PROTOCOL 5-34
SOUTHEAST MICHIGAN MEDICATION EXCHANGE AND REPLACEMENT PROCEDURE

This advisory will provide clarification regarding the wasting of narcotics and obtaining a witness signature.

It has come to our attention that some of the Hospitals have developed policies that restrict their staff, RN’s and Physicians from signing the witness line on the SEM MED BOX/A-PACK SUPPLY USE/REPLACEMENT FORM. In the event that you encounter difficulty obtaining a witness signature, please be aware that, per protocol, your ALS partner may sign the witness line (see protocol below).

Per Protocol 5-34:

In the event that controlled substances are prepared for use and not used or the entire contents of a container are not used, the remaining medication will be appropriately wasted by ALS crew member in the presence of licensed hospital personnel/or other ALS crew member. Documentation of waste must be completed before the physician signs the Documentation of Use Form. The following will be recorded on the Documentation of Use Form:

1. The name and amount of the medication wasted.
2. The initials of the ALS crew member and hospital personnel or other ALS crew member witnessing the waste.

As always, if you have any questions or concerns please feel free to contact the OCMCA.