




PRINCE GEORGE'S COUNTY, MARYLAND FIRE/EMERGENCY MEDICAL SERVICES DEPARTMENT GENERAL ORDER

General Order Number: 05-18	Effective Date: January 22, 2025
Division: Emergency Medical	
Chapter: Advanced Life Support (ALS) Controlled Substances	
By Order of the County Fire Chief: Tiffany D. Green 	Issue Date: January 22, 2025

POLICY

This General Order establishes procedures, as mandated by the *Comprehensive Drug Abuse Prevention and Control Act of 1970* (otherwise known as the *Controlled Substances Act*), to maintain the security of controlled substances. Officers at Fire/Emergency Medical Services (EMS) Department units, including Logistics, with custody of controlled substances, must adhere to this General Order.

DEFINITIONS

Advanced Life Support (ALS) Clinician – The person accepting, maintaining, or transferring custody of narcotics as documented within the Operative IQ tracking system.

Audit – The process to verify the identity and quantity of narcotics/controlled substances under the custody of an ALS clinician.

Biometric Verification – Use of biologic or physiologic characteristics of an individual (e.g. fingerprint, facial recognition, etc.) as a way of verifying a person's identity.

Controlled Substance – A drug or chemical substance whose possession and use are regulated under the Controlled Substances Act.

Control Number – A unique identifying number assigned to a vial of medication for the purposes of tracking.

DEA – United States Drug Enforcement Administration.

Dual Verification – Level of security within the narcotics tracking system that requires two (2) ALS clinicians to enter a Password/PIN or do biometric verification when one clinician transfers custody of controlled substances to another clinician.

Duty Chief – Career Assistant Fire Chief on-duty as the shift commander for the Department.

EMS Duty Officer – Emergency Medical Services supervisor.

EMS Logistics Coordinator – Fire/EMS Department employee(s) responsible for EMS assets, equipment, and medications.

ePCR – Electronic Patient Care Report used by the Department to document patient care.



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Jurisdictional Medical Director – Physician contracted by the County pursuant to the requirements of COMAR Title 30 Emergency Medical Services Operational Program and the *Controlled Substances Act*. The Jurisdictional Medical Director provides the prescription and receives the DEA authorization for the Department to purchase and use controlled substances.

MedVault – A PIN-coded access safe for the storage of narcotics on selected ALS-providing units.

MedVault Personal Identification Number (PIN) – Unique, five-digit number used specifically for accessing the MedVault storage safe that an ALS clinician must keep secure and confidential.

Narcotic – A controlled substance managed as described within this General Order.

Narcotic Box – A sealable storage unit that can contain multiple vials of narcotics assigned to a specific ALS clinician or an EMS Duty Officer's supply of narcotics, to be used to restock ALS units.

Narcotics Safe – Secured storage unit containing controlled substances or Narcotic Boxes that are not in the custody of an ALS clinician. These storage units are secured in specific locations such as the EMS Logistics Safe, Special Events Unit, or surge locker. This term does not include a MedVault safe. (Reference *General Order 05-30, APEX EMS Supply Vending Machine and Surge Gear Locker*).

Operative IQ – Software application that provides for electronic tracking of all narcotics.

Operative IQ Personal Identification Number (PIN) – Unique, four (4) digit number used to access the electronic tracking of all narcotics (in lieu of the biometric scanner), to be kept secure and confidential by the ALS clinician.

Pick Up – A function of the narcotics tracking system that will allow an ALS clinician to virtually obtain custody of a controlled substance physically maintained within a narcotics safe. This function can also be utilized by an EMS Duty Officer or ALS Battalion Chief to virtually retrieve a narcotic box assigned to an ALS clinician within the tracking system without entering dual verification.

Schedule – Five (5) categories, or schedules, of controlled substances as defined by the United States Drug Enforcement Administration (DEA) based on their potential for abuse, accepted medical use, and accepted safety under medical supervision.

