PHOENIX FIRE DEPARTMENT EMERGENCY MEDICAL SERVICES	
Policy Name:  DRUG BOX SUPPLY, INSPECTION, INVENTORY, AND  CHECK OFF	Policy Number: M.P. 1203.01
This policy is for internal use only and does not expand an employee's legal duty or civil liability in any way. This policy should not be construed as creating a duty to act or a higher duty of care with respect to third-party civil claims against employees or the Phoenix Fire Department (PFD). A violation of this policy, if proven, can only form the basis of a complaint by the PFD for non-judicial administrative action in accordance with the laws governing employee discipline.	
Related Policies: M.P. 1202.15 Expired Medications; M.P. 1203.02 Use of Controlled Medication During Medical Response, Restocking and Wastage Procedures	
Other Reference: Arizona Administrative Code (A.A.C.) R9-25-502(A)(4) Table 1: EMCT Drug Box; 21 CFR § 1304.21 General Requirements for Continuing Records; GD-110-PHS-EMS: Controlled Substance Storage Security Guidance	
Date Implemented: 4/2024	Review Date: 4/2029

#### **PURPOSE**

Ensure the proper storage, inventory, replacement, and reconciliation of medications, including controlled substances, in accordance with applicable state and federal law and regulation. Provide policies and procedures for drug box check off and reporting and remediation of discrepancies.

## **POLICY**

Medications, especially controlled substances, are powerful agents that Phoenix Fire Department (PFD) members use to care for patients who are experiencing a medical emergency. PFD's policy is that the proper handling and security of these medications is paramount to ensure the protection of our members and provide the best medical care for our community. All medications carried by PFD are ordered, administered, and reconciled under the license and supervision of the PFD Medical Director. All treatment guidelines, including guidelines that support the use of medications, are administered by the PFD Medical Director. Medications carried by PFD are regulated by the Arizona Department of Health Services (ADHS) and, in the case of controlled substances, the federal Drug Enforcement Agency (DEA).

For the purposes of this policy, drug vending machines and UCAPIT machines are referred to as Automated Dispensing Systems (ADS), a term used in federal Drug Enforcement Agency regulations.

### **RESPONSIBILITY**

The Company Officer, assigned to PFD apparatus or crew, will be responsible for ensuring a paramedic completes and validates the drug box check off. In the event no company officer is assigned (for example, special event staffing), the senior paramedic will ensure the drug box check off is completed and validated. This assessment ensures that the contents of the drug box match the medications and quantities authorized by Arizona Administrative Code (A.A.C.) R9-25-502(A)(4) Table 1: EMCT Drug Box, with the exception of drug boxes checked out from the EMS cache for special events, which, at the discretion of the PFD Medical Director, may or may not include controlled substances. This inventory must be validated in the Electronic Patient Care Record ("ePCR") "Drug Box Check Off" at the start of each shift by 10:00 a.m., or 10 p.m. if working a peak-time rescue. Differing shift start times will be handled on a case-by-case basis. Any failure to complete and validate the drug box check off within this time period will be monitored by the EMS Command Staff section and addressed by the Battalion Chief, Shift Commander or District Commander. Repeated or serious violations will be addressed through the chain of command.

## PROCEDURE FOR DRUG BOX CHECK OFF

A drug box check off will be completed and validated at the beginning of the assigned shift. A drug box check off should also be completed and validated whenever a paramedic arrives at a new apparatus/assignment and when a tamper-proof bag is changed for any reason. Whenever there is a transfer of the drug box to another authorized paramedic, the incoming paramedic must complete and validate a drug box check off to maintain the chain of custody of the controlled medications required by State and Federal regulations.

Medications, supplies, and necessary quantities must be present, within expiration\* and have manufacturers' seals intact (to include caps on all vials).

**Inspection of Medications**: A paramedic should inspect the drug box and inventory the medications prior to accepting custody at the beginning of the shift. The drug box must contain at least the minimum supply of medications required for the highest level of service to be provided by the paramedic.

Inspection of any supply of medications should address all of the following:

- 1. Expiration dates\*
- 2. Deteriorated, discolored or contaminated medications
- 3. Container/label damage
- 4. Evidence of altered labeling
- 5. Tampered seals
- 6. Depleted supply levels
- 7. Missing medications
- 8. The presence of debris inside the container

Any manufacturers' seal discovered to be open or broken on non-controlled medications must be replaced immediately, i.e., medication boxes opened or caps removed from a vial (with the exception of multi-dose Nitroglycerin, multi-dose epinephrine, multi-dose atropine or Aspirin).

**Inspection of Controlled Medications Containers and Seals**: Controlled medication individual containers are to be sealed at all times when not in use. During any inspection of the controlled substances, paramedics should look for the following:

- 1. Opened or Defective Tamper-Proof Bags
- 2. Missing container caps
- 3. Rubber stoppers with needle puncture holes
- 4. Container caps with glue around the base of the rubber stopper
- 5. An inappropriate amount of controlled substance in the container

Each check off procedure will include taking clear pictures of the front and the back of tamper-proof bags. Paramedics may take and upload as many photos as necessary. If there is no need to access the tamper-proof bags, a paramedic will simply inspect the vials (proper amounts, expiration dates\* and condition) and sealed tamper-proof bags for any damage and enter the values for each question in the ePCR Drug Box Check Off.

