



***Regional Drug/Narcotics  
Accountability and  
Control Policy***

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**LORD FAIRFAX EMERGENCY MEDICAL SERVICES COUNCIL, INC.  
REGIONAL DRUG/NARCOTICS ACCOUNTABILITY AND CONTROL POLICY**

## Revision History

Description of Change	Change Effective Date
Original Document	12/2009
Approved by Board of Directors	12/2009
Approved by Board w/minor revisions	2/2011
Approved by Board with revisions	3/2012
Approved by Executive Board with revisions	3/27/2013
Approved by Board of Directors	8/2013
Approved by Board of Directors	5/2014
Approved by Executive Committee w/minor revisions	6/2015
Approved w/minor revisions	4/2016

## A. Description

In order to provide a drug and narcotics accountability and control system, the Lord Fairfax EMS Council (LFEMSC) and their Medical Direction Board has adopted the following policy. This policy shall establish regional guidelines for drug and narcotics exchange, security, and storage.

## B. Background

The Commonwealth of Virginia does not license emergency medical service pre-hospital providers. Instead, the Commonwealth of Virginia certifies providers to meet national standards at both the Advanced and Basic Life Support levels. All EMS agencies in the Commonwealth of Virginia are required to have an Operational Medical Director (OMD) who is responsible for proper patient care in the jurisdiction they serve. This responsibility rests through a cooperative effort of the LFEMSC Medical Direction Board. Additionally, part of the system is the administration and oversight of controlled substances, regulated medical devices and their use, security, and control which are governed by the laws of the Commonwealth of Virginia and require rigid security.

## C. Goal

Effectively implement a policy within the LFEMSC region regarding the exchange, security, and storage of drugs and narcotics by establishing a Council-wide guideline.

## D. Drug Box Description

The drug boxes in the Lord Fairfax EMS Council region will be described as indicated below:

1. The drug boxes will remain the property of the Lord Fairfax EMS Council for grant accountability. The Council will continue to replace damaged boxes.
2. The LFEMSC or Agency OMD approved drug box will be used to store drugs on ALS permitted vehicles.
3. A separate narcotic pack will be used to store ALL controlled substances within the LFEMSC approved drug box.
4. The yellow drug box (STAT box) will be used to store approved BLS drugs on BLS permitted units. **(Applies only to Warren County)**

## **E. Exchange**

1. All agencies in the LFEMSC region are required to adopt the one for one drug exchange program by **October 1, 2013**. The pack containing the controlled substances must be exchanged as a complete unit.
2. After the initial Council-wide training, each agency shall be responsible for the training of all new ALS and EMT providers on the one for one drug exchange program prior to the provider being cleared as an Attendant-In-Charge (AIC).
3. The EMS agency in which the EMS vehicle is permitted to and its providers shall be responsible for replacing used and/or expired drugs.
4. The agency which the vehicle is permitted to shall be responsible for the drugs, regardless of volunteer or career staffing.
5. Drugs shall be exchanged or replenished prior to the expiration date or per Pharmacy recommendations and utilizing the correct form.
6. The agency the EMS vehicle is permitted to will be responsible and billed for any damaged and/or expired drugs.
7. This policy shall not replace any existing policies regarding required signatures for drug or narcotics utilization.
8. The Pre-Hospital Patient Care Report (PPCR) or Electronic Patient Care Report (e-PCR) with the physician signature for drug utilization shall be left in the designated location to account for all drug utilization within 12 hours.
9. The licensed physician whose name appears on the Board of Pharmacy license shall supervise the one for one drug exchange program in the LFEMSC region.
10. The Regional EMS Systems Coordinator will be the primary contact between the LFEMSC region, the licensed physician whose name appears on the Board of Pharmacy license, and the Virginia Board of Pharmacy. All questions and problems will be reported in writing or via email, [lfemspi@vaems.org](mailto:lfemspi@vaems.org).
11. When an ambulance transports a patient to Sentara Rockingham Memorial Hospital Medical Center and the drug box requires a restock of any content, Sentara RMH has asked that the provider(s) use the appropriate form for drug exchange. An example of this form is Attachment E within this document. The original copy comes in triplicate form. These forms can be obtained at Lord Fairfax EMS Council.

## **F. Security and Storage**

1. The drug boxes shall be sealed and stored within a locked drug compartment onboard the EMS permitted vehicle. When the drug box is removed from the drug compartment, it must be maintained under the control of an ALS or EMT provider.
2. IV supplies shall be stored in a secured, locked compartment.

