

VOLUSIA COUNTY DEPARTMENT OF FIRE SERVICES

STANDARD OPERATING GUIDELINES

VOLUME: II GUIDELINE: 102.005	SUBJECT: CONTROLLED SUBSTANCE ACCOUNTABILITY		
REFERENCE: N/A	ISSUING AUTHORITY: DEPUTY DIRECTOR DEPT. OF PUBLIC PROTECTION JAMES R. RYAN		
X RESCINDS: II-102.005 04/12/2002 AMENDS: N/A	DATE ISSUED: MARCH 17, 2010		
	EFFECTIVE DATE: MARCH 22, 2010		

I. PURPOSE:

To ensure strict accountability of all controlled substances used or carried onboard VCFS Advanced Life Support (ALS) permitted apparatus to include the VCSO Aeromedical units. Department of Health, Bureau of EMS, and Federal guidelines mandate that all ALS agencies keep written maintenance logs for all controlled substances. These logs provide written tracking of controlled substances assigned to ALS apparatus which:

- Provides documentation of any controlled substance added to the ALS apparatus.
- Provides documentation of any controlled substance administered to a patient.
- · Provides documentation of any out-of-date controlled substance that is wasted/destroyed.
- Provides documentation of any unused portion of a controlled substance that is wasted.
- Provides accountability on a daily basis.

II. GUIDELINE:

This guideline applies to all Volusia County Fire Services personnel and Volusia County Sheriffs' Office paramedics.

III. RESPONSIBILITY:

It is the responsibility of the VCFS Emergency Medical Services Manager to update this guideline as needed. The Emergency Medical Services Manager shall ensure adherence to all federal, state, and local requirements. The on-duty paramedic is responsible for the care, custody, and documentation of all controlled substances assigned to his/her apparatus/units.

IV. PROCEDURE:

- A. Controlled Substance Accountability:
 - 1. Each in-service ALS permitted apparatus shall carry the following substances at a minimum:

Etomidate 40 mg Morphine 30 mg Lorazepam 10 mg

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 a. The above amount is considered the static amount to be carried on each Advance Life Support (ALS) permitted, in-service apparatus/units.

b. The preferred packaging shall be ampules when available. If not available, then vials or prefilled syringes shall be utilized in order of preference.

c. Replacement following administration, expiration, or damage shall be accomplished within 24 hours of reduction in inventory, with notification of the Battalion Commander and the EMS Manager.

 If any one controlled substance is depleted, the apparatus is to be placed out of service for ALS calls until restocked.

- 2. The active Controlled Substance Accountability form shall be kept on the ALS permitted units at all times, unless inventory is being completed. All controlled substances carried on ALS permitted apparatus shall be secured under a double locked system. The controlled substances are not, at any time, to be stored in any location other than the ALS permitted units. If an ALS unit goes Out-of-Service, the EMS Manager (or designee) shall be contacted before any controlled substances are removed from the unit.
- Controlled Substances keys must remain solely in the physical possession of the VCFS lead paramedic assigned to that vehicle/apparatus. Only on-duty paramedics shall have access to the controlled substances.
- 4. Controlled substances shall be inventoried by the off-going and on-coming paramedics at shift change. This transition shall occur in a face-to-face fashion, with both the on-duty and off-going paramedics simultaneously visualizing, verifying the quantities, status, and signing for the medications. Controlled Substance keys shall not be transferred until this process is complete.
- 5. Daily Accountability Documentation:

The following required information must be documented by the on-duty paramedic daily:

Date: date the controlled substances are being inventoried

Time Check: note the time that the inventory of the controlled substances is being completed.

Medication Quantity: write in the quantity of the medication found.

Expiration Date: write in the expiration date of the medication found.

Person Conducting Inventory: names of both on-duty and off-going duty paramedics.

Printed Name: paramedic must print his/her first initial and last name.

Signature: paramedic must sign his/her first initial and last name.

NOTE: Only utilize numbered and issued Controlled Substance Accountability forms.

6. Discrepancy Found During Inventory:

When a controlled substance is found, anytime during a tour of duty, to be missing or not intact:

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 a. The paramedic in charge shall notify the EMS Manager (or designee) and the Battalion Officer immediately.

 The EMS Manager (or designee) shall respond immediately to the location where the discrepancy was discovered.

c. A written statement shall be taken by the EMS Manager from all parties involved.

- d. The EMS Manager shall notify the Deputy Chief of Operations and the Medical Director's Office by written or electronic correspondence on the next business day.
- The EMS Manager shall investigate the proceedings to ensure accuracy of reporting and document the outcome.

