



**POLICY AND PROCEDURE**  
**Montgomery County**  
**Fire and Rescue Service**

No. 21-05

DATE

03/10/2005

TITLE

CONTROLLED MEDICATION USE AND  
SECURITY PROCEDURES

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**MONTGOMERY COUNTY FIRE AND RESCUE SERVICE POLICY**  
**CONTROLLED MEDICATION USE AND SECURITY PROCEDURES**

Issued by: Fire Chief

Policy No. 21-05

Supersedes Sec. V.C. "Accountable Drugs Security Procedure,"  
of the MCFRS EMS Operations Manual, 8/94, reprinted 7/97

Authority: Montgomery County Code Section 21-2(d)(4)

Effective Date: March 10, 2005

**SUMMARY:** This policy establishes procedures for the initial stocking, security, use, storage, inspection, disposal, re-stocking, expiration, rotation, audit, loss, and accountability of controlled medications assigned to Montgomery County Fire and Rescue Services Advanced Life Support Units.

**ADDRESS:** Send all comments pertaining to the proposed policy to Beth Feldman, Montgomery County Fire and Rescue Service, 12th Floor, 101 Monroe Street, Rockville, MD 20850, by February 1, 2005. Comments may also be e-mailed to [beth.feldman@montgomerycountymd.gov](mailto:beth.feldman@montgomerycountymd.gov)

**STAFF:** For additional information, please call Beth Feldman at (240) 777-2423

Sec. 1. **Purpose:** To update the controlled drugs procedure for MCFRS EMS providers assigned to MICUs, AFRAs, or any other unit providing advanced life support services, to conform to requirements provided in Section 1301.75(b) of the Code of Federal Regulations. These provisions apply to the initial stocking, security, use, storage, inspection, disposal, re-stocking, expiration, rotation, audit, loss, and accountability of controlled medications.

Sec. 2. **Applicability.** This policy applies to all Montgomery County fire, rescue, and emergency medical service personnel.

Sec. 3. **Definitions.**

a. **ALS.** Abbreviation for *Advanced Life Support*, describing any person(s) or emergency medical services unit providing advanced life support services, or the equipment designated for such care.

b. **AFRA.** Acronym for *ALS First Responder Apparatus*, also referred to as a Medic



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Engine, truck, etc.

- c. **Chase Car.** An automobile, such as an SUV or a sedan, used to transport a Paramedic and ALS equipment, but does not have patient transport capability.
- d. **Controlled Medication.** Medications designated by MCFRS as requiring security and accountability, in accordance with Schedule 1-5 of the United States Drug Enforcement Agency (DEA) guidelines.
- e. **Controlled Medication (Record) Log.** The documentation used to record the nature and amount of controlled medications for ALS units from one shift to another shift.
- f. **Controlled Medication Administration Record.** The document used to record MCFRS-required information regarding the administration of a controlled medication.
- g. **PMIC.** Abbreviation for *Paramedic in Charge*, the designated paramedic who is in charge of patient care on an MCFRS ALS unit. This individual is usually the Paramedic assigned to the M-2 riding position on an ambulance, but this riding position may differ on other types of apparatus.
- h. **Primary ALS Unit.** The first ALS unit due to respond from a station.
- i. **Seal.** An individually-numbered, tamper-evident, pull-tight plastic seal. The control numbers of issued seals is on file with the EMS Duty Officer, and is also recorded on the Controlled Medication Log.
- j. **Secondary ALS Unit.** The next ALS unit due to respond from a station if the primary ALS unit from that station has already responded to, or is committed on a call.
- k. **Specialty ALS Unit.** A Paramedic bike team, Paramedic golf cart, or other designated delivery method for ALS service.

**Section 4. Policy.** It is the policy of the MCFRS to ensure the safe use, accountability, storage, security, and replacement of **controlled medications**, in compliance with requirements provided in Section 1301.75(b) of the Code of Federal Regulations.

**Section 5. Procedure.**

- a. **Purchase/Storage/Provision of Controlled Medication Supplies.** Only the MCFRS Medical Director may purchase supplies of **controlled medications**. The supply of



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**controlled medications** is secured at a location of the Medical Director's choice.

