

APPROVAL:

Policy Number: PCS466

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CHIEF OPERATING OFFICER

DATE

CHIEF NURSING OFFICER

DATE

*[Handwritten signatures]*

9/11/07

**SUBJECT: PARAMEDIC MEDICATION EXCHANGE**

**POLICY:**

Replacement of Emergency Medical Service medication boxes is an important and vital component to assure efficient and timely return to patient care service. The UPHK-affected departments will support this activity in accordance with regional, state and federal regulations pursuant to legend and controlled substances.

**PURPOSE:**

To establish written guidelines for the exchange and accountability of prehospital drugs and drug boxes.

**IMPLEMENTATION PLAN:**

The hospital is committed to the appropriate in-service education of all those affected by a new policy so that implementation will occur in a consistent and informed manner. The administrator (or designee) in charge of the relevant department will be responsible for the in-service education of those employees affected by the policy. There will be an employee sign-in sheet or other similar documentation to establish the employees who have received education on the policy. The appropriate administrator (or designee) will maintain such documentation.

**PROCEDURE:**

**1.0 GENERAL**

- 1.1 Medications in boxes for units based at UPHK are the property of the agency.
- 1.2 A patient sticker should be placed on the First Care Form to indicate that the patient has been admitted to the UPHK Emergency Department.
- 1.3 A roster of EMS personnel based at UPHK will be posted in the Inpatient Pharmacy. EMS personnel on this list will be allowed to exchange medications (both controlled and non-controlled substances) at UPHK whether they transported a patient to UPHK or not. EMS personnel must present identification at the time of medication exchange.

- 1.4 Pharmacy staff do not have to check the medication box for outdates. This is the responsibility of EMS personnel.
  - 1.5 Non-UPHK based units may exchange controlled substances at UPHK when a patient is transported to UPHK. Non-UPHK units must return to their base hospital for controlled substance replacement.
  - 1.6 All medications will be exchanged in the Pharmacy Department.
- 2.0 DRUG FOR DRUG EXCHANGE**
- 2.1 In order for the medication exchange process to flow smoothly the following procedure will be used:
    - 2.1.1 The Paramedic or EMT will:
      - 2.1.1.1 Present original copy of the First Care Form to Clinician receiving patient in the hospital.
    - 2.1.2 The ED Provider will:
      - 2.1.2.1 Review the First Care Form for accuracy
      - 2.1.2.2 Complete the telemetry documentation form
      - 2.1.2.3 Sign the signature line on the telemetry form
    - 2.1.3 The Nurse will:
      - 2.1.3.1 Provide a copy of the First Care Form to the Paramedic or EMT to take to the Pharmacy for exchange
      - 2.1.3.2 For controlled substances the nurse will also provide a copy of the signed telemetry form.
    - 2.1.4 The Paramedic of EMT will:
      - 2.1.4.1 Bring the required forms to the Inpatient Pharmacy.
      - 2.1.4.2 If a controlled substance is to be exchanged the medication box must also be brought to the Pharmacy, but should not be removed from the EMT or Paramedic's possession by the Pharmacy.
    - 2.1.5 The Pharmacist will:
      - 2.1.5.1 Ensure that all forms are present, completed and signed.
      - 2.1.5.2 Replace the medication from regular stock or from the CII Safe
      - 2.1.5.3 File all documentation in the appropriate binder
  - 2.2 Non-UPHK units who bring a patient to UPHK may have medications replaced. These medications will be billed to the patient via the UPHK billing system. Otherwise, a non-UPHK unit may not replace medications at UPHK but should go to their base hospital for replacement.
  - 2.3 Pharmacy will bill the patient after appropriate documentation is presented.
- 3.0 DRUG WASTAGE PROCEDURE**
- 3.1 If an EMS Technician uses only a portion of a controlled substance, another licensed or certified personnel associated within their scope of practice will witness the wastage.

- 3.2 UPHK personnel (e.g Emergency Department and Pharmacy staff) will not be responsible for the witness of controlled substance wastage, unless the EMS team does not have an additional licensed or certified individual for co-signature.

#### 4.0 DISCREPANCIES, MISSING, TAMPERED CONTROLLED SUBSTANCES

- 4.1 Discrepancies such as missing controlled drugs, containers that have been tampered with, broken containers, etc, must be documented and sent to the Base Prehospital Coordinator and the Director of Pharmacy Services upon discovery.
- 4.2 The Base Prehospital Coordinator will initiate an incident report and report the incident to the agency involved.
- 4.3 The Pharmacy will notify the Arizona Department of Health Services within 72 hours. Other agencies such as the Department of Public Safety (DPS), the State Board of Pharmacy and the Drug Enforcement Agency will be notified, if necessary.
- 4.4 The EMS Technician must document the discrepancy and take the appropriate documentation to the Pharmacy for exchange.

#### 5.0 MEDICATION EXCHANGE FOR EXPIRING MEDICATIONS

- 5.1 The Pharmacy will only replace medications for the EMS service units that are contracted with UPHK as a Base Hospital.
- 5.2 When an EMS Technician has medications that have expired or will expire, a request should be made on a UPHK Prehospital Services Drug Replacement/Exchange Form at least 1 hour prior to the time medications will be needed.
- 5.3 Expired medications will only be exchanged for UPHK-based EMS units and will be billed as follows:
- 5.3.1 31 + days from expiration = no cost to the agency
  - 5.3.2 30 days or less from expiration = AWP cost to agency and party performing re-supply will execute the billing functions
- 5.4 Requests for outdated medications from non-UPHK units will be referred to their base hospital.