STANDARD OPERATING PROCEDURE

SOP 301

Pharmaceutical Procurement, Storage and Handling

PURPOSE OF THIS STANDARD

To establish a standard method for the Procurement, storage, distribution and recall of pre-hospital pharmaceuticals.

Section 1 – Procurement

All drugs, whether controlled or non-controlled, shall be procured by the Division Chief of Materials Management or his/her direct Supervisor only.

Non-controlled and control IV pre-hospital drugs shall be ordered by phone, fax or e-mail through an approved vendor. Control II narcotics shall be ordered by submission of DEA form 222. This must be signed by the service Medical Director prior to submission. Upon delivery, narcotics must be signed into the controlled substance inventory log and locked down per policy.
Section 2 – Storage

Non-controlled drugs shall be stored in the designated cabinet in the HCFR warehouse. This cabinet shall be kept dry and free of dust and other contaminants. This area shall be climate controlled and kept at a temperature of approximately 70-75 degrees at all times. Expiration dates are to be checked on a monthly basis. Any drugs that are found to be expired shall be immediately removed from active stock and wasted, returned to the supplier or given to the training division for educational purposes.

Controlled drugs shall be stored in a locked metal cabinet in the office of the Division Chief of Materials Management. Only the Division Chief of Materials Management or his/her designee shall have access to these drugs.

Controlled drugs are logged into inventory as soon as received and a running inventory shall be kept. These drugs shall also be inventoried annually on May 1st, and expiration dates checked. Any drugs found to be expired shall be moved from active stock. Expired controlled drugs shall be stored in the same fashion and inventoried separately until such time as the Drug Control Agent wastes them.

Section 3- Distribution

Non-controlled drugs shall be issued by the Division Chief of Materials Management. This issuance shall be based upon actual call volume, call volume potential and usage of each Medic unit.

Controlled drugs shall also be issued by the Division Chief of Materials Management or his/her designee only. Whenever a Medic crew administers a controlled drug, the senior Medic must immediately notify the Division Chief of Materials Management that a usage has occurred. Notification shall not be considered to have occurred until the senior Medic has spoken directly to the Division Chief (or left a voice mail after hours) or his/her designee. The senior Medic must fill out the controlled substance administration form in its entirety and fax it with physician's signature to the Division Chief. Upon receipt of the paperwork, the Division Chief or his/her designee shall issue a replacement. The senior Medic must sign the Division Chiefs running inventory log acknowledging receipt of replacement drug.

Each time a controlled substance is issued, drug shall be recounted to assure running inventory is correct.
Section 4- Recalls

In the event that a pre-hospital drug is recalled by the manufacturer or supplier, that drug shall be immediately pulled from all ambulances and supply cabinets and shall be shipped back to the supplier or manufacturer. If the recall involves a controlled substance, the drug shall be signed over to the Division Chief of Materials Management or his/her designee. Notation shall be made in the controlled inventory log indicating the recall of the drug in question. This drug shall be handled in accordance with the directions of the manufacturer and in conjunction with the directions of the DHEC Drug Control Agent.