- b. **Initial Stocking of ALS Units.** The EMS Duty Officer will issue **controlled medications** and **seals** to **ALS** units as needed to meet the minimum amounts required to provide patient care. These quantities will be determined by the EMS Section Chief, in consultation with the MCFRS Medical Director.
1. **Seals** for these **controlled medications** are assigned to each **ALS** unit with its medication delivery. The EMS Duty Officer records the **seal** numbers in the **Controlled Medication Log**.
  2. The EMS Duty Officer will issue **controlled medications** to **specialty ALS units** on a temporary basis, for a specific event only. When that event is over, the remaining issued **controlled medications** must be returned immediately to the **EMS Duty Officer**.
  3. MCFRS Paramedics must not seek nor can they accept **controlled medications** or **seals** from any source other than the MCFRS EMS Duty Officer. This includes, but is not limited to, hospitals, commercial pharmacies, private physician's offices, or other **ALS** units.
- c. **Controlled Medication Security and Use.** The EMS Duty Officer assigns a unique control number to all **controlled medications** before consigning them to an **ALS** unit. The Controlled Substance Act of 1970 requires that all **controlled medications** be tracked by an unbroken chain of possession, from the manufacturer to the patient, with a signature required at each step. Accurate record keeping is imperative in this process.
1. The EMS Section requires that all **controlled medications** must be stored in a heavy-duty, clear plastic container, with an eyelet installed and used for **seal** placement. This plastic container must be secured with a tamper-evident, numbered plastic **seal** at all times, and the box must be stored in the **ALS** bag's interior compartment.



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2. At each shift change, or at any other time the **PMIC** of the **ALS** unit changes, the on-coming **PMIC** must inspect the **controlled medications** on the **ALS** unit. The **controlled medications** in the plastic box must be counted without removing the numbered **seal**. The **PMIC** must sign the **controlled medication log**, ensuring that the count and the **seal** numbers are accurate. Whenever the Paramedic signs for a quantity of a **controlled medication**, he/she acknowledges the responsibility for the security, handling, use, and record-keeping for that medication.
3. When a Paramedic needs to use a **controlled medication** on an incident, the **seal** must be broken to open the box. The Paramedic should make every effort to use the vial with the nearest expiration date. Marking methods, such as using a highlighter, can be used to indicate this.
4. As soon as practical after administering a **controlled medication**, the administering Paramedic will dispose of the unused portion, with another Paramedic, a nurse, or a physician present to act as a witness. If no appropriate witness is available, the **PMIC** must contact the EMS Duty Officer immediately.
5. The expiration dates on all vials must be checked whenever the plastic **controlled medication** box is opened.
6. The administering Paramedic must complete the appropriate **controlled medication administration record** by completing the information for the corresponding **controlled medication** to document its use.

d. **Restocking an ALS Unit.**



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1. If the **controlled medication** count on an **ALS** unit drops to the predetermined minimum, the **PMIC** must contact the EMS Duty Officer immediately to restock the **controlled medications** and **seals**. **Seals** must be kept with the issued medications.

2. An **ALS** unit whose supply of **controlled medications** is exhausted must be placed out-of-service until the unit is restocked or released by the EMS Duty Officer. The **controlled medications** stored in the EMS Duty Officer's **ALS** bag may be used on an **ALS** incident, or to restock other **ALS** units.\*

\*Under extraordinary circumstances (e.g., Disaster Level operations) **controlled medications** may be reallocated by other **ALS** units for immediate use. This action must be approved only by EMS Command.

e. **Expired Controlled Medications.** **Controlled medications** with expired dates must not be used. The EMS Duty Officer will track the expiration dates of all **controlled medications**, and will provide replacements within the 2 weeks before their actual expiration date. A Paramedic who finds an expired **controlled medication** must contact the EMS Duty Officer immediately.

1. A **controlled medication** has an expiration date consisting of a month/year format (e.g., 05/03); the medication is considered to expire on the last day of that month.

2. When practical, an EMS Duty Officer may rotate **controlled medications** with imminent expiration dates off of an **AFRA** or **secondary ALS unit** and onto a **primary ALS unit**. A Paramedic must not rotate **controlled medications** from one **ALS** unit to another without the direct permission of an EMS Duty Officer.

f. **Controlled Medication Inspection/Audit.** The **PMIC** must verify **controlled medication** control numbers and expiration dates on a bi-weekly basis.

1. EMS Duty Officers may perform periodic, unannounced inspections or audits of **controlled medications, seals, and controlled medication logs**.

2. EMS Duty Officers are authorized to confiscate any and all **controlled medications, controlled medication logs, and controlled medication administration records** reasonably suspected to be non-compliant with this policy.