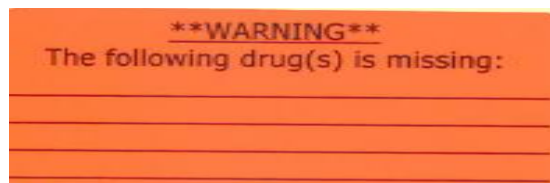
3. When the unit is out of service temporarily, the drug boxes must be stored in a locked cabinet with access limited to those personnel authorized to have access to the drug boxes.
4. The agency the EMS vehicle is permitted to is responsible for ensuring the security of the drug cabinet key or change the cabinet combination when an EMS provider loses his/her privilege to practice EMS or leaves the agency.
5. The drug box and narcotic pack shall be checked and documented at the start of each duty shift or per schedule approved by the local jurisdiction and Regional EMS Systems Coordinator. The security feature shall be checked for integrity and documented at least weekly. (Example forms are included as Attachment A – daily/weekly/shift or Attachment B weekly and Attachment C-- monthly). This documentation shall be maintained by the responsible agency and be made available for review by the Regional OMD and Regional EMS Systems Coordinator upon request.
6. The drug box and narcotic pack shall be inventoried at least monthly to verify box accuracy and drug expiration. (An example form for documenting monthly inventories is included as Attachment C—monthly and Attachment D—Expiring Inventory Exchange Form). This documentation shall be maintained by the responsible agency and made available for review by the Regional OMD and Regional EMS Systems Coordinator upon request.
7. Any time that the narcotic pack is removed from storage on the EMS unit, it shall be maintained by a released ALS provider or stored in accordance with the Virginia Board of Pharmacy Regulations.
8. All un-used, drawn up narcotics shall be disposed of in accordance with the Regional Pre-Hospital Standard Patient Care Treatment Protocols on page 13 and shall be documented on the PPCR or e-PCR and signed by the provider and witnessed by another appropriate source. There is to be no opened narcotics sent to the pharmacy.
9. The electronic health record shall have the original signature of the physician and EMS provider. Electronic signatures are not valid according to the Virginia Board of Pharmacy.
10. Agencies are responsible to ensure that IV supplies, drugs, and narcotics are stored in such a manner that they will not undergo extreme temperatures or extreme temperature changes, as per Virginia EMS Regulations, 12 VAC5-31-520 “Storage and security of drugs and related supplies”.
11. At a minimum, the agency the EMS vehicle is permitted to shall follow the Virginia Board of Pharmacy Regulations for proper storage and security of all drugs.
12. Each agency is encouraged to use, as needed, additional security measures for the drug boxes, i.e. security numbered locking mechanisms.
13. The Chief Rescue Officer or Chief Operating Officer shall have the responsibility for maintenance, storage, and security of the drug boxes.

## G. Drug Shortage

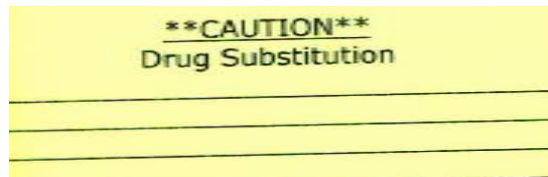
The hospital pharmacist-in-charge has the authority to alter the quantities of drugs supplied, concentration of a drug, or substitute another drug within the same class of drugs due to shortage.

The pharmacist or pre-hospital provider shall place a sticker on each box when a change has occurred. These stickers have been created and disseminated throughout the Lord Fairfax EMS Council Region, a supply will be kept in each drug box for instant indication of any change.

Shortage/Substitution Sticker information is as follows:



- 1) The Orange sticker indicates that the drug(s) is missing from inventory due to shortages, when there is no substitution for the drug available.



- 2) The Yellow sticker indicates that a substitution has been made for a drug when the original one used is not available for restock.

