INTRODUCTION

The San Ramon Valley Fire Protection District provides both First Responder Advanced Life Support (ALS) on the fire apparatus and ALS Ambulance transport. As an ALS provider, the District is required to carry narcotics and other controlled substances that come under the Federal Controlled Substances Act, section 812, California Controlled Substance Act and Regulations, Division of Control Amendments of 1984, Registrant Protection Act of 1984, Health and Safety Code Section 11122 and the California Board of Pharmacy.

PURPOSE

The Program has been established to ensure that the District adheres to Federal law regarding the possession and use of Controlled Substances. This Controlled Substance Program Policy has been approved by the Contra Costa County Emergency Medical Services Medical Director.

POLICY

It is the responsibility of all District employees that are required by the scope and/or application of their job duties to adhere at all times to all procedures contained in this Controlled Substance Program Policy.

PROCEDURE

A. INITIAL RECEIPT OF CONTROLLED SUBSTANCE STOCK

1. The Emergency Medical Services Medical Director or his/her designee may order Controlled Substances for initial stock and restock.

2. Controlled Substances shall initially be transported by District Designated Personnel and only to the District’s Emergency Medical Services Division Office. “Designated Personnel” are defined as one of the following:
   - Battalion Chief – Training Division
   - Battalion Chief – Shift Duty
   - EMS Coordinator
   - EMS Quality Improvement Coordinator.

3. Upon the Emergency Medical Services Division Office’s receipt of any Controlled Substance(s), two of the Designated Personnel shall count and record the Controlled Substance(s) on the Controlled Substance Central Supply Inventory Log – Daily and
Receipt. A copy of the Log is attached to this Policy as Attachment “A.” All entries in this Log shall be co-signed by each of the Designated Personnel conducting the initial inventory.

B. STORAGE OF CONTROLLED SUBSTANCES

1. Upon receipt and inventory, all Controlled Substances shall be placed in the Central Supply locked safe, which is located in the Emergency Medical Services Division Office. Access to the safe shall be strictly limited to the Designated Personnel, as set forth in paragraph A-2 of this Policy.

C. DAILY INVENTORY OF CONTROLLED SUBSTANCES

1. Two of the Designated Personnel must conduct an inventory check of all Controlled Substances stored in the Central Supply safe on a daily basis. “Daily” is defined as every business day, Monday through Friday, between the hours of 0800-1700. The inventory check must be documented on a Controlled Substance Central Supply Inventory Log - Daily and Receipt. Both of the Designated Personnel must verify that no quantity discrepancies exist prior to any disbursement of Controlled Substances to Advanced Life Support Units.

D. COUNTY REQUIREMENT FOR CONTROLLED SUBSTANCES STOCK; DISTRICT STOCK LEVELS

Contra Costa County Emergency Medical Services requires that all operating Paramedic units contain the following minimum quantities of Controlled Substances, Morphine Class II and Midazolam class IV, in order to remain in service:

- Three (3) 10 mg. Morphine Sulfate
- Four (4) 5 mg. Midazolam (Two (2) 5 mg. Midazolam on non-transport units)

1. District ALS units shall contain the following quantities of Controlled Substances:

**ALS Ambulances**
- Five (5) 10 mg. Morphine Sulfate
- Five (5) 5 mg. Midazolam

**ALS Fire Apparatus**
- Three (3) 10 mg. Morphine Sulfate
- Three (3) 5 mg. Midazolam
E. STORAGE OF CONTROLLED SUBSTANCES

1. Restock Inventory

The central Controlled Substances inventory will be located in a secured area in the Emergency Medical Services Division Office and stored in a locked safe.

2. Apparatus Inventory

Controlled Substances disbursed to field personnel will be stored in a container that is located in a locked Controlled Substance storage compartment or in a container in the Orange Pelican Medication Box, which is in turn stored in a locked Advanced Life Support Unit. The container must be locked in the Controlled Substance storage compartment or in the Orange Pelican Medication Box at all times except when it is in the immediate possession of a Paramedic who is either transferring possession of a Controlled Substance or administering a Controlled Substance to a patient.

F. DISBURSEMENT OF CONTROLLED SUBSTANCES FROM CENTRAL SUPPLY SAFE

Each pre-load in a plastic tube of a Controlled Substance to be disbursed from the Central Supply safe will be prepared in the following manner:

1. Pre-loads are in plastic tubes. A label displaying the product type, expiration date, and District control number shall be affixed to each plastic tube. The control number shall be a unique number designated by the District and shall not be repeated on any other. The number shall consist of the prefix “SRM,” which is the designator for San Ramon, followed by either “MS” for Morphine or “MZ” for Midazolam and ending with a three-digit unique control number. (Example: SRM-MS-001 for Morphine.)