Schedule II – Drugs available only by prescription. Distribution is carefully controlled and monitored by the DEA.

- The drug or other substance has a high potential for abuse.
- The drug or other substance has a currently accepted medical use in treatment in the United States or a currently accepted medical use with severe restrictions.



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- Abuse of the drug or other substances may lead to severe psychological or physical dependence.

Schedule III – Drugs available only by prescription. Distribution is carefully controlled and monitored by the DEA.

- The drug or other substance has a potential for abuse but is less than drugs or substances in schedules I and II.
- The drug or other substance has a currently accepted medical use in treatment in the United States.

Schedule IV – Drugs available only by prescription, and control of wholesale distribution by the DEA is less stringent than Schedule II drugs.

- The drug or other substance has a potential for abuse less than the drugs or other substances in schedules I, II, and III.
- The drug or other substance has a currently accepted medical use in treatment in the United States.
- Abuse of the drug or other substance may lead to moderate or low physical dependence or high psychological dependence.

Seal Tag – A physical, numeric tag applied to a narcotic box that creates a tamper-proof seal. A seal tag number is documented within Operative IQ.

Special Events Unit Coordinator – A designated employee(s) authorized to remove and return controlled substances from the Special Events Narcotics Safe or “SEU.”

Stock Supply – Supply of narcotics that is secured at EMS Logistics, which includes newly acquired narcotics from distributors.

Stock Supply Access – Personnel having access to the stock supply of narcotics are ALS Personnel (Career or Civilian), assigned to EMS Logistics and Fire Logistics, the EMS Captain, or the Battalion Chief.

Suitable Witness – A third party authorized to sign for the waste of the left-over medication post-use on a patient on behalf of a receiving facility such as a registered nurse, physician’s assistant, nurse practitioner, or physician. If a suitable witness is not available or a patient was not transported, an on-duty EMS Duty Officer may act as a suitable witness.

Verification – A secure method where the ALS clinician verifies activity in the Operative IQ system by the user password and PIN or biometric scan.



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PROCEDURES / RESPONSIBILITIES

I. General Provisions

- A. The DEA within the U.S. Department of Justice enforces the *Controlled Substances Act* that requires "all persons who manufacture, distribute or dispense any controlled drug provide effective controls and procedures to guard against theft and diversion of controlled substances." The Act further requires that "all persons who manufacture, distribute or dispense any controlled drug keep inventories and maintain complete and accurate records of all drugs manufactured, dispensed, obtained, or disposed of." The Fire/EMS Department and all its affiliated EMS clinicians must adhere to the Act's requirements.
- B. This General Order delineates the complete physical and virtual processes for tracking controlled substances, including the Department's receipt of controlled substances to an ALS clinician's administration, waste, or disposal of a substance. Reference Attachment #1 (Narcotics Workflow). To use the Operative IQ system, reference Attachment #3 (Narcotics Tracking User Guide).
- C. This General Order applies to all medications within a schedule. By means of the Maryland Medical Protocols for Emergency Medical Services, The Maryland Institute for Emergency Medical Services Systems (MIEMSS) allows the use of the schedules of drugs described within this General Order.
 - 1. Controlled substances must be handled in a prescribed method to reduce the potential for medication dosage errors and tampering. Controlled substances carried on Prince George's County Fire/EMS Department units will be in a concentration as determined by the Jurisdictional Medical Director and supplied **ONLY** by the Department. Under no circumstances may an ALS clinician accept a controlled substance from any other source, absent permission from the Fire Chief or the Fire Chief's designee.
- D. All drug packaging must include a tamper-evident seal showing whether a drug has been accessed. If a seal is broken or missing, the drug should not be used in patient care. The ALS clinician must report to a supervisor and document such an incident as described within this General Order.
- E. Controlled substances that are not in a narcotics safe will be assigned to an ALS clinician at ALL times, to be stored and transferred, both physically and virtually, as described within this General Order.