**Attachment A – Daily/Weekly/Shift**

_____ COUNTY / CITY <b>DAILY/WEEKLY/SHIFT DRUG BOX VERIFICATION FORM</b> STATION / BATTALION _____
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WEEK: \_\_\_\_\_ TO: \_\_\_\_\_

UNIT: \_\_\_\_\_ DATE: \_\_\_\_\_

	MON	TUE	WED	THUR	FRI	SAT	SUN
<b>BOX#</b>							
<b>SEAL#</b>							
<b>EXPIRES</b>							
<b>INITIAL</b>							
<b>BOX#</b>							
<b>SEAL#</b>							
<b>EXPIRES</b>							
<b>INITIAL</b>							
<b>BOX #</b>							
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<b>SEAL#</b>							
<b>EXPIRES</b>							
<b>INITIAL</b>							
<b>BOX#</b>							
<b>SEAL#</b>							
<b>EXPIRES</b>							
<b>INITIAL</b>							

**Attachment B – Weekly**

_____ COUNTY / CITY <b>WEEKLY DRUG BOX VERIFICATION FORM</b> STATION / BATTALION _____
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UNIT: \_\_\_\_\_ MONTH/YEAR: \_\_\_\_\_

	WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5
BOX#					
SEAL#					
EXPIRES					
INITIAL					
BOX#					
SEAL#					
EXPIRES					
INITIAL					
BOX#					
SEAL#					
EXPIRES					
INITIAL					
BOX#					
SEAL#					
EXPIRES					
INITIAL					
BOX#					
SEAL#					
EXPIRES					
INITIAL					



**Attachment C – Monthly Inventory**

_____ COUNTY / CITY <b>MONTHLY INVENTORY OF DRUGS</b>
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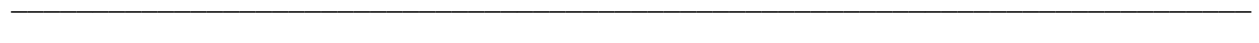
Date of Inventory: \_\_\_\_\_ ALS Tech: \_\_\_\_\_

Company: \_\_\_\_\_ Unit: \_\_\_\_\_

Drug Box # \_\_\_\_\_ Drug Box Security Tag # \_\_\_\_\_  
 Narcotic Pack Security Tag # \_\_\_\_\_

Item (Quantity)	Expires	Item (Quantity)	Expires
Adenosine (3)		Fentanyl (2)	
Albuterol (5)		Glucagon (2)	
Amiodarone (3)		Haloperidol (2)	
Aspirin Tablets (one bottle)		Magnesium Sulfate (4)	
Atropine (3)		Metoprolol (3)	
Atrovent (1)		Morphine Sulfate (2)	
Benadryl (1)		Narcan (1)	
Calcium Chloride (1)		Nitroglycerin- Bottle (1)	
Dextrose (2)		Nitropaste (2)	
Diazepam (2)		Sodium Bicarbonate (2)	
Dopamine Premixed (1) with micro drip (60gtt) set		Solu-Medrol (2)	
Epinephrine 1:1,000 (2) Ampules		Vasopressin (2) – <b>DO NOT</b> <b>restock if used or expires</b>	
Epinephrine 1:1,000 (1) Vial		Versed (2)	
Epinephrine 1:10,000 (4)		Zofran (2)	
EpiPen (1)		<u>IV Fluid</u>	
EpiPen Jr (1)		0.09% Normal Saline-1L (2)	
		Dextrose 5% 100mL Bag (1)	

Comments: \_\_\_\_\_



**Attachment D- Expiring Inventory Exchange Form**

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 6mg/ 2ml- 2ml Injection (3)			Naloxone 0.4mg/ml- 10ml Injection (1)		
Albuterol Sulfate 2.5mg /3ml Nebulizer (5)			Nitroglycerin ointment 2% with paper (2)		
Amiodarone 150mg/3ml- 3ml Injection (3)			Nitroglycerin 0.4mg (SL) tablets 25ct. (one bottle)		
Aspirin 81mg Chewable tablets (4)			Ondansteron 4mg/2ml- 2ml Injection (2)		
Atropine 1mg/10ml- 10ml Luer Jet Syringe (3)			Sodium Bicarbonate 50meq/50ml- 50ml Luer Jet Syringe (2)		
Calcium Chloride 100mg/ml- 10ml Injection(1)					
Dextrose 50% 50ml Luer Jet Syringe (2)					
Diphenhydramine (Benadryl) 50mg/ml- 1ml Injection (1)			<b>Narcotics- (will receive in a kit)</b>		
Dopamine Premixed 800mg/250ml (3200mcg/ml) Drip (1)			Diazepam 10mg/2ml- 2ml Injection (2)		
Epinephrine 1:1000 1ml Injection (2)			Fentanyl 100mcg/2ml- 2ml Injection (2)		
Epinephrine 1:1000 30ml Injection (1)			Midazolam 5mg/5ml- 5ml Injection (2)		
Epinephrine 1:10,000 10ml Luer Jet Syringe (4)			Morphine 10mg/ 1ml- 1ml Injection (2)		
EpiPen 0.3mg- 0.3ml Syringe (1)					
EpiPen Jr. 0.15mg- 0.3ml Syringe (1)					
Glucagon 1mg/ml (Kit) for Injection (2)					
Haloperidol 5mg/ml- 1ml Injection (2)			<b>IV Fluid-</b>		
Ipratropium Bromide 0.02% 0.5mg/2.5ml Nebulizer (1)			Dextrose 5% 100ml B.Braun bag (1)		
Lidocaine 1% or 2% 40mg/2ml- 10ml Injection (1) Based on product availability					
Magnesium Sulfate 1gm/2ml- 2ml Injection (4)					
Methylprednisolone Solu-Medrol 125mg Injection (2)					
Metoprolol 5mg/5ml- 5ml Injection (3)					
Comments: _____					
_____					
_____					
RPh Signature:			Pharmacy Technician		

