## 641—109.8(135M) Forms and record keeping.

**109.8(1)** The following forms developed for the administration of this program shall be utilized by participants of the program and are available on the program's Web page on the department's Web site, www.idph.state.ia.us.

*a.* Prescription drug donation repository program notice of participation or withdrawal.

*b.* Prescription drug donation repository program donation, transfer, inventory or destruction record.

c. Prescription drug donation repository program recipient intake form and identification card.

*d.* A record of medications dispensed.

**109.8(2)** Record-keeping requirements.

*a.* All records required to be maintained as a part of the prescription drug donation repository program shall be maintained for a minimum of five years by participating pharmacies and medical facilities.

*b.* Records required as part of this program shall be maintained pursuant to all current applicable practice acts.

*c.* Data collected by the prescription drug donation repository program from all participating repositories shall be submitted quarterly or upon request to the centralized repository. The data will consist of the information collected in accordance with 641—109.8(135M), Forms and record keeping.

*d.* The centralized repository and the contractor shall submit reports to the department as required by the contract or upon request of the department.