7. Out of Date Controlled Substance:

- a. The paramedic that completed the ALS Supply Expiration Date form for that month shall notify the EMS Manager (or Designee) at least 60 days prior to the expiration of the controlled substance.
- b. The EMS Manager (or designee) shall waste the expired controlled substance when the replacement is placed in stock, with proper documentation occurring.
- c. The EMS Manager (or designee) can authorize the on-duty paramedic to destroy controlled substance(s). If the EMS Manager (or designee) directs destruction of controlled substances, the on-duty paramedic shall use these steps:
 - Document the controlled substance's expiration date, lot number, and amount destroyed.
 - Document the amount destroyed in the "Amount Wasted" column on the Controlled Substance Accountability Form.
 - 3. Obtain a witness to visually verify proper disposal and documentation.
 - Draw the controlled substance out of its container and inject it into the biohazard sharps container that is located on each ALS permitted unit.
 - Have the witness place his/her printed name and signature in the appropriate columns.
 - 7. The paramedic shall place his/her name and signature in the appropriate column. This action verifies that proper disposal and documentation has occurred.

8. Procedure for Breakage:

- a. The paramedic must note the loss on the Controlled Substance Accountability Form.
- b. The paramedic must have a witness to the breakage and have him/her print and sign first initial and last name on the Controlled Substance Accountability form.
- The paramedic must print and sign his/her first initial and last name on the Controlled Substance Accountability form.
- d. The paramedic must complete an Incident Report and provide to the EMS Manager (or designee) reporting the breakage and explain, with a detailed account, of the incident in accordance with the Incident Report SOG. This memo shall contain the printed and signed names of both the paramedic and the witness, along with the name of the drug, expiration date, lot number, and quantity of the controlled substance.

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B. Controlled Substance Administration:

- In the pre-hospital setting, controlled substances must be administered by a State of Florida certified paramedic who has successfully completed the Volusia County Standing Orders and Treatment Protocol Exam.
- Only the amount of controlled substance ordered by the physician and/or prescribed by Volusia County Protocols shall be administered to the patient.
- Controlled substances not administered shall be properly disposed of/wasted and documented accordingly (See Record of Administration).
- 4. When a paramedic administers any controlled substance by direct order of a physician, which exceeds the scope of Volusia County Protocols, the paramedic shall document the name of the physician in the PCR.

5. Record of Administration:

a. Required documentation if a controlled substance was administered to a patient and/or disposal of an unused portion occurs:

Date: list the date the controlled substance was administered or wasted/broken.

Run #: list the alarm number of the incident.

Patient Name: list the patient's name

Amount Administered: list the amount of the controlled substance administered to the

patient.

Amount Wasted: list the amount of the controlled substance wasted/broken.

Printed name: paramedic must print his/her first initial and last name.

Signature: paramedic must sign his/her first initial and last name.

Witness:

- witness must print his/her first initial and last name.
- witness must sign his/her first initial and last name.

NOTE: Witness documentation priority shall be as follows:

Another agency's paramedic.

Another VCFS engine crew's paramedic.

Another shift's paramedic (broken or wasting expired meds).

As a last resort, the partner of the same crew.

C. Authority for Purchase/Replacement and Distribution:

1. Station Personnel:

- During the monthly EMS ordering process any controlled substance that is expiring within thirty days shall be placed on the order form, by quantity through the VCFSEMS email account.
- During normal operations when controlled substances are administered, damaged and /or wasted, the Battalion Commander shall be notified verbally immediately, and the EMS

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Manager (or designee) shall be notified via email to the VCFSEMS account for replacement.

- c. The on-duty lead paramedic shall make an entry in the station log book stating the controlled substance received, amount, lot number, and disposition.
- d. The on-duty lead paramedic shall update the Controlled Substance Accountability form following the procedure for Record of Administration.

2. EMS Manager (or designee):

Shall maintain a stock of controlled substances in accordance with state statute as noted below:

A specified amount of controlled substances, authorized by the Medical Director, shall be maintained at the permitted location. An annual authorization memo, listing the type of controlled substance(s) and the amount(s) of each to be kept shall be approved/signed off by the Medical Director. A copy of this memo shall be kept in onsite storage and with this SOG. This shall be utilized for immediate restocking of apparatus. Accountability logs shall be maintained and inventoried periodically with each distribution/addition for verification of quantities and tracking purposes.