2. An identically numbered Controlled Substance Administration Card shall accompany each numbered pre-load. An example of a Controlled Substance Administration Card is attached to this Policy as Attachment “B.”

3. Each pre-load of Controlled Substance disbursed from the Central Inventory safe will be logged in the Central Supply Disbursement Log (Attachment “C” to this Policy). Each Supply Disbursement Log entry shall contain the control number issued to the Controlled Substance, the issue date of the Controlled Substance, the name of individual distributing the Controlled Substance, the name of the individual receiving the Controlled Substance, and the reason for restock.

4. Every effort must be made to facilitate the restocking of Controlled Substance containers at the District’s Emergency Medical Services Division Office Monday through Friday between the hours of 0800-1700. However, the District recognizes
that circumstances may occur which might necessitate restocking at a different District location. These circumstances include, but are not limited to, non-business hours or days, station coverage needs, the occurrence of a major incident or disaster, and the like. If circumstances prevent restocking from occurring at the District’s Emergency Medical Services Division Office, the Shift Duty Battalion Chief, Emergency Medical Services Coordinator, or Emergency Medical Services Quality Improvement Coordinator may transport the Controlled Substance to the unit that requires restocking.

G. PARAMEDIC DAILY VERIFICATION PROCEDURE

1. At the beginning of every shift, the Captain and Paramedic or two Paramedics shall inspect the container for an intact numbered seal or the following contents:

   - Ambulance: Five (5) 10 mg. of Morphine Sulfate, packaged and labeled as set forth in Section F-1 of this Policy; accompanied by matching Controlled Substance Administration Cards.
   - Ambulance: Five (5) 5 mg. of Midazolam, packaged and labeled as set forth in Section F-1 of this Policy; accompanied by matching Controlled Substance Administration Cards.

   - ALS Apparatus: Three (3) 10 mg. of Morphine Sulfate, packaged and labeled as set forth in Section F-1 of this Policy; accompanied by matching Controlled Substance Administration Cards.
   - ALS Apparatus: Three (3) 5 mg. of Midazolam, packaged and labeled as set forth in Section F-1 of this Policy; accompanied by matching Controlled Substance Administration Cards.

2. Paramedics must also check the expiration dates of the Controlled Substances for currency. If the Controlled Substance container contains less than the full inventory as set forth above, the Paramedic receiving the container must see that the container is restocked as soon as possible, following the procedures set forth in Section J of this Policy.

3. If an irregularity or discrepancy is apparent in a Controlled Substance container, the Shift Duty Battalion Chief must be notified immediately. Follow all steps as listed in Section L of this Policy.

4. Upon completion of the steps set forth in Sections G-1, G-2, and G-3, inclusive, of this Policy, both the Captain and Paramedic or two Paramedics must sign an Advanced Life Support Unit Controlled Substance Daily Verification Log. A copy of
this Log is attached to this Policy as Attachment “D.”

5. Interns or other persons not employed by San Ramon Valley Fire Protection District are not authorized to inspect, count, or sign for Controlled Substances.

6. In the event there is a complete crew change or the apparatus is reassigned to another crew, the Captain and Paramedic receiving the apparatus shall complete steps set forth in Sections G-1, G-2, G-3, and G-4, inclusive, of this Policy.

H. ADMINISTRATION OF CONTROLLED SUBSTANCES

1. The administration and use of Controlled Substances shall be limited to the following scope and application. Paramedics are not authorized to administer Controlled Substances unless the following requirements are met:

   a. The Paramedic has received a base order, if needed, for the specific Controlled Substance.
   b. The Paramedic is administering the Controlled Substance under a specific standing order.
   c. Specific route of administration of the Controlled Substance has been established.

2. When the above requirements have been met, a Paramedic is authorized to remove the Controlled Substance from the Controlled Substance container. The Paramedic must then inspect the Controlled Substance and see that it possesses all of the following qualities:

   a. Appropriate labeling for the type, amount, and concentration to be used.
   b. An intact pre-load.
   c. An intact control number label on the sealed plastic tube containing the Controlled Substance and a corresponding Controlled Substance Administration Card.
   d. Inspection of the pre-load, after removal from the sealed plastic tube, reveals no discoloration, cloudiness, or particulate matter.
   e. The Controlled Substance’s expiration date has not been exceeded.