II. Narcotic Storage

- A. EMS Logistics
 - 1. The Department's stock supply of controlled substances must be stored in accordance with applicable state and federal laws and regulations.



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2. EMS Logistics issues a MedVault access PIN# to all ALS clinicians having County ALS Authorization as approved by the Jurisdictional Medical Director.

B. ALS Equipped Units

1. A supply of controlled substances for patient administration must be stored in accordance with applicable state and federal laws and regulations in a narcotic box with a quantity described in Attachment #2 (Narcotics Supply Quantities).
2. A narcotic box must be stored, sealed, and located within an ALS StatPak when not in use.
3. An ALS clinician must ensure that a narcotic box is sealed when receiving physical custody of a box. The receiving ALS clinician must ensure custody and seal numbers are entered and correct within Operative IQ.
4. An ALS clinician on an ALS unit having a MedVault safe must seal and store any assigned narcotics box in the safe. In the event an ALS unit does not have a MedVault or the MedVault malfunctions, the ALS clinician shall secure the narcotics in the ALS StatPak.

C. EMS Duty Officer(s)

1. An EMS Duty Officer must maintain a supply of controlled substances for patient administration within a narcotic box with the quantity outlined in Attachment #2 (Narcotics Supply Quantities).
2. An EMS Duty Officer must store a supply narcotic box in an ALS StatPak.
3. An EMS Duty Officer must store a supply narcotic box within a MedVault (if equipped) or in a lockable compartment with specific minimum and maximum quantities as outlined in Attachment #2 (Narcotics Supply Quantities).

D. Special Events Unit

1. A supply of controlled substances for patient administration must be stored in a narcotic box with a quantity as outlined in Attachment #2 (Narcotics Supply Quantities).
2. The Special Events Unit Coordinator must physically store narcotic boxes in a lockable cabinet and virtually identified as the "SEU Safe" in Operative IQ.
3. When narcotics are required for an event, the ALS clinician shall physically obtain the narcotics in a sealed box from the KNOX box located within the vending machine with the rest of their equipment. The clinician shall then virtually obtain the narcotics in Operative IQ. When the event has concluded, the clinician shall return the sealed narcotics box back to the KNOX box in the vending machine and virtually return the narcotics in Operative IQ.

E. Surge Equipment

1. The ALS clinicians are provided with a supply of controlled substances for patient administration within a narcotic box.
2. Supplemental narcotic boxes are stored in a MedVault in the lockable surge locker.



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3. An ALS clinician who accesses surge equipment from a surge locker must be the same clinician who accesses the MedVault within the locker to obtain physical and virtual custody of the controlled substances to ensure accountability and confidentiality of PINs.

III. Acquisition of Controlled Substances

- A. The EMS Logistics Coordinator orders narcotics from the County's designated vendor utilizing the Jurisdictional Medical Director's DEA authorization number.
- B. When receiving controlled substances, the EMS Logistics coordinator must:
 1. Add the controlled substance to the Operative IQ database providing the National Drug Code (NDC) number, LOT number, and expiration date of each vial.
 2. Generate a control number to identify the specific vial in Operative IQ.
 3. Print labels for each medication vial.
 4. Affix labels to each individual vial to prevent tampering with the vial.
 5. Store the vials as described within this General Order.