- a. The EMS Manager (or designee) shall replace administered, expired, or damaged controlled substances in accordance with the Drug Enforcement Administration (DEA) guidelines.
- b. Controlled Substances shall be procured using the DEA-222 form or a signed prescription from the Medical Director or his designee. The DEA-222 shall be signed by the Medical Director upon completion.
- c. The EMS Manager (or designee) shall take the DEA-222 form or signed prescription to the local pharmacy and purchase the controlled substance. A copy of the DEA-222 form shall be retained by the EMS Manager for file.

All meds shall be secured under a double lock system as previously identified with limited access for control measures. The limited access shall include the current EMS Manager, Logistics Officer, and the Deputy Chief of Logistics. A memo, listing the full names and titles of each of the limited access individuals, shall be kept in on-site storage and with this SOG. This memo shall be updated as the positions and individuals filling these specific positions change.

This is a two person accountability system signed off on a form (see attachment C).

- The replacement controlled substance shall be hand delivered by the EMS Manager (or designee) to the requesting unit and given to the lead paramedic of that unit. An accountability processing form shall be utilized to record the movement of all meds from stock to-delivery and be signed by all parties involved.
- Replacement of Controlled Substances between different agencies, stations, and/or units is prohibited. If a Controlled Substance is used, notify the EMS Manager for replacement.

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D. DEA Form 222 Accountability and Security:

Accountability:

- The blank DEA Form 222 is located in the Controlled Substance Inventory Binder with the current controlled substance inventory. A log sheet of all issued DEA Form 222's shall also be maintained with these forms and be completed as the sheets are utilized.
- 2. Procurement refer to the procurement section.
- Completed DEA Form 222's, purchase receipts, and any other documents pertaining to the transaction are maintained within the EMS Procurement Forms Binder. This is maintained with all of the controlled substance documentation in order to complete the record of the items.

Security:

 The Controlled Substance Inventory Binder is secured under a double lock, in the limited access area. The EMS Procurement Forms Binder is maintained in the EMS area with the remainder of the forms.

E. Controlled Substance Accountability Forms:

- Only original, pre-printed, numerically sequenced, monthly inventory forms issued by the EMS Manager shall be used. Copies of forms shall not be authorized.
- On the first day of the month, the Controlled Substance Accountability form that was generated for that month shall be placed in-service. It shall remain on the ALS unit at all times except for time frames utilized for daily inventory at shift change.
- 3. The Controlled Substance Accountability form from the month prior shall be checked for proper completion by the station Lieutenant on his or her first shift of the month.
 - a. Any discrepancies found in the Controlled Substance Accountability form must be immediately reported to the EMS Manager and/or designee.
 - b. If blank/incorrect signature or data area(s) exist, the responsible party shall be immediately contacted by the station Lieutenant, advised of the infraction, ordered to properly complete the form, and shall be issued a written reprimand by his or her supervisor.

4. Documentation Errors:

- a. If an error occurs while making an entry on the Controlled Substance form, a double line must be drawn through the error and correct entry documented next to error.
- For no reason shall "white-out" be accepted on a Controlled Substance Accountability form.

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 if "white out" is found on a Controlled Substance Accountability form, the form must be regenerated.

d. When a Controlled Substance Accountability form must be regenerated, the EMS Manager shall be notified, and another form shall be issued.

- e. If the Controlled Substance Accountability form, or pages within it are found to be missing, it must be reported to the EMS Manager (or designee) immediately.
- The completed Controlled Substance Accountability form shall be collected by the EMS Manager (or designee) at the next EMS audit. This form shall be retained for three (3) years.
- EMS Manager shall file all applicable reports required by the DEA with the concurrence of the Medical Director.

F. Controlled Substance Audit Process:

- A monthly audit of Controlled Substance Accountability forms shall be conducted by the EMS Manager (or designee).
 - a. The audit shall be completed by the 20th of each month.
 - b. The auditor shall review each Controlled Substance Accountability form for the three medications and ensure there are no blank signature or date areas, review any notations of administration or disposal and verify the information is documented as defined in Section B.
 - Any usage, waste, or addition would be documented at the bottom of the form (see amended Attachment A).
- A quarterly audit of controlled substances and associated accountability shall be conducted by the Logistics Officer.
 - a. This audit shall be considered an independent audit conducted by the EMS Manager.
 - b. Approval of the recommendation shall come from the Deputy Fire Chief of Logistics.
 - c. The independent audit shall be completed in a one week period. A written report shall be completed and turned into the Deputy Fire Chief of Logistics describing what discrepancies were found, corrective action taken and recommendations for reducing the discrepancies.

