

Guidance on the Expiry Dates and Storage of Medicine in Care Homes (With or without nursing)

There is much confusion about the issue of expiry dates within care homes. This has led to issues with patient safety and the wastage of medication. National guidance is not available for all products and this guidance will improve patient safety; reduce wastage and support sensible medicine use in care homes.

As part of good medicines management, patients should receive medication that is “in date”

- To ensure that the active ingredients are fully effective
- To reduce the risk of contamination
- To ensure that it is safe to use

The expiry date (use by date) for any medication is calculated by the manufacturer and it is a legal requirement for it to be printed on the original container from the manufacturer.

Medicines may go “out of date” because of:

- Inefficient prescribing or re-ordering systems
- Stockpiling
- Receiving excessive quantities
- Poor stock rotation and not checking expiry dates (ensure the community pharmacist provides a batch number and expiry date on any medicines decanted from bulk containers)

When required (PRN) medicines:

NICE Guideline SC1 Managing medicines in care homes states:

- *Care homes staff (registered nurses and social care practitioners working in care homes) should ensure that “when required” medicines are kept in their original packaging.*
- *Can be carried forward each month following the expiry guidance as given overleaf*
- *Should be stock rotated to ensure that the oldest medicines are used first*
- *Must NOT be returned and re-ordered each month but carried over to the next month and recorded on the MAR chart to complete the audit trail*

Key points for basic storage conditions

- Keep all medication in the original container in which they were dispensed and ensure it is only used for the person for whom it was prescribed.
- Keep medicines in their original outer packaging, to protect from sunlight
- All medicines should be stored in a cool (below 25°C) dry place unless refrigeration is required (between 2°C and 8°C) – temperatures should be recorded daily and a documented process should be in place should the temperature fall out of range.
- The expiry date of the product can change once opened
- Record the date opened and the calculated expiry on the medicine package/label
- Store as recommended by the manufacturer and be vigilant with product expiry dates
- Seek advice from the community pharmacist if medicines are found to have been stored outside their intended conditions or if their dispensing labels become illegible e.g. on creams etc. Do not discard on this basis alone.

Multi-Compartment Aids Guidance

The appropriate use of Multi-Compartment Aids (MCA) - formerly known as MDS is included within Hereford Guidance for Health and Social Care Professionals [here](#) which should be consulted to ensure these packs are only provided to support patient independence in self- management of medicines.

Before ordering each month a care home nominated member of staff (or their deputy) should:

- **Check the current stock levels of medication**, especially items which are not supplied in individually packed multi-compartment aids or stored on the medicines trolley.
- **Some residents may need a medication review** (GP or pharmacist will check patient's medicines to revise items / quantities prescribed in the future)
- **Report excessive quantities returned regularly** – ask the GP to review if it still needed, or to prescribe smaller quantities.

| Formulation | Recommend expiry date |
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| Tablets and capsules packed into Multi-Compartment Aid (MCA) or Monitored Dosing System (MDS) | 2 months from date of dispensing or as printed on the back of the blister pack. |
| Tablets and capsules – in original blister/foil pack e.g. prn medicines | Manufacturer's expiry date.(Do not mix batches and only order when necessary) |
| Tablets and capsules – loose i.e. put into a bottle by the pharmacy | 6 months from the dispensing date or manufacturer's recommendation where shorter |
| Liquids (internal) | 6 months from date of opening or manufacturer's recommendation where shorter – mark date of opening on container |
| Liquids (external) | 6 months from date of opening or manufacturer's recommendation where shorter – mark date of opening on container |
| Ointment/creams in tubes or with a pump dispenser | 6 months from date of opening or manufacturer's recommendation where shorter. For unopened creams follow the manufacturer's expiry date |
| Ointments/creams in tubs with lid | 3 months from date of opening or manufacturer's recommendation where shorter. For unopened creams follow the manufacturer's expiry date |
| Suppositories/pessaries/rectal tubes/patches | Manufacturer's expiry date |
| Inhalers | Manufacturer's expiry date. Do not order routinely each month if used on a PRN basis. |
| Ear/nose drops and sprays | Discard 3 months after opening unless manufacturer advises other wise |
| Eye drops | Discard 1 month after opening unless manufacturer advises other wise |
| Injections (except insulin) | Manufacturer's recommendation |
| Insulin | Insulin should be stored in the fridge 2°- 8°C and can be kept unopened until the expiry date. Once opened it can be stored outside of the fridge and used for up to 28 days |

Some products now show an expiry date symbol e.g. . However in the care home setting where storage conditions may be variable it is recommended that the above suggested expiry dates are followed. Store all medicines in a cool dry place under 25°C unless refrigeration is required (between 2°C and 8°C) with daily recording and process in place should temperature fall out of range.

This table is believed to accurately reflect the literature at the time of writing. However, users should always consult the literature and take account of new developments because these may affect this guidance including the Summary of Product of Characteristics for any specific preparation through <https://www.medicines.org.uk/emc/>

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