   If any irregularity is noted, the Controlled Substance may not be used. The Shift Duty Battalion Chief must be informed of any and all noted discrepancies upon completion of a response or medical call.

3. When it has been determined that the Controlled Substance has not been
compromised as indicated in Section H-2, inclusive, of this Policy, Controlled Substance may be opened. The medication can then be administered to the patient as ordered or as specified in the standing order. When an Engine Paramedic initiates the administration using the Engine’s Controlled Substance inventory, that medication and the associated Controlled Substance Administration Card may be transferred to the District’s transporting Paramedic.

4. After each use of a Controlled Substance, a Controlled Substance Administration Card must be completed. Restocking of a Controlled Substance cannot occur without a completed Controlled Substance Administration Card.

I. DISCARDING (WASTING) THE UNUSED PORTION OF A CONTROLLED SUBSTANCE

Any remnants of Controlled Substances contained in pre-load that were not administered to a patient must be discarded in the following manner:

1. The Paramedic who initially opens the Controlled Substance remains responsible for the Controlled Substance until any portion that may be remaining is discarded, except when the medication, the associated Controlled Substance Administration Card, and the responsibility have been transferred to the transporting Paramedic. The responsible Paramedic must discard the Controlled Substance in the presence of another San Ramon Valley Fire Protection District crew member.

2. All of the remaining Controlled Substance must be discarded. The unused portion may be discarded in a sink.

3. The names of all personnel involved in the disposal process must be thoroughly documented on the Controlled Substance Administration Card that corresponds with the control number on the package.

4. In the event a second San Ramon Valley Fire Protection District crew member is not available to witness the discarding of any remaining Controlled Substances, a physician or nurse may also act as a witness. As with District employees, the name of the nurse or physician must be documented on the Controlled Substance Administration Card that corresponds with the control number on the package.

Note: Interns are not authorized to sign for or witness the discarding of a Controlled Substance.
J. RESTOCKING CONTROLLED SUBSTANCES

1. Advanced Life Support Units must contact the Emergency Medical Services Coordinator, Emergency Medical Services Quality Improvement Coordinator, or the Shift Duty Battalion Chief whenever restock of a Controlled Substance is necessary. If the Emergency Medical Services Coordinator, Emergency Medical Services Quality Improvement Coordinator, or Shift Duty Battalion Chief is unable to facilitate the restocking of a Controlled Substance container, a partially stocked container may be transferred to an on-coming crew and only as specified in Section G-2 of this document, and under Advanced Life Support Unit Inventory Control.

2. Controlled Substance containers must be restocked immediately under the following circumstances:
   a. The quantity of the Controlled Substances falls below the minimum in-service requirement.
   b. Any of the Controlled Substances are expired, plastic tubes broken, or otherwise unfit for administration, as specified in H-2 of this document.

3. Expired Controlled Substances must be delivered to the District Emergency Medical Services Office for replacement.

4. Advanced Life Support Unit crews taking possession of a partially stocked Controlled Substance container from an off-going crew must contact the Shift Duty Battalion Chief as soon as possible to restock the container.

5. The following steps must be taken to restock a Controlled Substances container:
   a. A completed Controlled Substance Administration Card must account for all used plastic tubes of Controlled Substances.
   b. Contact the Duty Battalion Chief to arrange for restock.
   c. A Paramedic or Captain must present the Controlled Substance Administration Card to the Emergency Medical Services Coordinator, Emergency Medical Services Quality Improvement Coordinator, or Shift Duty Battalion Chief.
   d. Each pre-load of Controlled Substances must be intact and properly packaged in a plastic tube. Control number labels must be affixed to all packages. Plastic tubes can not be repackaged or resealed.
   e. Each plastic tube must have a Controlled Substance Administration Card bearing a control number corresponding to the number on the tube.
   f. Controlled Substances will be issued to replace any used, damaged, or expired...
Controlled Substances. A control number shall be affixed to the plastic tube containing the Controlled Substance and a corresponding Controlled Substance Administration Card shall be issued. The Paramedic or Captain, as well as the Emergency Medical Services Coordinator, Emergency Medical Services Quality Improvement Coordinator, or Shift Duty Battalion Chief, shall then sign the Central Supply Disbursement Log.

g. The distribution of individual plastic tubes of Controlled Substances shall be recorded in the Central Supply Disbursement Log, utilizing the information recorded on the completed Controlled Substance Administration Card. The control number of the completed Controlled Substance Administration Card shall be located on the log and the reason for restock, date used, and response number shall be completed.

h. The Emergency Medical Services Division Office will file completed Controlled Substance Administration Cards.

