

Standard Operating Procedures Manual
City of Poquoson Fire and Rescue



**City of Poquoson
Fire and Rescue**

830 Poquoson Ave.
Poquoson, VA 23662
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EMS OPERATIONS

SOP#: EMS 21.00

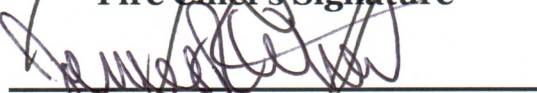
Title: Controlled Substances

Effective Date: 09/01/2024

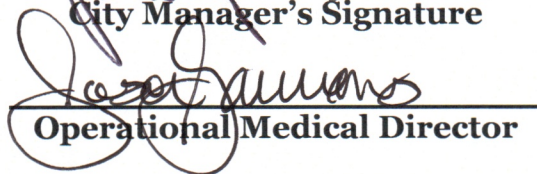
Revised Date: _____



Fire Chief's Signature



City Manager's Signature



Operational Medical Director

CONTROLLED SUBSTANCES

I. PURPOSE

To provide accountability for all Poquoson Fire/Rescue staff in order to ensure safe and accurate controlled substance ordering, storage, distribution, control, and adherence to state and federal requirements. This policy governs Schedule II-V medications. For non-controlled Schedule VI medications, see EMS 20.00 Medication Management and Pharmacy.

II. APPLICABILITY

All Career and Volunteer personnel

III. PROCUREMENT

Purchase of controlled substances will be completed by the EMS Chief using the Drug Enforcement Agency (DEA) Form 222 or through an established online vendor using the DEA's Controlled Substance Ordering System (CSOS). The Department's Supervising Practitioner (Medical Director) shall provide a copy of their current Virginia Medical License and DEA License to all approved vendors as required.

IV. RECEIVING

Items purchased from vendors are shipped to Station 1 as the Registered Location on the department's Controlled Substance Registry (CSR) issued by the Virginia Board of Pharmacy. Employees listed on the Authorized Personnel list approved by the Medical Director may receive and sign for these items. Immediately upon receipt, the sealed packages will be placed into the designated narcotics safe with the packing slip attached. The EMS Chief shall be notified immediately and shall ensure the items are inventoried and stocked within 24 hours. All individual narcotics will be labeled with an RFID tag and scanned into the Narctrak system.

V. INVENTORY CHECK/STOCKING

At least monthly, or sooner, if necessary, a medication inventory and expiration date check will be performed on each Narcotics Pouch, as well as the main supply cabinet. Schedule II Inventory Logs shall be maintained separately from Schedule III-V Inventory as required by regulation.

Field – Each Narcotics Pouch shall be issued with the items listed on the applicable inventory form. These pouches will be sealed with a green RFID seal prior to being issued. This RFID seal will be scanned into the assigned vehicle's Narcobox. Field inventory will be conducted at shift change or when possession is otherwise transferred. Field inventory may be completed by ensuring the correct green RFID tag is present and a visual inspection may be completed through the clear portion of the Narcotics Pouch. This inspection will be noted as appropriate in the Narctrak system.

New medication supply and used Narcotics Pouches will be inventoried and stocked/restocked by 2 Paramedics or 1 Paramedic and 1 Company Officer or EMS Chief. In the event the aforementioned staff are not available, 1 Paramedic and 1 Intermediate may stock/restock and a written explanation of why the required staff were not available shall be sent to the EMS Chief for documentation/filing.

VI. DISTRIBUTION TO FIELD PERSONNEL

Narcotics Pouches may be exchanged in the EMS storage room at Station 1. A used pouch, with the Medication Use/Wastage Form completed and included, will be scanned into the appropriate narcotics safe using the red RFID tag. A new pouch, sealed with a green tag, may then be scanned out to the appropriate vehicle.

Restocking Narcotics Pouches will primarily be done on a weekly basis. If at any time the supply of sealed and ready Narcotics Pouches falls below 2, the Station Officer shall notify the EMS Chief immediately and restocking will occur within 24 hours.

