PURPOSE

To insure controlled substances are restocked in accordance with all regulatory agencies and standards.

SPECIAL INSTRUCTIONS/FORMS TO BE USED

EMS Narcotic Replacement Form

PROCEDURE

To provide a mechanism for the restocking of Morphine Sulfate, Fentanyl, Ketamine or Midazolam Hydrochloride (Versed) to Advanced Life Support EMS personnel that has been administered to a patient in the pre-hospital setting, ensure the return of all medications and pharmaceutical supplies to the Resource Hospital upon suspension or the voluntary termination of an ambulance provider within the ASMH EMS system or replace a controlled substance that has been broken or tampered with.

The restocking of a controlled substance can only be done by a Paramedic or PHRN.

I. Replenishment of a Dispensed Controlled Substance to a Transported Patient

A. When Morphine Sulfate, Fentanyl, Ketamine, or Midazolam Hydrochloride (Versed) is administered to a patient in the prehospital setting and the patient is transported to the hospital, the EMS provider must complete the prehospital patient care report form noting the name of the medication, the amount administered and the administration route/site. Included in the documentation will be how much and how the remaining narcotic was wasted.

B. Upon receiving the completed prehospital patient care report and any unused medication, the paramedic and the RN will sign in the controlled medication log. After completion, the ED RN will issue the replacement medication to the EMT-P/PHRN personnel.

II. Replenishment of a Dispensed Controlled Substance to a Patient Who Refuses Transport

If a Morphine Sulfate, Fentanyl, Ketamine, or Midazolam Hydrochloride (Versed) is administered to a patient who subsequently refuses transport to a hospital, the following steps must be taken:
A. The EMT-P/PHRN must inform and make every attempt to persuade the patient, that it is in the patient’s best interest that he/she be transported to a hospital.

B. Notify ASMH resource hospital that you have a patient who has been medicated and is refusing transport.

C. Complete the pre-hospital patient care report documenting the surrounding facts. Included in the documentation will be how much and how the remaining narcotic was wasted then bring the report to the ASMH Pharmacy during regular business hours (7 days a week from 7 AM to 9 PM).

D. After business hours, ONLY, the ASMH Emergency Department Charge Nurse can replace narcotics through pyxis. (PYXIS-under add a patient the nurse should type in the name of the EMS ambulance service. The patient’s name must be in the comment section.) The EMS provider will leave the appropriate copy of the pre-hospital patient care report form at the resource hospital including how the waste was wasted, sign the controlled medication log, filling out Narcotic Replacement form, and receive the replacement medication.

III. Replenishment of a Dispensed Controlled Substance to a Patient Who is Transported by Another Ambulance Service.

A. The EMT-P/PHRN will replenish the dispensed medication from the supply of the transporting ambulance.

B. The crew of the transporting ALS unit will note on their prehospital patient care report the name of the EMT-P/PHRN and the ambulance provider who administered the controlled substance.

C. The transporting crew will replenish their supply of that controlled substance at the receiving hospital.

IV. Replenishment of an Administered Controlled Substance at Other Than the Receiving Hospital.

On the rare occasion that the receiving hospital is unable to replace the controlled substance, the ambulance crew must:

A. Bring a copy of the completed prehospital patient care report documenting the surrounding facts and the remaining medication to the ASMH Pharmacy during regular business hours (7 days a week from 7 AM to 9 PM.) Included in the documentation will be how much and how the remaining narcotic was wasted.
B. After business hours, ONLY, the ASMH Emergency Department Charge Nurse can replace narcotics through pyxis. (PYXIS-under add a patient the nurse should type in the name of the EMS ambulance service. The patient’s name must be in the comment section.) The EMS provider will leave the appropriate copy of the pre-hospital patient care report form at the resource hospital including how the waste was wasted, sign the controlled medication log, filling out Narcotic Replacement form, and receive the replacement medication.

C. The EMS provider will leave appropriate copy of the pre-hospital patient care report form at the resource hospital.

V. Exchange of an Expired Controlled Substance

A. To return controlled substances that will be expiring, the medication will be taken to the Pharmacy during regular business hours (7 days a week from 7AM to 9 PM).

B. This can only be done by a Paramedic or PHRN.

VI. Suspension or Termination of an ALS Ambulance Provider

Upon suspension or termination or an Advanced Life Support provider from the PSMH EMS System, the provider will return all medications and pharmaceutical supplies to the Emergency Medical Services Department or its designee within 48 hours of such suspension or termination.

VII. Loss or Suspected Tampering of a Controlled Substance

Controlled substances that have been broken or appear to have been tampered with must be returned to the EMS office with a copy of the completed provider’s incident report attached. The EMS System Coordinator or designee will arrange for the replacement of the medication. The EMS System Coordinator must immediately be notified of any suspected tampering of controlled substances.

**NOTE:** Policies with original signatures are on file in Administration.
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