



U.S. Department of Justice
Drug Enforcement Administration

Washington, D.C. 20537

MAR 26 1990

Michael J. Mestrovich, Ph.D.
Deputy Assistant Secretary of Defense
Health Management Systems
5109 Leesburg Pike, Suite 502
Falls Church, Virginia 22041-3201

Dear Dr. Mestrovich:

On October 31, 1989, two Drug Enforcement Administration (DEA) representatives traveled to Madland Army Hospital, Louisville, Kentucky to witness a demonstration of the Composite Health Care System (CHCS) in operation.

As a result of the demonstration the DEA will grant an exception to Title 21 of the Code of Federal Regulations (CFR), Section 1306.05(a) which requires practitioners to write prescriptions for Schedule II controlled substances in ink or indelible pencil or a typewriter. The regulation also requires prescriptions to be manually signed by the practitioners. The exception also extends to 21 CFR 1306.11(c) which requires hospitals to dispense Schedule II controlled substances only pursuant to written prescriptions signed by a physician or pursuant to a hospital medication order.

This exception, as set forth below, applies only within the Military Medical Treatment Facility (MTF) and not to prescriptions to be filled in community pharmacies. This exception is contingent upon sign-on procedures which will replace the physician's written signature and requires physicians to enter two sign-on codes to gain access to the system menu.

A. Sign on Procedure for Individual Physicians:

One access code is issued by the Security Officer and the second is devised by the physician. The physician will be the only person who has knowledge of the alpha-numeric elements that comprise the second access code. Security considerations require the physician to change the code at least every six months and, if he or she desires, to change the code on a daily basis. This procedure shall insure the integrity of the system and prevent unauthorized access to the computer. Any breach of the system is to be investigated by the Security Officer who issued the access code as set forth above. Any breach in the system is also to be reported upon discovery to the DEA office having jurisdiction where the breach occurred.

B. Dispensing Controlled Substances:

Prescriptions written by military physicians using the CHCS will be required to be filled in a MMTF. If it is necessary for a patient to have a prescription filled in a community pharmacy, the physician will be required to write a traditional prescription and sign it as required by 21 CFR 1306.05(a).

C. Security Considerations:

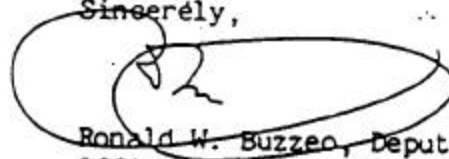
The CHCS will be subject to inspection by DEA investigators. The inspections will be confined to the controlled substance aspects of the system, which will include the security and recordkeeping requirements as specified in the 21 CFR Part 1300 to end.

It is necessary for all installations with CHCS to conduct record keeping and security operations in compliance with these regulations.

I would like to take this opportunity to thank Colonel Haines, Colonel Coburn, Colonel Shelton, Lieutenant Colonel Browning, Lieutenant Colonel Wright, and Lieutenant Colonel Schroeder for the assistance they provided this office. The background material provided both before and after the tour of Ireland Army Hospital was beneficial in assisting this office in its decision to grant the exception.

If you have any questions feel free to contact me at (202) 307-7163.

Sincerely,



Ronald W. Buzzeo, Deputy Director
Office of Diversion Control