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ATTACHMENT A



VCFS EMS Division Controlled Substance Station Audit



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Stations Lead Paramedic (Alamai Signature):	i	•••	
EMS Manager Signature (Normal Signature):			

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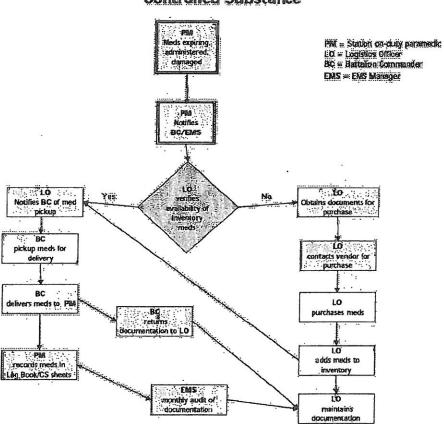
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ATTACHMENT B

Controlled Substance



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ATTACHMENT C



VCFS EMS Division Controlled Substance Log-

40mg (2mg/ml)
Purchased with Prescription from Dr. Springer 8-31-09



Number	Lot Number	Concentration of Medicization	Expiration Date	Distributed (Station)	Date	Issued/Wasted By	Received/ Witnessed By
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controlled substances security. In this regard, it is believed that conviction of crimes and unauthorized use of controlled substances are activities that are proper subjects for inquiry. It is, therefore, assumed that the following questions will become a part of an employer's comprehensive employee screening program:

Question. Within the past five years, have you been convicted of a felony, or within the past two years, of any misdemeanor or are you presently formally charged with committing a criminal offense? (Do not include any traffic violations, juvenile offenses or military convictions, except by general court-martial.) If the answer is yes, furnish details of conviction, offense, location, date and sentence.

Question. In the past three years, have you ever knowingly used any narcotics, amphetamines or barbiturates, other than those prescribed to you by a physician? If the answer is yes, furnish details.

Advice. An authorization, in writing, that allows inquiries to be made of courts and law enforcement agencies for possible pending charges or convictions must be executed by a person who is allowed to work in an area where access to controlled substances clearly exists. A person must be advised that any false information or omission of information will jeopardize his or her position with respect to employment. The application for employment should inform a person that information furnished or recovered as a result of any inquiry will not necessarily preclude employment, but will be considered as part of an overall evaluation of the person's qualifications. The maintaining of fair employment practices, the protection of the person's right of privacy, and the assurance that the results of such inquiries will be treated by the employer in confidence will be explained to the employee.

[40 FR 17143, Apr. 17, 1975]

§ 1301.91 Employee responsibility to report drug diversion.

Reports of drug diversion by fellow employees is not only a necessary part of an overall employee security program but also serves the public interest at large. It is, therefore, the position of DEA that an employee who has knowledge of drug diversion from his employer by a fellow employee has an obligation to report such information to a responsible security official of the employer. The employer shall treat such information as confidential and shall take all reasonable steps to pro-

tect the confidentiality of the information and the identity of the employee furnishing information. A failure to report information of drug diversion will be considered in determining the feasibility of continuing to allow an employee to work in a drug security area. The employer shall inform all employees concerning this policy.

[40 FR 17143, Apr. 17, 1975]

§ 1301.92 Illicit activities by employees.

It is the position of DEA that employees who possess, sell, use or divert controlled substances will subject themselves not only to State or Federal prosecution for any illicit activity, but shall also immediately become the subject of independent action regarding their continued employment. The employer will assess the seriousness of the employee's violation, the position of responsibility held by the employee, past record of employment, etc., in determining whether to suspend, transfer, terminate or take other action against the employee.

[40 FR 17143, Apr. 17, 1975]

§1301.93 Sources of information for employee checks.

DEA recommends that inquiries concerning employees' criminal records be made as follows:

Local inquiries. Inquiries should be made by name, date and place of birth, and other identifying information, to local courts and law enforcement agencies for records of pending charges and convictions. Local practice may require such inquiries to be made in person, rather than by mail, and a copy of an authorization from the employee may be required by certain law enforcement agencies.

DEA inquiries. Inquiries supplying identifying information should also be furnished to DEA Field Division Offices along with written consent from the concerned individual for a check of DEA files for records of convictions. The Regional check will result in a national check being made by the Field Division Office.

[40 FR 17143, Apr. 17, 1975, as amended at 47 FR 41735, Sept. 22, 1982]