


Sierra – Sacramento Valley EMS Agency Program Policy

Management Of Controlled Substances

	Effective: 06/01/2019	Next Review: 03/2022	710
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PURPOSE:

To ensure accountability of controlled substances obtained, maintained and utilized by paramedic and AEMT II prehospital provider agencies and personnel.

AUTHORITY:

- A. Code of Federal Regulations, Title 21.
- B. California Health & Safety Code, Division 2.5.
- C. California Health & Safety Code, Division 10.
- D. California Code of Regulations, Title 22, Division 9, Chapters 3 & 4.

POLICY:

- A. S-SV EMS approved controlled substances:
 - 1. Fentanyl.
 - 2. Ketamine.
 - 3. Midazolam (Versed).
 - 4. Morphine sulfate.
- B. Prehospital provider agencies shall obtain controlled substances through one of the following methods:
 - 1. The medical director of the prehospital provider agency.
 - 2. The base/modified base hospital shall ensure that a mechanism exists for prehospital provider agencies to contract for the provision of controlled substances.

C. Prehospital Provider Agency Policies and Procedures:

1. Prehospital provider agencies shall ensure that security mechanisms and procedures are established for controlled substances, including, but not limited to:
 - Controlled substance ordering and order tracking.
 - Controlled substance receipt and accountability.
 - Controlled substance master supply storage, security and documentation.
 - Controlled substance labeling and tracking.
 - Controlled substance vehicle storage and security.
 - Controlled substance usage procedures and documentation.
 - Controlled substance reverse distribution.
 - Controlled substance disposal.
 - Controlled substance re-stocking procedures.
2. Prehospital provider agencies shall ensure that mechanisms for investigation and mitigation of suspected controlled substance tampering or diversion are established, including, but not limited to:
 - Controlled substance testing.
 - Controlled substance discrepancy reporting.
 - Controlled substance tampering, theft and diversion prevention/detection.
 - Controlled substance usage audits.

D. Controlled Substance Security:

1. AEMT II and paramedic personnel shall be responsible for maintaining the correct inventory of controlled substances at all times.
2. All controlled substances shall be stored/secured in one of the following manners:
 - Preferred: Secured in a commercially developed drug locker specifically designed for controlled substance storage. The drug locker shall be securely mounted to the vehicle to prevent theft and shall have an electronic access keypad with an individual PIN code assigned to each AEMT II or paramedic personnel authorized to access and utilize the controlled substances. The drug locker shall be able to produce an electronic audit trail showing the date, time and PIN code of each instance the locker was opened. The double lock requirement does not apply to providers storing their controlled substance utilizing this method.
 - Alternate: Secured on the vehicle under double lock in an appropriate manner to prevent theft. The vehicles' outside driver/passenger/patient access door(s) shall not be considered one of the two locks.

3. Prehospital provider agencies must abide by all Federal, State and local regulations for the storage/security of controlled substances.
4. Each unit shall maintain a standardized written record of the controlled substance inventory. Controlled substance inventory and administration records shall be maintained in accordance with State and Federal Law and regulations.
5. Controlled substances shall be inventoried any time there is a change in personnel. The key to access controlled substances, if applicable, shall be in the custody of the individual who performed the inventory.
6. Any discrepancies in the controlled substance count shall be reported as soon as possible to the appropriate supervisor and the issuing agent (medical director). The discrepancy report must be appropriately documented.

E. Controlled Substances Administered to Patients:

1. Controlled substances are to be administered in accordance with applicable S-SV EMS treatment protocols.
2. The following information must be documented on a controlled substance administration record:
 - Date and time administered.
 - Unit number.
 - Patient name.
 - Drug administered.
 - Amount administered.
 - AEMT II or paramedic signature and number.
3. If only a portion of the medication was administered to the patient, the remainder shall be wasted in the presence of a registered nurse or physician at the receiving hospital, or the provider's immediate supervisor. Both parties shall document this action on the controlled substance administration form.
4. Controlled substance inventories/logs are subject to inspection by the California Board of Pharmacy, Bureau of Narcotic Enforcement Administration of the Justice Department, Federal Drug Enforcement Administration, the S-SV EMS Agency, the issuing agent, and/or officers of the prehospital provider agency.

CROSS REFERENCES:

- A. AEMT Scope of Practice (802).
- B. Paramedic Scope of Practice (803).