

POLICY:	DOCUMENTATION OF CONTROLLED SUBSTANCE USAGE – 300.32		
APPROVAL:	VICE PRESIDENT OF PROFESSIONAL SERVICES; MANAGER OF EMS;		
EFFECTIVE DATE: 9/1/2016	CURRENT REVIEW/REVISION DATE: 8/16	SUPERSEDES: N/A	ORIGINAL EFFECTIVE DATE: 08/16
DEPARTMENT SPECIFIC		EMERGENCY MANAGEMENT SYSTEM	

I. Purpose:

To establish standard documentation for inventory and use of controlled substances on Morris Hospital Emergency Medical Services (EMS) System Intermediate Life Support (ILS)/Advanced Life Support (ALS) vehicles.

II. Policy:

Controlled substances include those DEA Scheduled drugs approved for use by the Morris Hospital EMS System Medical Director.

Controlled substances will be inventoried daily and documented on a system approved Controlled Substance Inventory Accountability Log Sheet. All drugs including narcotics will be maintained under double lock and key and in a temperature controlled environment at all times. The Controlled Substance Inventory Accountability Log and EMS Controlled Substance Count Log and Proof of Use Sheet will be sent to the EMS System office on the 1st of every month and no later than the 10th. Failure to do so will result in suspension of ambulance services. Administration of controlled substances will be documented on the EMS Controlled Substance Count Log and Proof of Use Sheet.

III. Procedure:

A. Daily inventory of controlled substances requires the signature of the Intermediate, Paramedic, or Pre-Hospital Registered Nurse (PHRN) coming on duty.

B. Administration of controlled substances will be documented on the Controlled EMS Controlled Substance Count Log and Proof of Use Sheet.

C. Replacement of the used controlled substances at the receiving hospital will be documented on the EMS Controlled Substance Count Log and Proof of Use Sheet with RN signature.

D. The completed Morris Hospital EMS System EMS Controlled Substance Count Log and Proof of Use Sheet will be submitted to the EMS System office monthly. Any discrepancy is to be reported to the EMS office and should be documented on an EMS Quality Communication Report form as soon as possible.

E. Missing Doses or Suspected Tampering

1. If a controlled substance is unaccounted for or shows signs of tampering, or damage the EMS System Coordinator must be notified by the ALS providers' EMS Coordinator within 24 hours of the incident. The EMS System Coordinator shall investigate the incident; replacement of the controlled substance will be issued to that vehicle by the Resource Hospital only.

