



**Jefferson County Fire and EMS
Medication Management
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OG: 18-05

Date: 10/2018

Revised:

Purpose: To define the methods of control, documentation, and accountability for all pre-hospital medications stocked and used by JCESA and all Jefferson County EMS Agencies under the authority of JCESA.

Types of Medications: All pre-hospital medications shall be classified into one of three types; BLS, ALS Non-Narcotic, or ALS Narcotic.

BLS Medications

Albuterol	Ipratropium Bromide	Oral Glucose
Aspirin	Naloxone	
Epinephrine Auto-injector (Adult/Jr)	Nitroglycerin	
Epinephrine 1:1000	Ondansetron ODT	

ALS Non-Narcotic Medications

Adenosine	Epinephrine 1:10,000	Ondansetron
Amiodarone	Etomidate	Naloxone
Atropine	Furosemide	Sodium Bicarbonate
Cardizem	Glucagon	Succinylcholine
Dextrose 50%	Ketamine	TXA
Diphenhydramine	Labetalol	Vecuronium
Epinephrine 1:1,000	Lidocaine	

ALS Narcotic Medications

Fentanyl
Midazolam
Morphine



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Procurement: JCESA will procure all ALS Narcotic and ALS Non-Narcotic medications for all Jefferson County EMS Agencies. Each individual EMS Agency will procure BLS Medications for their own units. JCESA will not supply BLS Medications to individual EMS Agencies.

Storage: The following guidelines shall be adhered to by JCESA and all EMS Agencies regarding the storage of medications on EMS Units and excess medication supplies kept on hand to restock.

Storage of Medication on EMS Units

- BLS Medications carried on EMS Units shall be stored in a compartment or bag as dictated by the individual EMS Agency.
- ALS Non-Narcotic Medications shall be kept in a standard Drug Bag. This bag shall be kept in a compartment that is locked with a JCESA supplied padlock and sealed.
- ALS Narcotic medications shall be stored in a blue drug bag inside the red drug bag, and sealed. It is recommended that the patient compartment of an EMS unit be locked whenever it is outside of a secured building and unattended in order to provide a third lock and level of security.

Storage of Excess Medication

- Excess BLS medications kept on hand by the EMS Agencies for restocking shall be stored in accordance to the respective company's policy and practice.
- Excess ALS Non-Narcotic Medication shall be stored in a locked room with controlled access at Station 11.
- Excess ALS Narcotic medication shall be stored in a locked cabinet, in a locked room with controlled access. Only JCESA officers shall have access to the excess supply of ALS Narcotic medications. The JCESA officers shall maintain an accountability log to account for every ALS Narcotic medication purchased.

Spare Drug Bags

- One or more drug bags, in addition to those kept on the EMS units, will be kept fully stocked and maintained as spare. This allows a provider to quickly exchange an incomplete drug bag for one that is fully stocked as needed.
- Spare drug bags will be kept in a locked cabinet, in a locked room with controlled access, at Station 11 and Station 3.
- All spare bags will be locked and sealed.

Restocking: The following will act as a guide for all County ALS providers, both career and volunteer. Final authority and discretion lies with the Medical Director and the JCESA Director or designee.

BLS Medication Restocking

When a BLS Medication is used or found to be expired the provider will replace the medication from the EMS Agency's excess supply and, if applicable, properly dispose of the expired medication.



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ALS Non-Narcotic Medication Restocking

- If an ALS Non-Narcotic medication is used or found to be expired the ALS Provider, if s/he is a JCESA employee, will replace the used or expired medication from the excess supply at Station 11 or Station 3 and, if applicable, properly dispose of the expired medication. The red bag will be re-sealed with a red seal. The date, old seal number, drug used, new seal number, incident number, and provider using the medication will be recorded in the log book kept in the red drug bag. If the ALS Provider who used the medication or found it to be expired is not a JCESA employee, s/he will contact the JCESA officer on duty to arrange for restocking as described.
- If, for any reason, the medication cannot be replaced the red bag will be sealed with a white seal indicating the bag is incomplete and write on 3" wide tape the name of the missing medication, the date, and the name of the provider leaving the bag.

ALS Narcotic Medication Restocking

- If an ALS Narcotic medication is used or found to be expired the ALS Provider, career or volunteer, will contact the JCESA officer on duty for replacement. The ALS Provider must provide the incident number on which the narcotic was used and the bag number from which it came.
- The JCESA officer on duty will replace the used or expired narcotic medication from excess supply and record the pertinent information the narcotic control log.

Note: If restocking a drug bag from the excess bag at Station 3, the provider shall follow the above guidance of white tag and 3" tape describing the condition of the bag. The excess bag at Station 3 should be restocked as soon as feasible to do so.

Partially Used and Wasted Medications: When a partial container of an ALS Narcotic Medication is used the remainder will be wasted at the receiving facility in the Emergency Department. This shall be witnessed and documented on the Narcotic Waste form and signed by both the provider and the witness. This should be done as soon as possible after arrival at the Emergency Department. The Narcotic Waste form must be either completed electronically within the chart (preferred), or scanned and attached to the chart.

Expired medications shall be returned via a Drug Enforcement Administration (DEA) approved reverse vendor under the supervision of the Lieutenant with Logistics assigned as their area of responsibility.

Daily Inspections: The JCESA ALS Provider on duty at each station must review the drug bags(s) to ensure they are present, secure, and the appropriate seal is present and intact.

Monthly Inspections: All drug bags shall be inspected and inventoried monthly. Findings will be recorded on an inspection form provided by JCESA and returned to Station 11. Under normal circumstances this should occur on the first day of each month. The officer on duty on the 1st day of the month shall coordinate the monthly inspection of all drug bags.



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Missing Medications and Exceptions: Any time a medication is found to be missing or there is any exception or deviation from this policy an incident report will be made and submitted to the JCESA officer on duty. Any missing Narcotic ALS Medication must be reported IMMEDIATELY to the EMS Chief, or highest ranking EMS official of the department to which the bag was assigned, and the JCESA officer on duty in addition to making an incident report, which will then be reported to the Operations Commander through the Chain of Command.

Medical Director: _____

Date: _____

Chairman of Chief's Committee: _____

Date: _____