IV. Custody of Controlled Substances

- A. ALS clinicians must ensure that controlled substances are maintained as follows:
 1. Controlled substances, each with a control number, are sealed in a narcotic box.
 2. An ALS clinician assigned to a unit has physical and virtual custody of all controlled substances in a narcotic box on the unit.
 3. When ALS clinicians engage in controlled substance transfers:
 - a) The ALS clinician with custody must log into Operative IQ.
 - b) The ALS clinician with custody must select all controlled substances/narcotic boxes being transferred and enter the name of the ALS clinician receiving custody of the controlled substances.
 - c) The ALS clinician receiving custody must verify the appropriate label numbers on controlled substance vials and the seal number on the narcotic box.
 - d) Both ALS clinicians must engage in a dual verification process (transfer and receipt).
 - e) If a unit is dispatched on an incident prior to completing a proper transfer, the clinician with virtual custody in Operative IQ must respond on the incident.
 - f) Once custody is transferred, the clinician accepting custody must secure the controlled substances until a subsequent transfer (see II.B.4).
 - g) Transfers of controlled substances occurring during an incident may not delay patient care or transport and must occur after the completion of an incident response.
 4. If an ALS clinician with custody must leave work unexpectedly, the clinician may transfer custody to another ALS clinician, including an ALS Officer, or in emergent situations, an EMS Duty Officer. Transfers under this section must occur before the ALS clinician leaves the station or assigned work location.



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- B. If an ALS clinician is unable to transfer a narcotic box due to extenuating circumstances, the ALS clinician must ensure the box is sealed and secured in the KNOX med vault Mini on the unit. When an ALS clinician is assigned to return to place the unit in service, an EMS Duty Officer or ALS Battalion Chief must document custody using the “Pick Up” function in Operative IQ to transfer the narcotics from the clinician that previously had custody to the ALS clinician assuming custody of the box.
- C. Custody of Controlled Substances Assigned to Special Events:
 - 1. The Special Events Unit Coordinator may issue a sealed narcotic box from the Special Events (SEU) Narcotics Safe to an ALS clinician staffing a Special Events Unit. This transaction requires virtual dual verification.
 - 2. An ALS clinician staffing a Special Events Unit must replace any controlled substance as described in Section IV of this General Order prior to returning it to the Special Events Unit Coordinator.
 - 3. The ALS clinician may transfer custody to another ALS clinician as described in Section IV. A of this General Order when the Special Events Unit is in service.
 - 4. During demobilization of the Special Events ALS Unit, the ALS clinician in custody must return the sealed narcotic box to the Special Events Unit Coordinator.
 - 5. The Special Events Unit Coordinator will receive the narcotic box and transfer the box into the Special Events Narcotics Safe. The Coordinator and ALS clinician will engage in dual verification of the transfer.
- D. Custody of Controlled Substances in ALS Surge Lockers:
 - 1. An ALS clinician authorized to check out ALS surge equipment must follow the Department’s policies and procedures for accessing a surge locker.
 - 2. An ALS clinician checking out equipment must verify within Operative IQ the controlled substances, narcotic box, and seal number in the MedVault.
 - 3. The ALS clinician will virtually assume custody of the narcotic box by using the “Pick Up” function from the Narcotic Safe in Operative IQ.
 - 4. An ALS clinician staffing a Surge Unit must replace any controlled substance as described in Section IV of this General Order prior to returning the box to a surge locker.
 - 5. The ALS clinician may transfer custody to another ALS clinician as described in Section IV.A of this General Order when the Surge Unit is in service.
 - 6. During demobilization of the Surge Unit, the ALS clinician with virtual custody of the box must utilize the “Return” function in Operative IQ to return the sealed narcotic box to the Narcotics Safe and physically secure the box in the appropriate MedVault.

V. Audit of Controlled Substances

- A. An ALS clinician or EMS Duty Officer with custody of a narcotics box must audit the box:



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1. Every Tuesday by 1000 hours. The ALS clinician must immediately inform the EMS Duty Officer assigned to the unit of any physical box or vial issues or virtual discrepancies.
 2. Before a box is opened, if an ALS clinician observes an issue with the box or a vial, the ALS clinician must not open the box and notify the officer in charge. After notifying the Officer in Charge, the ALS clinician must also notify the EMS Duty Officer.
 - a) The Officer in Charge should immediately place the unit out of service until the situation is resolved.
- B. An EMS Duty Officer must audit a narcotics box each time the Officer restocks the box.
1. The EMS Duty Officer and ALS clinician must verify the information in Operative IQ is accurate, including the vial numbers and quantity contained in the box.
 2. If the EMS Duty Officer observes a discrepancy, the Officer must immediately identify the issue and correct the information.
 3. The EMS Duty Officer must also place the unit out of service until the discrepancy is identified and corrected.
 4. When an EMS Duty Officer transfers a new controlled substance(s) to a narcotics box, the EMS Duty Officer and the ALS clinician must verify the control number for the vial going into the box is correct.
 5. The EMS Duty Officer must observe the ALS clinician seal the box.
- C. Audits/Physical Inspections of Narcotics Boxes:
1. The EMS Duty Officer shall conduct weekly audits of their assigned narcotics boxes. This may include a physical assessment of the narcotics and the integrity of the box.
 2. Each audit shall be documented in the EMS Duty Officer logbook and must include the following:
 - a) Date of the audit
 - b) Unit number
 - c) Whether any abnormalities were discovered during the audit.
 - d) If any, document all corrective actions.
- D. EMS Logistics Office:
1. The office staff shall consent to a urinalysis at least quarterly.
 2. Any clinician or civilian employee who is assigned to the warehouse and has access to the EMS Logistics area, may be subject to a quarterly urinalysis.

VI. Distribution of Controlled Substances

- A. The EMS Logistics Coordinator may exchange supplies from the Narcotics Safe (Supply Safe) on a one-for-one basis to an EMS Duty Officer, or the Special Events Coordinator. The EMS Logistics Coordinator and clinician receiving the supply must dually verify the exchange.



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- B. An EMS Duty Officer may exchange supply from the Officer's narcotic supply box on a one-for-one basis to an ALS clinician with custody of a narcotic box. The Officer and receiving clinician must dually verify the exchange.
- C. Exchanges occur as follows:
1. Patient Administration and/or Patient Administration with Waste. A one-for-one exchange may occur upon presentation of appropriate administration and waste documentation, and no vial is required.
 - a) Vending Machine (when available)
 - (1) An ALS clinician must complete appropriate documentation of the administration and waste in the narcotics tracking system and ensure a witness signature/name is captured in the ePCR if required. Medication that is unsealed or drawn up in the performance of patient care but not administered must be documented as a patient administration with the administration amount as zero and a suitable witness must verify the full amount as the waste.
 - (2) With the entry of the associated incident number, the ALS clinician may request one vial at a time from the vending machine to replenish supply.
 - (3) The ALS clinician will use the "Pick Up" within Operative IQ to document the control number dispensed by the vending machine and document loading it into the assigned narcotic box.
 - (4) The ALS clinician will seal the unit's narcotic box and enter the seal number within Operative IQ.
 - (5) The vending machine immediately notifies EMS Duty Officers, EMS Logistics Coordinator, and other personnel as needed of the distribution of a controlled substance.
 - (6) The EMS Duty Officer must immediately review the narcotics tracking system to verify appropriate patient administration documentation and review the ePCR as needed to verify the suitable witness documentation.
 - b) EMS Duty Officer
 - (1) When an ALS clinician administers a narcotic to a patient, the EMS Duty Officer must verify proper documentation within Operative IQ by using the "Administer Form." The Officer must also ensure the ePCR contains the required documentation, including relevant signatures, when an ALS clinician wastes medication. An ALS clinician who unseals and/or draws up but does not administer medication in the performance of patient care must document the event as a patient administration in the ePCR. The administration amount must be entered as zero, and the full amount of the waste should be entered and verified by a suitable witness in the Signatures section using the tab entitled "Controlled Substance Use/Waste/Restock Record." The ALS clinician must document the replacement medication within the narcotics tracking system by using the "Administer Form" function and completing all required fields.