K. DOCUMENTATION

1. Controlled Substance Logs – Information, Purpose, and Use

Federal law requires that possession of Controlled Substances be tracked from the manufacturer to the patient receiving the medication. Accurate record keeping is essential, as every milligram of a Controlled Substance must be traceable and accounted for. Therefore, the chain of responsibility must be recorded by signature at each step of use and/or transfer of Controlled Substances.

A District employee, by his or her acceptance of the possession of a Controlled Substance, thereby accepts complete responsibility for the security, handling, and use of the Controlled Substance. Discrepancies and/or failure to follow procedures for handling, possession, use or disposal of Controlled Substances, as outlined in this Policy, shall require the immediate notification of the Shift Duty Battalion Chief.

Random audits shall be performed for quality control purposes. All logs and any or all Controlled Substance materials shall be presented to the Shift Duty Battalion Chief, Emergency Medical Services Coordinator, or Emergency Medical Services Quality Improvement Coordinator upon request.

Blank log sheets and forms shall be made available at each District station. Advanced Life Support Unit Controlled Substance Daily Verification Logs shall be forwarded to the Emergency Medical Services Coordinator at the end of the month for review.
2. Patient Care Reports (PCRs) must be complete in order to thoroughly document the use of a Controlled Substance, and should be clear regarding the following:
   a. The patient assessment must justify the administration of a Controlled Substance according to Contra Costa County treatment guidelines.
   b. The base hospital's order must be clearly stated (if applicable).
   c. The amount of Controlled Substance actually administered to the patient and time(s) of administration must be clearly documented.
   d. The patient's vital signs before and after administration of the Controlled Substance must be clearly documented.
   e. The patient's condition and vital signs must be clearly documented upon the patient’s arrival at the receiving facility.
   f. The name, signature and Paramedic license number of the Paramedic administering the Controlled Substance must be documented.

3. The corresponding Controlled Substance Administration Card must contain the following documentation:
   a. The patient's full name.
   b. The date, response number, and unit identification.
   c. The amount, in milligrams, of Controlled Substance administered to the patient.
   d. The amount, in milligrams, of Controlled Substance discarded.
   e. The name, signature and employee ID number of the Paramedic administering the Controlled Substance.
   f. The name, signature and employee ID number of the Paramedic, company officer, RN or MD witnessing the discard (Note: Interns are not authorized to sign for or witness the discard of Controlled Substance).

L. CONTROLLED SUBSTANCE DISCREPANCIES

The strict adherence to the Controlled Substance policy will prevent discrepancies. Any discrepancy involving Controlled Substances shall result in the immediate, mandatory notification of the Shift Duty Battalion Chief. Should a discrepancy occur, it shall be classified as either a Minor Discrepancy or a Serious Discrepancy. These discrepancies are defined as follows:

1. **Minor Discrepancies** are defined as incomplete or omitted documentation on a Patient Care Report, Controlled Substance Administration Card, Advanced Life
Support Unit Controlled Substance Daily Verification Log, or other Controlled Substance written documentation or a witnessed accidental breakage of an containing a Controlled Substance. The Captain shall determine the appropriate action to resolve minor discrepancies. The Captain shall notify, during the shift, the District’s Emergency Medical Services Coordinator or Emergency Medical Services Quality Improvement Coordinator who must report all minor discrepancies to the County EMS Medical Director. All discrepancies shall be noted and tracked by both the District’s Emergency Medical Services Division as well as Contra Costa County Emergency Medical Services.

2. **Serious Discrepancies** are defined as accidental loss of a Controlled Substance, an error in the administration of a Controlled Substance, theft thereof or tampering (open packaging, broken seals, broken locks). In the event of an occurrence of a serious discrepancy, the following procedure shall take place:

   a. The employee(s) discovering any discrepancy shall immediately notify the Station Captain who shall notify the Shift Duty Battalion Chief.

   b. Under no circumstances may any employee responsible for Controlled Substances involved in a discrepancy be released from duty until the Shift Duty Battalion Chief approves such release.

   c. All evidence must be retained for the Shift Duty Battalion Chief’s inspection.

   d. The employee(s) involved must complete a Controlled Substance Discrepancy Report. A copy of the Controlled Substance Discrepancy Report is attached to this Policy as Attachment “E.” On duty and/or off-going personnel must submit all Patient Care Reports and Advanced Life Support Unit Controlled Substance Log(s) for the entire shift prior to the discovery of the discrepancy.

