



City of Winter Park Fire-Rescue Standard Operating Guideline

300.05

**Title: Handling and Storage of
Pharmaceuticals**

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Purpose: To establish guidelines for the inventory control, storage, access, care and handling of all Advanced Life Support Medications and authorized ALS boxes.

Scope: These procedures apply to all personnel assigned to Fire Operations. Authority to deviate from this guideline rests with the EMS / Supervisors.

General: Inventory control, access, care and handling of the ALS box and all medications are the responsibility of the Paramedic(s) on the assigned ALS unit on each shift.

300.05.01. Inventory Control

- The oncoming assigned Paramedic shall physically perform a complete Drug Box inventory each morning.
- This shall be accomplished as close to shift change as possible but no later than 0800 hours. Emergency calls shall be the only acceptable event to interfere with this procedure.
 - ▷ An inventory shall be completed whenever a Paramedic reports for duty regardless of the time or circumstances.
 - ▷ Medication inventories shall be recorded on the “*Drug Box Daily Inventory*” form verifying the exact quantities of each medication.
 - ▷ These forms shall be retained in the binder provided for each unit, and kept with the assigned drug box on the vehicle.
 - ▷ In the event the Drug Box is moved to a reserve vehicle, the “*Drug Box Daily Inventory*” will be moved and kept with the assigned Drug Box.

- ▷ Narcotics shall be inventoried and the seal number recorded or verified intact every morning.
- ▷ Inventory sheets shall not be altered or destroyed, and shall be sent to the EMS office after completion.
- Unit Identification, date, time, and initials will be recorded in the appropriate spaces on the inventory form.
- The expiration dates for all medications and solutions shall be checked and recorded on the “*Drug Box Daily Inventory*” form on the 1st of each month.
 - ▷ Expiring medications and fluids shall be returned to the EMS Supervisor for quarantine and replacement on the first day of expiration month. (Example: If the drug expiration date is 2/1/11 or 2/11 exchange these drugs on 2/1/11.)

The EMS Supervisor shall be notified immediately of any discrepancies discovered during a daily or monthly inventory check. The cause of the discrepancies shall be submitted in writing to the EMS Supervisor through the chain of command. Steps shall be taken to prevent reoccurrence.

If narcotics are missing, notification will be made to the EMS Supervisor, and the Fire Chief through the chain, and notification will also be sent to the current Medical Director with whom the Department has a contract.

In the event the boxes or compartments containing the medications have been tampered with, it will be reported to the Battalion Chief of that shift, EMS Supervisor, and Medical Director (as stated above). If it is determined that there may have been criminal activity the police will be notified for investigation.

300.05.02. Storage

- All Pharmaceuticals in main storage are kept in a locked, climate controlled, alarm secured room with access limited to the EMS Supervisor or designee.
- Pharmaceuticals on units are kept in locked boxes in locked compartments. The Drug box locks are keyed alike. Keys for these locks are numbered and assigned to the Paramedics.

300.05.03. Replacement of Narcotics

All Pharmaceuticals carry within them a degree of security. Narcotics however require a level of accountability beyond standard measures. The narcotics carried by WPFD units are.

- Morphine Sulfate /Analgesic 20 mg.
- Valium (diazepam) Sedative Hypnotic 20mg.
- Versed (midazolam) Sedative Hypnotic 10mg

Following the guidelines set forth in C.F.R. 21 and F.A.C. 64-J. These three drugs are subject to the following accountability measures.

1. No narcotics may be exchanged between drug boxes under any circumstances. They are to be kept in the position where they are recorded in the main supply log.
2. Narcotics are only removed from the inventoried location for three reasons.
 - It's used on a patient (distribution)
 - It's expired or wasted (disposal)
 - it's damaged or broken accidentally (re-supply)
3. When any of the above three events take place the responsible paramedic shall notify the EMS Supervisor.
 - The responsible paramedic shall provide the EMS Supervisor with the run number and amount requesting.
 - If the responsible paramedic is assigned to a sub-station that unit shall then travel to station 61 to re-supply.
4. Narcotics that require wasting will only be done by the responsible paramedic who said drugs are assigned to.

300.05.04. Accountability

- The responsible paramedic shall be defined as that paramedic designated by the company officer to perform primary patient care duties and perform medication inventories on that unit / shift.
- The responsible paramedic will be accountable for completion and accuracy of the "*Drug Box Daily Inventory*" and Administration form.

Failure to complete the daily inventory and form by 0800 at the beginning of every shift will be grounds for disciplinary actions.

- It will be the station Lieutenant's responsibility to insure the completion of daily inventory of the drug box by the responsible paramedic every morning by 0800.
- Lieutenants who fail to properly monitor their assigned paramedics medication checkout procedures per this SOG and an inventory discrepancy is found to exist, shall be required to submit in writing to the Shift Battalion Chief, EMS Supervisor, and the Medical Director (as stated above), the reason for the discrepancy and/or the lack of supervision. Failure of the Lieutenant to provide the required documentation will be reported to their Battalion Chief for disciplinary actions.



A handwritten signature in black ink, appearing to read "James E. White".

James E. White
Chief of Department