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- (2) The ALS clinician and member providing the new supply must dually verify that the appropriate control numbers are physically loaded into the narcotic box from either the narcotics safe or the EMS Duty Officer supply narcotic box, that the unit's narcotic box is sealed, and that accurate information appears in Operative IQ.
2. In the event that narcotics are lost or stolen:
 - a) The ALS clinician will contact the station officer to immediately place the unit out of service. All personnel involved must remain on-duty and on-scene unless a supervisor directs otherwise.
 - b) The ALS clinician must also notify the EMS Duty Officer who will notify the Duty Chief.
 - c) The EMS Duty Officer must consult Operative IQ and TeleStaff to identify persons having access to or custody of the controlled substances to submit to an immediate "with cause" urinalysis and transport the clinician to the collection site.
 - d) The EMS Duty Officer must file a police report and document the case or incident number generated by the police officer or personnel.
 - e) The EMS Duty Officer must commence a thorough investigation, including identifying any evidence needed and obtaining written statements by necessary personnel.
 - f) The ALS clinician must submit to the EMS Duty Officer a Loss/Damage Report in accordance with *General Order 08-05, Vehicle Accident and Loss Damage Reporting*. The EMS Duty Officer will then forward the report to the EMS Logistics Coordinator.
 - g) The EMS Duty Officer will prepare and submit an inter-departmental memo summarizing the issues and preliminary findings to the EMS Commander.
 - h) The ALS clinician must complete an incident report for the vial(s) or box at issue within the narcotics tracking system.
 - i) The Duty Chief will determine the ALS clinician(s)' duty status.
 - j) The EMS Duty Officer replaces the missing vial(s) to return the unit to service upon verification the incident form is complete.
 - k) The appropriate control numbers are loaded into the unit's narcotic box from the EMS Duty Officer supply narcotic box.
 - l) The unit's narcotic box is sealed.
 - m) This transaction requires dual verification.
3. In the event that narcotics or the storage of narcotics (i.e. a vial or narcotics box) is damaged, compromised, or has a documentation-related or other discrepancy (i.e. a missing cap on a vial or a broken narcotics box):
 - a) The ALS clinician will immediately notify the officer in charge to place the unit out of service. All personnel involved must remain on duty.
 - b) The ALS clinician must notify the EMS Duty Officer who will notify the Duty Chief.



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- c) The EMS Duty Officer will consult Operative IQ and TeleStaff to identify personnel having access to or custody of the narcotic or narcotic box at issue to submit to an immediate “with cause” urinalysis.
 - d) The EMS Duty Officer must file a police report and document any case or incident number issued by a police officer or personnel.
 - e) The EMS Duty Officer must initiate a thorough investigation, including identifying any evidence needed and obtaining written statements by necessary personnel.
 - f) The EMS Duty Officer must submit a Loss/Damage report to the EMS Logistics Coordinator.
 - g) The EMS Duty Officer must prepare and submit an inter-departmental memo summarizing issues and preliminary findings to the EMS Commander.
 - h) The ALS clinician must complete an incident report for the vial(s) or box at issue in the narcotics tracking system.
 - i) The Duty Chief must determine the ALS clinician(s)’ duty status.
 - j) The ALS clinician will transfer physical and virtual custody of the damaged or compromised vial(s) or box to the EMS Duty Officer. The EMS Duty Officer will transfer the vial(s) or box to the EMS Logistics Coordinator for physical and virtual disposal.
 - k) The EMS Duty Officer must replace the vial(s) or box before the unit is returned to service.
 - l) The EMS Duty Officer and ALS clinician will ensure the narcotic box is restocked using the procedures outlined within this General Order.
4. Expired Substance
- a) When an ALS clinician finds an expired narcotic, the clinician will transfer custody of the vial(s) to the EMS Duty Officer. The EMS Duty Officer will transfer the vial(s) to the EMS Logistics Coordinator for disposal.
 - b) The EMS Duty officer must replace the vial(s) to return the unit to service.
 - c) The EMS Duty Officer and ALS clinician will dually verify that the appropriate control numbers are loaded into the unit’s narcotic box from the EMS Duty Officer supply narcotic box.