Once the medication inventory, inspection and photographs of the drug box have been completed, you must validate the ePCR Drug Box Check Off on the tablet.

**Discrepancies During Drug Box Check Off:** If a drug box check off reveals that the manufacturer's seal is broken on controlled medications, immediately notify the Company Officer, call C959 and obtain a replacement from an ADS machine. The medication should be kept as-is, do not waste medication, do not discard the vial, do not throw the cap away, and do not discard the medication into the ADS Machine drop box.

**Other Discrepancies:** If drug box discrepancies are discovered that are not accounted for during the morning drug box check off or related to the use of controlled medication in patient treatment, follow the procedure in "Discrepancies During Drug Box Check Off," informing the Company Officer and C959 that the discrepancy was discovered after the most recent drug box check off. After the discrepancy is addressed complete and validate another Drug Box Check Off.

\*Medical Director Approved Extension of Expiration Dates: Shortages, supply chain issues, and other circumstances may cause the PFD Medical Director to extend the expiration of a medication, including controlled medications. All ePCR Drug Box Check Off entries should reflect accurate information, including accurate dates – even when the medications are beyond printed expiration.

**Restocking:** Restocking of controlled medications should be done at the ADS machine at your station or at a nearby station with an ADS machine, if not performed at an

emergency department. After restocking from the ADS machine, place the controlled medication(s) in a new tamper-proof bag(s), and complete and validate a new ePCR Drug Box Check Off.

When the Tamper-Proof Bag Needs to be Changed: If a tamper-proof bag is opened for any reason, place the medications in a new tamper-proof bag and complete and validate a Drug Box Check Off.

### **FACT FINDING**

If there are discrepancies found during the Drug Box Check Off, the paramedic performing the Drug Box Check Off must begin fact finding by calling the off-going shift to answer questions regarding the discrepancies, especially regarding any controlled substances. If this fact finding does not provide answers and/or the medication is not found, it will be the responsibility of the fact finder to notify their Company Officer, Car 959, and their Battalion Chief. All incidences of lost/missing controlled medications must have a police report and be reported by the PFD Medical Director on the following timeline:

- The United States Drug Enforcement Administration (DEA) within 1 day of discovery. The DEA form may be submitted electronically on their website at www.deadiversion.usdoj.gov
- Arizona Department of Health Services within ten days after discovery.

It will be the responsibility of Car 959 to work with the crew, EMS Division, and PFD Medical Director to formally document the incident and arrange for missing controlled medications to be replaced.

# CONTROLLED MEDICATIONS LOST/STOLEN PROCEDURES

Upon discovery that controlled medications have been lost or stolen, or where a drug box is lost or stolen, the on-duty Captain shall be the one to initiate the below steps:

# **Procedure for the Captain/Paramedics**

- Notify Battalion Chief and Car 959.
- Document facts in an email and send to EMS Deputy Chief and PFD Medical Director.
- If the drug box is retrieved after the loss or theft, paramedics should inspect the drug box. Do not discard any vials that are broken or tampered with including caps, safety seals, and bag. Do not waste medication. Maintain all drug box contents as evidence to provide to Car 959.
- Restock medication as soon as possible to minimize out of service time.
- Once the Drug Box has been restocked, complete and validate a drug box check off.

### **Procedure for Car 959**

- Notify the Medical Director and the EMS Chief(s). Review this procedure with the reporting crew and Captain, instruct them to send an email that describes circumstances, events, and attempts to reconcile missing drug(s) when it is not yet known if they are lost or stolen.
- Forward law enforcement reports to the Deputy EMS Chief and PFD Medical Director.

# Procedure for EMS Chief(s) and Medical Director

- Open investigation with Battalion Chief and Office of Special Investigations (OSI).
- If the medication is not found within 24 hours, notify the Phoenix Police Department and file a police report.
- For loss or theft of controlled substances notify DEA within one day of discovery.
- For loss or theft of controlled substances notify ADHS/BEMSTS within 10 days of discovery.
- Review records to identify any potential source of discrepancy or tampering.
- Ensure all investigations are completed and notifications made to regulatory agencies.

# **ADS Machine (UCAPIT) Dispensing Problems**

If a controlled medication is dispensed by accident or the wrong controlled medication is dispensed, the paramedics should notify their Company Officer and Car 959 immediately to address the situation. Do not place any controlled medications into the ADS machine dropbox, unless instructed to do so by C959.

# **Restock of Expired Controlled Medications**

C959 should be contacted when controlled medications are found to be expired with no approved exception by the PFD Medical Director. Expired controlled medications may be restocked from an ADS machine (UCAPIT) or Car 959.

# **Access to Drug Boxes**

Only PFD crewmembers may access the drug box. While on emergency medical incidents, PFD crewmembers are responsible for the location and security of PFD drug boxes.