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- g. **Lost or Damaged Medication Vials and Discrepancies in a Controlled Medication Log.** Any indications that a tamper-evident **seal** has been breached, that an attempt has been made to do so, or that undocumented changes have been made to the numbered **seals**, must be reported to the EMS Duty Officer and the station's Officer in Charge immediately.
1. **Controlled medications** discovered to be missing or damaged during a shift change, or any discrepancies found in the **controlled medication log** or **controlled medication administration record** must be reported immediately to the station Officer in Charge and the EMS Duty Officer.
  2. A Paramedic who breaks a vial, or accidentally removes the tamper-evident **seal** from one of the vials, must contact the EMS Duty Officer immediately for appropriate investigation.
  3. Any evidence of potential criminal action will initiate a formal investigation, including referral to the appropriate law enforcement agency.
- h. **Procedures for Secondary ALS units and AFRAs.** The **controlled medication** box will be sealed and kept in the center or the right exterior compartment. If the unit is not in-service as an **ALS** unit, a Paramedic or BLS provider will check the **seal** number as part of the daily unit check to verify that there has been no unauthorized access, and he/she will complete the monthly log entry. Any suspected security breach must be reported immediately to the Station Officer and EMS Duty Officer.
1. **Procedures for ALS Chase Cars.** Secure the **ALS** bag in the vehicle if it is parked where it is accessible to the public.
  2. **Procedures for Specialty ALS Units.** The EMS Duty Officer will develop and approve procedures specific to the delivery method for **controlled medications**, in coordination with the Paramedic(s) involved.
- i. **Security when ALS Units are Placed Out-of-Service.** An **ALS** bag must never leave the station, or the control of MCFRS personnel, when the unit is placed out-of-service. If the vehicle is leaving the control of MCFRS personnel, the **ALS** bag must be removed and placed in a secure location, e.g., the station watch office, or the Station Officer's office.

**Section 6. Enforcement.** The Fire Chief is the enforcement authority for all MCFRS policies and regulations, and may delegate enforcement authority for EMS policies to the



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MCFRS Medical Director, or the Division of Fire and Rescue Operations EMS Section Chief, as appropriate.

**Section 7. Performance Measures.** The EMS Section staff will perform an audit of accountability documentation on a quarterly basis to ensure a compliance level of at least 95%. This information will be forwarded to the DFRO EMS Section Chief, MCFRS Medical Director, and the MCFRS Medical Review Committee.

The EMS Section will perform an annual policy review to measure this policy's effectiveness. This information, and any recommended changes, will be forwarded to the EMS Committee, or appropriate decision makers, to structure change to reflect the current practice.

**Section 8. Effective Date.** This policy is effective on March 10, 2005.

Approved:

Tom Carr, Chief  
Montgomery County Fire and Rescue Service

3/2/05

Date

Attachments:

- Controlled Medication Receipt
- Controlled Medication Log
- Morphine Administration Record
- Diazepam Administration Record

APPROVED AS TO FORM AND LEGALITY.

OFFICE OF COUNTY ATTORNEY

BY Richard H. McQuete

DATE 3/1/05

Controlled medication final BF 2-28-05 wp

Montgomery County Fire and Rescue Services  
Emergency Medical Services

## Controlled Medication Receipt

Medication	Expiration Date
ALS Unit	Delivery Date
Control Numbers	Count
Seal Numbers	Count
Receiving Paramedic Signature & ID Number	
EMS Duty Officer Signature & ID Number	
Attach this receipt to Administration Record when returned to EMSDO office.	







**Montgomery County Fire and Rescue Service  
Emergency Medical Services Section**

**MORPHINE ADMINISTRATION RECORD**

**RECEIVING DATA**

MICU #	Date Received	Receiving Medic / ID Number	EMS Duty Officer / ID Number
Control Numbers		Lot Number	Expiration Date

**DISPOSITION DATA**

Control Number	Date	Incident Number	Hospital	Patient's Name	
Amount Given	Amount Discarded	Administering Medic / ID Number	Observing Medic / ID Number	Seal #	

Control Number	Date	Incident Number	Hospital	Patient's Name	
Amount Given	Amount Discarded	Administering Medic / ID Number	Observing Medic / ID Number	Seal #	

Control Number	Date	Incident Number	Hospital	Patient's Name	
Amount Given	Amount Discarded	Administering Medic / ID Number	Observing Medic / ID Number	Seal #	

Control Number	Date	Incident Number	Hospital	Patient's Name	
Amount Given	Amount Discarded	Administering Medic / ID Number	Observing Medic / ID Number	Seal #	

**RECONCILED**

EMS DO Initials:		Date:	
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**Montgomery County Fire and Rescue Service  
Emergency Medical Services Section**

**DIAZEPAM ADMINISTRATION RECORD**

**RECEIVING DATA**

MICU #	Date Received	Receiving Medic / ID Number	EMS Duty Officer / ID Number
Control Numbers		Lot Number	Expiration Date

**DISPOSITION DATA**

Control Number	Date	Incident Number	Hospital	Patient's Name
Amount Given	Amount Discarded	Administering Medic / ID Number	Observing Medic / ID Number	Seal #

Control Number	Date	Incident Number	Hospital	Patient's Name
Amount Given	Amount Discarded	Administering Medic / ID Number	Observing Medic / ID Number	Seal #

Control Number	Date	Incident Number	Hospital	Patient's Name
Amount Given	Amount Discarded	Administering Medic / ID Number	Observing Medic / ID Number	Seal #

Control Number	Date	Incident Number	Hospital	Patient's Name
Amount Given	Amount Discarded	Administering Medic / ID Number	Observing Medic / ID Number	Seal #

**RECONCILED**

EMS DO Initials:		Date:	
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