VII. Documentation of Use/Waste

- A. An ALS clinician must draw up only the amount of a narcotic as needed for patient care
Usage of a narcotic must be documented as follows:
- 1. The ALS clinician must list the medication administration in the ePCR data capture field.
 - 2. The ALS clinician must include within the ePCR the date, time, amount, and clinician that administered the medication.
 - 3. The ALS clinician must list the vial label number in the Comments section of the field in the ePCR.
 - 4. The ALS clinician must also document the medication administration within Operative IQ.



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- B. Once at the receiving facility, or in the event that the clinician administering the medication does not transport the patient to the hospital, the ALS clinician must waste the narcotics as follows:
1. The ALS clinician must complete a Controlled Substance Use/Waste/Restock Record in the ePCR system that contains:
 - a) The medication and vial label number;
 - b) The amount administered;
 - c) The amount wasted;
 - d) The ALS clinician's signature and ID Number; and
 - e) A Suitable Witness' Signature.
 2. The ALS clinician must also document the suitable witness' printed name and title in the narrative section of the ePCR.

VIII. Disposal

- A. After ensuring proper documentation of administration and/or waste in Operative IQ and the ePCR, an ALS clinician may dispose of narcotics vial(s) used during patient care by placing them in an approved sharps container.
- B. The EMS Logistics Coordinator will dispose of vial(s) no longer suitable for patient care administration by:
1. Shipping for disposal in accordance with DEA requirements; and
 2. Listing vial(s) as "destroyed" within the narcotics tracking system.

