Site Telephone
<input type="checkbox"/> Law Enforcement will take possession of all pharmaceuticals (both controlled and non-controlled) <input type="checkbox"/> Law Enforcement will take possession of controlled substances only (Note: The participation of a licensed pharmacist is required)			
On-Site Pharmacist (if applicable) (attach additional names/license # as necessary)			License #

EVENT INFORMATION			
Site# 4: <input type="checkbox"/> Household Event <input type="checkbox"/> Institutional/Household Event			
Date of Event	Start Time	End Time	Location Name and Address Where Controlled Substances Will be Collected
Law Enforcement Agency to be Present			
On-Site Law Enforcement Contact			On-Site Telephone
On-Site Applicant Contact			On-Site Telephone
<input type="checkbox"/> Law Enforcement will take possession of all pharmaceuticals (both controlled and non-controlled) <input type="checkbox"/> Law Enforcement will take possession of controlled substances only (Note: The participation of a licensed pharmacist is required)			
On-Site Pharmacist (if applicable) (attach additional names/license # as necessary)			License #

If more than 4 locations or separate dates will be used during this event,
use page 2 of a second DOH-4446 form to list additional locations.