

Please Fax to Winchester Medical Center Pharmacy **24 HOURS Prior** to pick up.

Pharmacy Fax Number: (540) 536-8948

<b>Expiring Drug Exchange Form</b>					
_____					County/City
Monthly Inventory of Drugs					
Date of Request: _____		ALS Provider: _____		Unit: _____	Company: _____
Drug Box #: _____		Drug Box Security Tag #: _____			
Controlled Substance Pouch Security #: _____					
Item Description	# Need	Filled	Item Description	# Need	Filled
Adenosine 6 mg/2 mL - 2 mL Injection (3)			Metoprolol 5 mg/5 mL - 5 mL Injection (3)		
Albuterol Sulfate 2.5 mg/3 mL Nebulizer (5)			Naloxone 0.4 mg/mL - 10 mL Injection (3)		
Amiodarone 150 mg/3 mL - 3 mL Injection (3)			Naloxone 0.4 mg/mL - 1 mL Injection (5)		
Aspirin 81 mg Chewable Tablets (4)			Nitroglycerin Ointment 2% With Paper (2)		
Atropine 1 mg/10 mL - 10 mL Luer Jet Syringe (3)			Nitroglycerin 0.4 mg (SL) Tablets 25 Count (1 Bottle)		
Calcium Chloride 100 mg/mL - 10 mL Injection (1)			Ondansteron (Zofran) ODT 4 mg Tablets (2)		
Dextrose 50% 50 mL Luer Jet Syringe (2)			Ondansteron (Zofran) 4 mg/2 mL - 2 mL Injection (2)		
Diphenhydramine (Benadryl) 50 mg/mL - 1 mL Injection (1)			Rocuronium Bromide 50 mg/5 mL Injection (2)		
Dopamine Premixed 800 mg/250 mL (3200 mcg/mL) Drip (1)			Sodium Bicarbonate 50 meq/50 mL-50 mL Luer Jet Syringe (2)		
Epinephrine 1:1,000 1 mL Injection (2)					
Epinephrine 1:1,000 30 mL Injection (1)			<b>Narcotics Kit - (Will Receive In A Kit)</b>		
Epinephrine 1:10,000 10 mL Luer Jet Syringe (4)			Fentanyl 100 mcg/2 mL - 2 mL Injection (2)		
EpiPen 0.3 mg - 0.3 mL Syringe (1)			Midazolam 5 mg/5 mL - 5 mL Injection (4)		
EpiPen Jr. 0.15 mg- 0.3 mL Syringe (1)			Ketamine 50 mg/mL - 10 mL Injection (1)		
Glucagon 1 mg/mL (Kit) For Injection (2)					
Haloperidol 5 mg/mL - 1 mL Injection (2)					
Ipratropium Bromide 0.02% 0.5 mg/2.5 mL Nebulizer (1)			<b>IV Fluid</b>		
Ketorolac Tromethamine (Toradol) 30 mg/mL Injection (1)			Dextrose 5% 100 mL Braun Bag (1)		
Lidocaine 2% 100 mg/5 mL - 5 mL Luer Jet Syringe (3)					
Magnesium Sulfate 1 gm/2 mL - 2 mL Injection (4)			<b>Items Not Provided by Valley Health</b>		
Methylprednisolone (Solu-Medrol) 125 mg Injection (2)			Tranexamic Acid (TXA) 100 mg/mL - 10 mL injection		
Comments: _____					
_____					
RPh Signature: _____			Pharmacy Technician Signature: _____		

**Note To Pharmacy:** Please be sure to check identification of rescue squad personnel when dispensing medications.