



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

**ROY COOPER** • Governor

**MANDY COHEN, MD, MPH** • Secretary

**BETH LOVETTE, MPH, BSN, RN** • Acting Director, Division of Public Health

March 27, 2019 (replaces memo dated January 19, 2016)

To: North Carolina Local Health Directors  
North Carolina Communicable Disease Nurse Supervisors  
From: Zach Moore, MD, MPH, State Epidemiologist  
Re: **Drug Diversion by Healthcare Providers**

The purpose of this memo is to remind local health departments about a problem with serious consequences for patient safety: drug diversion by healthcare providers. Drug diversion is the act of illegally obtaining prescription medications by a healthcare worker for his or her own use. This can result in several types of patient harm, including:

- Substandard care delivered by an impaired healthcare provider,
- Denial of essential pain medication or therapy, or
- Risk of infection (e.g., with hepatitis C virus or bacterial pathogens) if a provider tampers with injectable drugs.

Diversion involving injectable medications or injection equipment has been linked to multiple outbreaks of bacterial and viral infections nationwide, including six outbreaks between 2004 and 2014 that collectively resulted in more than 100 infections and 30,000 potential exposures. To date, no outbreaks or infections linked to drug diversion have been reported in North Carolina. However, we have been notified of instances in which healthcare workers diverted injectable medications, posing a potential risk for disease transmission.

The North Carolina Division of Public Health's Surveillance for Healthcare Associated and Resistant Pathogens Patient Safety Program has been working with medical, law enforcement, and other partners to increase awareness about drug diversion and help health care facilities prevent, detect, and respond to drug diversion. Additionally, we are working to assure that a complete assessment of infection risk occurs (in coordination with local health department communicable disease staff) whenever diversion of injectable medications is identified.

We recommend that local health department staff maintain awareness of the risks associated with drug diversion and recognize the roles public health agencies might be called upon to play when these events are identified. These could include facilitating appropriate testing of healthcare workers suspected of drug diversion (e.g., HIV, hepatitis B virus, hepatitis C virus), assessing the risk of exposure, and/or facilitating notification of patients who were potentially exposed.

More information and resources are available at [www.cdc.gov/injectionsafety/drugdiversion](http://www.cdc.gov/injectionsafety/drugdiversion) or by contacting the North Carolina Division of Public Health at 919-733-3419.

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