



MANAGEMENT OF CONTROLLED SUBSTANCES

PURPOSE

To ensure accountability for all controlled substances issued to and maintained upon permitted Advanced Life Support (ALS) Units.

AUTHORITY

Code of Federal Regulations, Title 21 - Food and Drugs
Health & Safety Code, Division 10 - Uniform Controlled Substances Act
Health & Safety Code, Division 2.5 – Emergency Medical Services
California Code of Regulations, Title 22, Division 9 – Prehospital Emergency Medical Services.

POLICY

- I. Approved Controlled Substances
 - A. Midazolam (Versed)
 - B. Morphine Sulfate
 - C. Fentanyl

- II. Provider Agencies may obtain controlled substances through
 - A. The Medical Director of the Provider Agency, if he/she is in agreement to authorize such procurement.
 - B. The Base Hospital

- III. Policies and Procedures
 - A. Provider Agencies that obtain controlled substances through the Provider Agencies Medical Director shall:
 1. Develop policies and procedures, approved by the Medical Director, to ensure that all narcotics are obtained, maintained, and distributed in a secure manner.
 2. Such policies and procedures shall be subject to review at any time by YEMSA.

 - B. Provider Agencies that obtain controlled substances through the Base Hospital shall follow the policies of the Base Hospital.

- IV. Security of Narcotics
 - A. Paramedics assigned to an ALS unit shall be responsible for maintaining the correct inventory of narcotics at all times.
 - B. All controlled substances shall be secured on the ALS unit under double lock. The units outside driver/passenger/patient access door(s) shall not be considered one (1) of the two (2) locks. Narcotics shall not be stored in any location other than on ALS unit, unless otherwise authorized by YEMSA.
 - C. Those agencies that resupply themselves must abide by all Federal, State and local regulations for the storage of controlled substances.



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- D. Each ALS unit shall maintain a standardized written record of the controlled drug inventory. That record shall be considered a permanent record. Once completed, drug inventory and administration records shall be maintained in accordance with State and Federal Law and Regulation.
 - E. Narcotics shall be inventoried any time there is a change in personnel. The key to access narcotics shall be in the custody of the individual who performed the inventory.
 - F. Any discrepancies in the narcotic count shall be reported to the ALS Provider supervisor/management and to the issuing agent (i.e., Provider Agency Medical Director or Base Hospital). The discrepancy report must be in writing.
- V. Controlled Substances Administered to Patients
- A. Controlled substances are to be administered in accordance with YEMSA treatment protocols.
 - B. The following information must be documented on a drug administration record.
 - 1. Date administered
 - 2. Time administered
 - 3. ALS unit number
 - 4. Patient name
 - 5. Drug administered
 - 6. Amount administered
 - 7. Paramedic signature and number
 - 8. If only a portion of the medication was administered to the patient, the remainder shall be wasted in the presence of the Registered Nurse (RN) or Physician at the receiving hospital, or the ALS Service Provider's immediate supervisor. Both parties shall document this action on the drug administration form.
 - C. Narcotic inventories and logs are subject to inspection by inspectors of the California Board of Pharmacy, agents of the Bureau of Narcotic Enforcement Administration of the Justice Department, Federal Drug Enforcement Administration, YEMSA, Base Hospital and officers of the Provider Agency.