EXETER DISTRICT AMBULANCE

302 E. Palm
Exeter, CA 93221

Phone: 559-594-5250
Fax: 559-592-2301

CONTROLLED SUBSTANCE PROCEDURES

ORDERING AND RECEIVING INVENTORY

1) When resupply is indicated due to dropping below cycle low count, a "Resupply Request Form" will be completed by the Shift Lead. This form will be presented to the District Manager for approval.
2) The approved Resupply Request Form is then presented to the designated Narcotics Ordering Agent who will place the order. The order date, delivery date, and other information must be recorded on the form. An order confirmation must be attached to the form.
3) When the order is delivered it must be received by the District Manager and checked against the Request Form and the Order Confirmation. Any discrepancies must be noted in the Notes section of the Request Form. Discrepancies must be co-signed by a 3rd party.
4) The District Manager will tag each vial with a unique tracking number.
5) The District Manager will then re-stock the Narcotics Safe and record each unit as Available in the Administered/Dispensed Log. Completion of this must be noted in the Request Form and co-signed by a 3rd party.
6) The completed Request Form, Order Confirmation, and any other documentation will be added to the "Resupply/Order Binder". This will be stored in the locked Narcotics Supply Room.

OPERATIONAL RESUPPLY

1) The standard supply of a locked narcotics case is 3 Versed and 4 Fentanyl. This should be verified at the start of each shift.
2) In general practice, a unit should request resupply if they fall below 2 Versed or 3 Fentanyl.
3) Narcotics resupply may only take place at the District Office. However, under special circumstances, a locked and tagged fresh narcotics case may be brought out to a unit in the field. In such cases, the receiving unit will retain BOTH cases consuming as necessary first from the opened case. At end-of-shift, they will return the new case, and resupply their regular case according to proper procedure.
4) Narcotics cases are numbered according to the Ambulance unit and should stay only with that unit.

OPERATIONAL RESUPPLY PROCEDURE

1) Resupply begins with proper documentation of the units consumed in operational use. This must include evidence of usage on the associated PCR as well as proper documentation with the Medication Usage blue form. Amounts wasted and disposed must be included along with a 3rd party witness of the proper disposal of wasted amounts. These must be recorded in the "Administered/Dispensed Log".

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2) Once each used vial has been accounted for, the Shift Lead may then re-supply the Narcotics Case back to standard counts.
3) Each new vial must be recorded in the same log as being dispensed to that Narcotics Case.
4) The Shift Lead will then tag and lock the Narcotics Case before returning it to the requesting Medic.
5) The Medic will then lock the case in the correct Ambulance Unit and record the resupply in the unit's narcotics log.

USAGE

1) When Versed or Fentanyl is administered to a patient, the quantity administered and the time administered should be recorded.
2) Once the call is closed, the Medic must record usage on the Medication Usage blue form.
3) If there is any unused quantity in the vial, the Medic is expected to dispose of it as waste according to the following procedure:
    a. Locate an available knowledgable 3rd party (nurse, etc)
    b. In a safe location near a Sharps Container, draw out the remaining amount and measure. Added to the amount shown used in the PCR this should equal the original amount in the vial. Note the amount as "wasted" on the form.
    c. Dispose the syringe in the Sharps Container.
    d. Have the 3rd party sign the form.
    e. Dispose of the vial in the Sharps Container.
4) The blue form should then be returned to the Shift Lead as backup for resupply at the end of the shift.

EXETER DISTRICT AMBULANCE

Controlled Substance Administered/Dispensed Log

Fentanyl

Assigned Date	ID Number	Lot Number	Unit Box Number	Amount Dispensed to Box	Expiration Date	Person Dispensing	Date Used	Run Number	Amount Administered	Name of Administering Paramedic	Balance	Verification of Witness for Audit

EXETER DISTRICT AMBULANCE

Controlled Substance Administered/Dispensed Log

Versed

Assigned Date	ID Number	Lot Number	Unit Box Number	Amount Dispensed to Box	Expiration Date	Person Dispensing	Date Used	Run Number	Amount Administered	Name of Administering Paramedic	Balance	Verification of Witness for Audit

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NARCOTICS ADMINISTRATION
RESUPPLY REQUEST FORM

Requester _____ **Date** _____

Type Requested ☐ **Versed** ☐ **Fentanyl**

Current Count _____ **Cycle Low** _____

_____ _____
Signature **Date**

OFFICE USE ONLY

_____ _____
District Manager Authorization **Date**

_____ _____
Recommended Vendor **Quantity**

_____ _____
Ordered By **Date**

_____ _____
Vendor **Quantity**

_____ _____
Order Confirmation **Delivery Date**

_____ _____
Received By **Date**

_____ _____
Inventory Acknowledgement **Quantity Received**

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NARCOTICS CONTROL FORM
TRANSFER OF RESPONSIBILITY
SHIFT CHANGE

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Date / Time	From Paramedic	To Paramedic	Box #	Sealed?	Versed	Fentanyl	Note

This Log is to be kept in the left side of the Ambulance's Narcotics Control Book at all times

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MEDICATION USAGE

Patient Account # ____ Date ____

Run # ____ Time ____

Patient Name ____

Medication ☐ Versed ☐ Fentanyl Quantity ____

MD Name ____

Tag # ____ Box # ____

Paramedic Signature ____ Cert # ____

Comments ____

MEDICATION WASTED/DISPOSED – 2 SIGNATURES REQURIED

Quantity wasted/disposed ____

MICN/RN Signature ____ Cert # ____

Paramedic Signature ____ Cert # ____

Notes ____

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Patient Account # ____ Date ____

Run # ____ Time ____

Patient Name ____

Medication ☐ Versed ☐ Fentanyl Quantity ____

MD Name ____

Tag # ____ Box # ____

Paramedic Signature ____ Cert # ____

Comments ____

MEDICATION WASTED/DISPOSED – 2 SIGNATURES REQURIED

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Notes ____

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