

## APPENDIX N

# EMS Pharmacy Policies and Procedures

Service Name: Carroll County EMS County of Operation: Carroll County

These policies and procedures implement the EMS Pharmacy Agreement dated 5-26-2011. The EMS service director or individual designated in writing within the Pharmacy Agreement shall ensure these policies are implemented and the procedures enacted as defined herein.

**For the purposes of these EMS Pharmacy Policies and Procedures, the terms “drug” or “drugs” shall refer to only those drugs or intravenous infusion products as allowed within the EMS provider scope of practice, within the level of authorization of the EMS service program AND as approved by the physician medical director in writing.**

**For the purposes of these EMS Pharmacy Policies and Procedures, the term “owner” shall refer to the medical director or base pharmacy as designated in writing on the pharmacy agreement.**

1. **Administration of drugs:** An authorized EMS provider shall not administer or assist with the administration of a drug without the verbal or written order of a physician, physician assistant, physician designee or by written protocol.
2. **Controlled substances prescribing:** Controlled substances shall be prescribed only by a person who is authorized by state law. Verbal orders for controlled substances may be given by the receiving hospital’s authorized staff. The controlled substance prescriber must document the verbal order and the drug use.
3. **Storage:** All drugs shall be stored at the proper temperature as defined by the USP/NF. The temperature in the storage compartment shall be recorded during routine inspections on the **EMS Drug Inspection Form**.
4. **Expiration dates:** Any drug bearing an expiration date may not be administered after the expiration date. All drug kits will be labeled with the earliest expiration date of any product contained within and that date shall be record during routine inspections.
5. **Drug disposal or destruction:**
  - a. **Controlled substance** disposal or destruction shall be documented in writing on the **EMS Drug Inventory Control Log** and signed by the EMS provider responsible for administration and witnessed by an EMS provider or a licensed health care provider.
  - b. **Outdated drugs** shall be removed from service until they are disposed of by the owner or designee. The disposal or destruction of the outdated drug shall be documented on the **EMS Drug Inventory Control Log** and signed by two EMS providers or by one EMS provider and a licensed health care provider.
6. **Inventory control:** Drugs carried by the service shall be only those that meet the appropriate scope of practice of the service EMS providers. In addition, the quantity of drugs carried by the service shall be based on the protocol requirements as determined by the service program medical director. Any use, breakage, loss, theft, or other decrease in inventory shall be recorded on the **EMS Drug Inventory Control Log**.
7. **Inspections:** At a minimum, monthly inspections will be conducted and documented on the **EMS Drug Inspection Form**.
  - a. Records of routine inspection and inventory control shall be submitted every six months to the owner.

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- b. Records will be made available upon request of the Iowa Board of Pharmacy Examiners, Iowa Department of Public Health or the federal Drug Enforcement Agency.
  - c. As a minimum, all pharmacy records shall be maintained for a period of four years.
8. **Security:** Access to the drugs will be limited to authorized EMS personnel. The drugs shall be kept in a secure compartment and remain locked until needed for administration. Drug kits found not locked in accordance with these policies and procedures will be subject to immediate inventory and have a variance report completed.
9. **Adverse drug reaction:** Any unanticipated or undesired response directly attributable to the administration of a drug shall be reported by the EMS personnel to the receiving hospital emergency department staff and to the service program medical director.
10. **Drug defects:** Any defects in a drug will be reported, in writing, by EMS personnel to the drug owner.
11. **Drug recalls:** The drug owner is responsible for ensuring that the EMS service program is included in any recall.

### Statements of Affirmation and Agreement

I affirm and declare that I have read Iowa Administrative Code 657—Chapter 11 Drugs in Emergency Medical Service Programs. I understand that I am ultimately responsible for the drugs provided to this service. I will ensure that the service named in this agreement will comply with all applicable requirements set forth.

#### Medical Director Option:

\_\_\_\_\_

Medical Director Print Name

\_\_\_\_\_

Medical Director Signature

\_\_\_\_\_

Date

#### Pharmacy Option:

\_\_\_\_\_

Pharmacist in Charge Print Name

\_\_\_\_\_

Pharmacist in Charge Signature

\_\_\_\_\_

Date

I affirm and declare that I have read Iowa Administrative Code 657—Chapter 11 Drugs in Emergency Medical Service Programs. I understand I am responsible for the service program implementation of this agreement, including, but not limited to, policy and procedure development and implementation in conjunction with the designated service owner.

#### Service Program Director:

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Service Director Print Name

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Service Director Signature

\_\_\_\_\_

Date

#### Service Program Designee (optional):

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Designee Print Name

\_\_\_\_\_

Designee Signature

\_\_\_\_\_

Date