

**Effective Date: March 4, 2003**

*GEORGETOWN-SCOTT COUNTY EMERGENCY MEDICAL SERVICES*

**Controlled Substance Guidelines**

**PURPOSE:** The purpose of this policy is to provide a consistent and understandable method for control and recording of Controlled Medications maintained and administered by GSCEMS.

**SCOPE:** This policy applies to all EMT's, Paramedics, Supervisors and Administrators of GSCEMS.

**OVERVIEW:** This guideline has been created to develop a method for the maintenance and control of Controlled medications maintained within the Service. Provided within this guideline are various methods of control, distribution, security and recording requirements. While it is not within the scope of this guideline to cover all situations, it should be used as a guide. Common sense will also assist you in its application.

1. MASTER SUPPLY

a. OBTAIN FROM PHARMACY

All controlled medications will be obtained by the Director or Assistant Director after written permission from the Medical Director. The Director and the Assistant Director are the only persons who have the authority to obtain these medications. The Medical Director shall sign a DEA Form-222, which shall be presented to the pharmacy

b. STORAGE

All Schedule II and IV medications shall be stored in an area determined to be safe by the Director of GSCEMS with the advice of the Medical Director in accordance with all state and federal laws and mandates.

c. SECURITY

All medications will be secured by two (2) locking devices whenever the area in which they are stored is unattended. These devices shall not be arranged in such a way that the keys are stored with the container.

d. INVENTORY

The Master Supply will maintain no more than twenty (30) packages/vials of each controlled medication at any time.

Inventory of controlled medications within the Master Supply will be completed when medications are distributed. Due to the limited access to the medications, daily inventories will not be required. Inventory for each will be annotated on the **Controlled Medication Master Transaction Log**, which is stored with the master inventory. Lot numbers of the medications as well as continuous totals of available stock are noted on the log. Authority to restock these medications is limited to the Director and the Assistant Director.

2. UNIT

a. RESTOCKING

All controlled medications, with the exception of Morphine Sulfate for the units will be obtained through the Director or the Assistant Director from the Master Supply. A limited supply of Morphine Sulfate (Max 10) will be available for restock by the Operations Supervisor.

b. STORAGE/SECURITY

All controlled medications will be stored in a secure area within the patient compartment of the ambulance. The compartment in which these are stored shall at a minimum be equipped with one locking device at the compartment and another for the vehicle and or the storage box.

c. INVENTORY

Advanced Life Support equipped ambulances within the GSCEMS fleet will be stocked with two (2) packages/vials of each scheduled medication.

Each Advanced Life Support equipped unit stocked with scheduled medications, whether in service or in reserve will be inventoried *daily* to ensure security and stock. Inventory of the medications will require two (2) crewmembers; one (1) required to be a paramedic, to verify the stock. Each will confirm the inventory then annotate his/her initials on the **Controlled Medication-Unit Inventory** sheet located in the controlled medication storage box. One crewmember will annotate the number of vials in the inventory in the **AMT** cell on the sheet. It will be the responsibility of the on duty Operations Supervisor to ensure all units are inventoried daily.

### 3. PAPERWORK

#### a. REQUIRED PAPERWORK

Each unit controlled medication box will have a **Controlled Medication-Unit Inventory** sheet, as well as a **Controlled Medication Transaction Log** for each controlled medication stocked on the unit. The Master Supply will include the Controlled Medication Master Transaction Log. A copy of each of these forms is included with this guideline.

#### b. DISPOSITION OF PAPERWORK

Once a sheet is filled, it shall be forwarded to the Director or Assistant Director to be filed. It is the responsibility of the crew completing the document to ensure this is performed.

#### c. RECORDS MAINTENANCE

The Director will maintain all records related to controlled medications in a permanent file. These will be available for review of any controlling agencies upon request.

### 4. PATIENT ADMINISTRATION

#### a. METHOD

All controlled medications will be administered under the authority of the GSCEMS Paramedic Protocol in coordination with the Medical Director and/or a Medical Control Physician.

#### b. DISPOSAL OF BALANCE

Upon arrival at the receiving facility, the paramedic in charge of the controlled medication will waste the balance of any unused medication in the presence of either the accepting registered nurse or physician (if available). That individual will sign the **Controlled Medication Transaction Log** as a witness to this action. The vial/package will then be discarded in an appropriate receptacle. The paramedic will complete the **Administered** line for the event including all fields ensuring the **RN Signature** and **M.D. Initials** are present.

### 5. RESUPPLY

#### a. NORMAL

Under normal circumstances, crews will proceed to the Director or Assistant Director following a call when controlled medications were administered in order to resupply the unit. The Operations Supervisor may perform this task when required. A copy of the patient care report will be provided to the Director to be filed.

During weekends and after business hours, the crew will secure a copy of the required run sheet in the unit lock box, so that the following crew can replenish the supply. When the Director or the Assistant Director returns to the office, the appropriate crew will be responsible for resupply of the unit.

b. CONTINGENCY-RESTOCK

The situation may occur that multiple vials/packages of controlled medications from a unit are administered or become outdated, and the Director or Assistant Director is not readily available to resupply the unit. In these cases the Operations Supervisor will resupply the unit from reserve units.

Each unit will maintain a minimum of one vial/package. The Operations Supervisor will document on the **Controlled Medication Transaction Log** in the next available **Administered** line that the stock was removed and the unit receiving the restock. On the receiving unit's **Controlled Medication Transaction Log**, receipt will be documented on the next available **Replaced**, space as a normal replacement.

When the Director or the Assistant Director returns to the office, the crew assigned to check the unit will be responsible for re-supply of the unit(s) as noted in the normal re-supply.

6. SECURITY FOR STOCK ON OUT OF SERVICE UNITS

a. SHORT TERM

When a unit will be out of service off site for no more than one shift, the crew will transfer the controlled medications of the out of service unit to the controlled medication cabinet of the unit they are placing in service. All supporting paperwork will be maintained with the medications. The crew will complete an *Equipment Changeover Sheet* documenting the location of the supplies. A notation of the removal and location of storage of the medications will be made in the Operations Supervisors Daily Log. Upon the unit's return to service, the medications and associated supplies will be returned to the unit.

b. LONG TERM

When a unit will be out of service off site for more than one shift, the Operations Supervisor will secure the controlled medications, supportive paperwork and storage box of that unit and submit them to the Director or Assistant Director. The medications and paperwork will be stored with the Master Supply. The crew will complete an *Equipment Changeover Sheet* documenting the location of the supplies. Upon the unit's return to service, the medications and associated supplies will be returned to the unit. A notation of the removal and location of storage of the medications will be made in the Operations Supervisors Daily Log.