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

**Attachment E- Drug Exchange Form FOR USE AT SENTARA RMH Medical Center**



**Drug Exchange Form**

<b>Patient Sticker or</b>
Name: _____
DOB: _____

<b>Agency:</b>	<b>Box #:</b>	<b>Incident #:</b>	<b>Date of incident:</b>
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Controlled Medication Usage		
Medication Name	Amount Administered	Amount Wasted
Diazepam (Valium®) 10mg/2mL (2)		
Fentanyl (Sublimaze®) 100mcg/2mL (2)		
Midazolam (Versed®) 5mg/5mL (2)		
Morphine 10mg/1mL or 2mL (2)		

<b>ALS provider (print):</b>	<b>Signature:</b>
<b>EMS Crew Witness (print):</b>	<b>Signature:</b>
<b>Physician (print):</b>	<b>Signature:</b>

Non-controlled Medication Usage			
Medication	Qty used	Medication	Qty used
Adenosine (Adenocard®) 6mg/2mL (3)		Haloperidol (Haldol®) 5mg/1mL (2)	
Albuterol (Proventil®) 2.5mg/3mL (5)		Hydroxocobalamin (Cyanokit®) 5g/200mL (1)	
Amiodarone (Coradarone®) 150mg/3mL (3)		<u>WMC-ONLY</u>	
Aspirin 81mg chewable		Ipratropium Bromide (Atrovent®) 0.5mg/2.5mL (1)	
Atropine 1mg/10mL (3)		Magnesium Sulfate 1g/2mL (4)	
Calcium Chloride 10% 1g/10mL (1)		Metoprolol (Lopressor®) 5mg/5mL (3)	
Dextrose (Glucose®) 25g/50mL (2)		Naloxone (Narcan®) 4mg/10mL (1)	
Diphenhydramine (Benadryl®) 50mg/1mL (1)		Nitroglycerin (Nitropaste, Nitro-Bid) 1g (2)	
Dopamine (Intropin®) 800mg/250mL (1) (RMH techs—see manager for this item)		Nitroglycerin (Nitrostat®) 0.4mg (one bottle)	
Epinephrine 1:1,000 1mg/1mL (2)		Ondansetron (Zofran®) 4mg/2mL (2)	
Epinephrine 1:1,000 30mg/30mL (1)		Vasopressin (Pitressin®) 20units/1mL (2)	
Epinephrine 1:10,000 1mg/10mL (4)		Micro Drip (60gtt) set	
EpiPen® 0.3mg (Not provided by RMH)		0.09% Normal Saline 1000mL	
EpiPen Jr.® 0.15mg (Not provided by RMH)		Dextrose 5% 100mL	
Glucagon (Glucagen®) 1mg		Other:	

<b>EMS Crew Member (print):</b>	<b>Signature:</b>
<b>Pharmacy Tech:</b>	<b>Pharmacist:</b>

Created: 9/3/2013

***Pharmacy Fax Numbers***

<b>PAGE MEMORIAL HOSPITAL, PHARMACY</b>	<b>(540)743-5591</b>
<b>SENTARA ROCKINGHAM MEMORIAL HOSPITAL, PHARMACY</b>	<b>(540)689-2414</b>
<b>SHENANDOAH MEMORIAL HOSPITAL, PHARMACY</b>	<b>(540)459-1103</b>
<b>WARREN MEMORIAL HOSPITAL, PHARMACY</b>	<b>(540)636-0345</b>
<b>WINCHESTER MEDICAL CENTER, PHARMACY</b>	<b>(540)536-7819</b>