   e. The Shift Duty Battalion Chief shall notify the Emergency Medical Services Coordinator or the Emergency Medical Services Quality Improvement Coordinator as soon as possible.

   f. A complete report of the discrepancy including its resolution must be completed and submitted to the Emergency Medical Services Coordinator or Emergency Medical Services Quality Improvement Coordinator for review.

   g. The Emergency Medical Services Coordinator or Emergency Medical Services Quality Improvement Coordinator will report all serious discrepancies to the Contra Costa County Medical Director. Discrepancies shall be tracked by both the District and Contra Costa County Emergency Medical Services.
M. QUALITY ASSURANCE

The following procedures shall be performed to maintain Quality Assurance for the Controlled Substance Program:

1. All Advanced Life Support Unit Controlled Substance Daily Verification Logs shall be forwarded to the Emergency Medical Services Coordinator at the end of each month. These logs shall be maintained and kept in the Emergency Medical Services Division Office.

2. The Emergency Medical Services Coordinator, Emergency Medical Services Quality Improvement Coordinator or Shift Duty Battalion Chief shall perform random audits of field units, logs, inventory and related materials. Logs shall be signed to indicate an audit has been performed.

3. In cases of serious discrepancies, the Emergency Medical Services Coordinator or Emergency Medical Services Quality Improvement Coordinator shall review all documentation pertaining to discrepancies and notify the Contra Costa County Medical Director and others as appropriate.

4. A Monthly Summary Report shall be submitted to the Contra Costa County Medical Director. The report shall include beginning and ending system inventory counts, monthly use and discrepancy information.
San Ramon Valley Fire Protection District
Controlled Substance Central Supply Inventory Log
Daily and Receipt *

Month ______________  Year __________

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<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>#Morphine</th>
<th>Midazolam</th>
<th>Signatures &amp; Employee ID #</th>
<th>Signatures &amp; Employee ID #</th>
<th>Comments</th>
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* Receipt of Medications for Central Supply.
San Ramon Valley Fire Protection District  Control 
Controlled Substance Administration Card  Label

Date: ______/______/______  ______________________________

Pt. Name

Resp.# ___________________ Administered ___________ mg.

Paramedic Name: (print) ___________________________ Lic.# __________

Paramedic Signature: ____________________________ Emp.# __________

Wasted ______ mg. Witnessed by: (print) ____________________________

Signature: ____________________________________________ Emp.# __________

(Must be a SRVFPD employee)
**ATTACHMENT “C”**

San Ramon Valley Fire Protection District  
Central Supply Disbursement Log

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<th>Medication Control Label</th>
<th>Unit #</th>
<th>Date Issued</th>
<th><strong>Distributed By Signature &amp; Employee #</strong></th>
<th>Received By Signature &amp; Employee #</th>
<th>Reson For Restock (Used, Expired, Broken, Etc.)</th>
<th>Date Used</th>
<th>Response # and Comments</th>
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**Needs two signatures if the medication is being transported from the Central Supply to the ALS unit or station.**
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<th>Date</th>
<th>Time</th>
<th>DrugBox Seal #</th>
<th>Lock Box Seal #</th>
<th>#Morphine</th>
<th>#Midazolam</th>
<th>Signature</th>
<th>Signature</th>
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## ATTACHMENT “E”

San Ramon Valley Fire Protection District  
Controlled Substance Discrepancy Report

### Date: ____________________________

#### Paramedic(s) Name(s): ____________________________

#### Captain Name: ____________________________

**Controlled Substance Involved:** Morphine [ ]  Midazolam [ ]

### Procedure:
- Retain evidence for Shift Duty Battalion Chief inspection [ ]
- Notify the Captain [ ]
- Notify the Shift Duty Battalion Chief [ ]

### Type of Discrepancy:

#### Minor:
- Incomplete or omitted documentation [ ]
- Witnessed accidental breakage [ ]
  (Both parties witnessing the accidental breakage sign the Controlled Substance Administration Card)
- Broken Controlled Substance [ ]
- Missing Daily Verification Log [ ]
- Missing Controlled Substance Admin. Log [ ]
- Other [ ]

#### Serious:
- Loss of a Controlled Substance [ ]  Medication error [ ]
- Theft of a Controlled Substance [ ]  Open packaging [ ]
- Broken Lock [ ]  Other [ ]

### Narration of event:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Signature

#### Shift Duty Battalion Chief’s resolution:

________________________________________________________________________

________________________________________________________________________

Signature

Submit to SRVFPD EMS office.