VII. STORAGE

Narcotics Pouches shall only be stored in the appropriate narcotics locker in the EMS Supply Room or in a Narcobox on an Office of EMS licensed vehicle. Every effort shall be made to assure a safe environment for storage to protect these boxes from extreme temperature, humidity/moisture, light, damage, or contamination.

All medications shall remain in their original packaging until use.

VIII. MEDICATION VERIFICATION

Any personnel who are administering a medication must first verbally verify the medication prior to administration. The first verification shall occur when the medication is taken from the Narcotics Pouch. The second verification must occur immediately prior to administration. This verification must be stated out loud to another member of the department. The verification must include the drug name, dose required and route given. If another department member is not available, the provider should exercise caution and ensure the proper drug name, dose, and route.

IX. CONTROLLED SUBSTANCE ADMINISTRATION

After administration of a controlled substance, the provider will reseal the Narcotics Pouch with the supplied red RFID seal and scan

the pouch back into the Narcobox. This used pouch may be exchanged at Station 1 by scanning the used pouch into the Narcotics safe at Station 1 and retrieving a ready, green sealed pouch.

Medication usage shall be documented:

- Within the applicable data fields of the ePCR
- On the Medication Use and Wastage Form
- A Practitioner's signature on the ePCR is required for all administrations of controlled substances

X. RESTOCKING

Every Monday, or as required if Narcotics Pouches are used quickly, the EMS Chief shall oversee restocking all used pouches. Restocking will include a complete inventory of the used pouch, application of a new seal to the pouch, and ensuring the Narcobox and ePCR medication information is accurate. Schedule II records must be kept separately from Schedule III-V.

XI. WASTE/EXPIRATION

Waste – If waste is required of controlled substances in the field, document on the Medication Use and Wastage form the drug used, amount administered, expiration date and the amount wasted. A licensed practitioner must sign as witness on the Medication Use and Wastage form.

Expired items shall be returned to the EMS Storage Room for disposal. All expired medications shall be kept separate in a locked, designated area until ready for disposal. Disposal of expired medications will occur through a third-party vendor specializing in medication and controlled substance destruction and disposal.

XII. BROKEN MEDICATIONS

In the event a medication is broken or damaged, the event shall be documented on the Medication Tracking Form. If the event occurred during patient care, document the medication event in the ePCR and

notify the Station Officer to ensure the event is documented on the Medication Tracking Form.

XIII. INVENTORY DISCREPANCIES

If a medication is unaccounted for at any time, all narcotics pouches and storage areas must be checked to see if the item was misplaced. Check for ePCR numbers on the Medication Tracking Form to match all items missing. If the item(s) are located or accounted for, there is no actual discrepancy. If the item(s) are not located, the narcotics pouch shall be given to the Station Officer and then delivered to the EMS Chief. A red, numbered seal is then placed on the kit and the number included in the inventory discrepancy documentation. Off-going personnel and on-duty personnel may be subject to a search of their persons, station, quarters, personal vehicle, etc. by law enforcement officials. The EMS Chief must submit DEA Form 106. Instructions from DEA Investigators will be followed. The Fire Chief and the Medical Director will be made aware of all investigations. Investigations of medication discrepancies may include drug testing for all personnel who could have possibly had access to the narcotics pouch.

XIV. RECORDS MAINTENANCE

The following information is required to be retained in the EMS Pharmacy area as well as through the electronic tracking system used by the department:

- Medications received by item description, quantity, and date
- Medications issued (given) by incident, date, and administering provider
- Return of expired controlled substances
- Routine inspection records

All written, printed, and electronic documentation is to be kept on file for two calendar years, not including the current year. All protected health information will be disposed of by destructive means.

Schedule II, Schedule III-V, and Schedule VI records must be kept separately.

XV. TRAINING MEDICATIONS

Expired narcotic medications **may not** be used for training purposes and must be disposed as outlined by this policy.