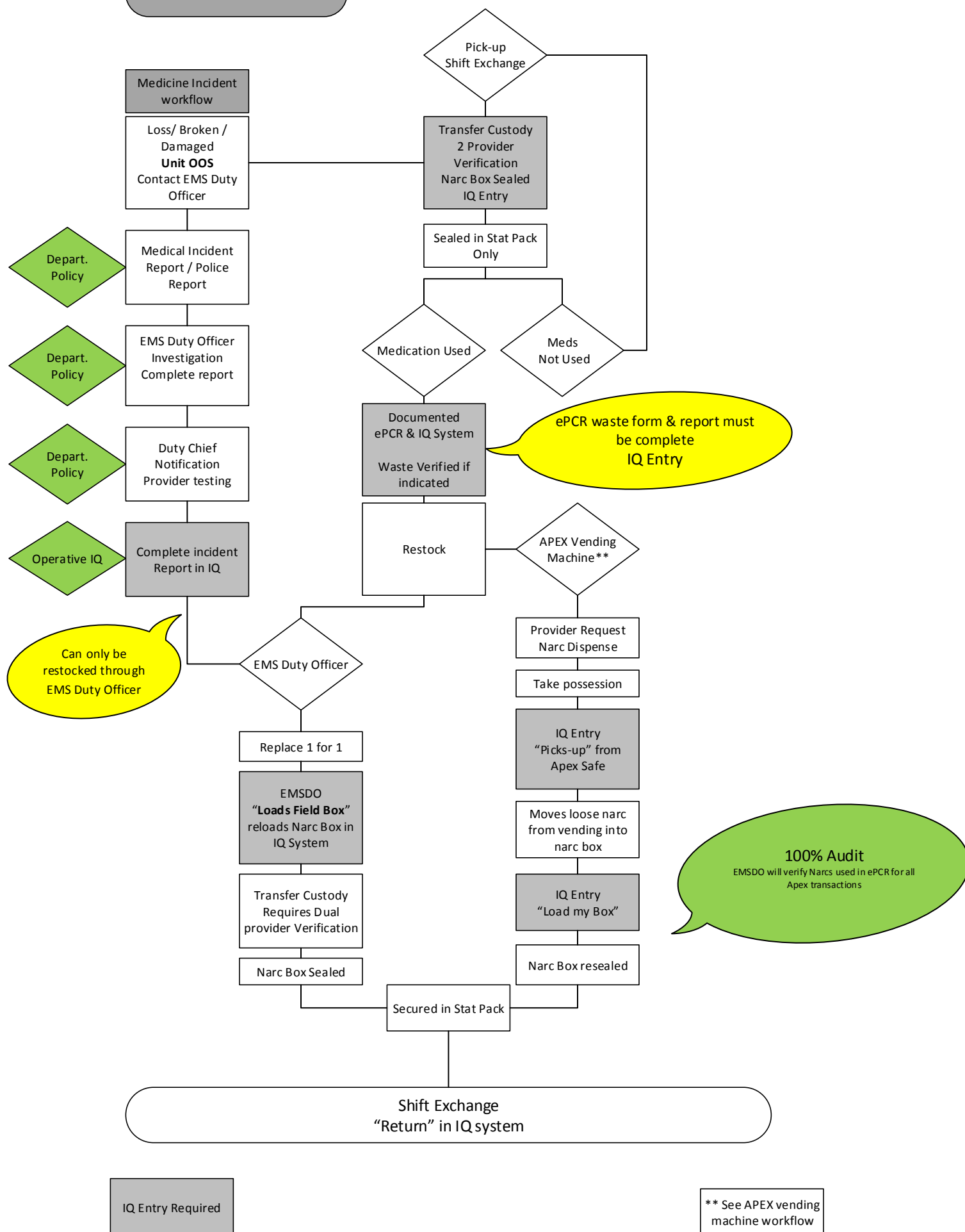
REFERENCES

Comprehensive Drug Abuse Prevention and Control Act of 1970, 21 U.S.C. §101 *et seq.*
COMAR Title 30, Emergency Medical Services Operational Program, 30.03.01.01 *et seq.*
General Order 05-30, APEX EMS Supply Vending Machine and Surge Gear Locker
General Order 08-05, Vehicle Accident and Loss Damage Reporting

ATTACHMENTS

Attachment #1 – Narcotics Workflow
Attachment #2 – Narcotics Supply Quantities
Attachment #3 – Narcotics Tracking User Guide

Crew Usage Workflow



**PRINCE GEORGE'S COUNTY FIRE/EMS
DEPARTMENT GENERAL ORDER 05-18
ADVANCED LIFE SUPPORT CONTROLLED SUBSTANCES
NARCOTICS SUPPLY QUANTITIES**

- **ALS Units (MD, PA, PE) Box**
 - **Fentanyl**, 100mcg/2mL (50mcg/mL) – **4** Vials
 - **Ketamine**, 200mg/20mL (10mg/mL) – **2** Vial
 - **Ketamine**, 500mg/5ml (100mg/mL) – **2** Vials
 - **Midazolam**, 5mg/1mL (1mL) – **4** Vials

- **Special Events Units (SEU) and EMSDO Patient Care Box**
 - **Fentanyl**, 100mcg/2mL (50mcg/mL) – **4** Vials
 - **Ketamine**, 200mg/20mL (10mg/mL) – **2** Vials
 - **Ketamine**, 500mg/5ml (100mg/mL) – **2** Vials
 - **Midazolam**, 5mg/1mL (1mL) – **4** Vials

- **EMSDO Supply Box***
 - **Fentanyl**, 100mcg/2mL (50mcg/mL) – **6** Vials
 - **Ketamine**, 200mg/20mL (10mg/mL) – **6** Vials
 - **Ketamine**, 500mg/5ml (100mg/mL) – **6** Vials
 - **Midazolam**, 5mg/1mL (1mL) – **8** Vials

***EMSDO Supply Box quantities may be adjusted based on usage.**

Narcotics Tracking User Guide



[Knowledge Center](#) [Status Board](#) [Contact US](#) [Join a Meeting](#)

Operative IQ Client Login

TRADITIONAL LOGIN

BIOMETRIC LOGIN

pgfd

User Name

Password

Login

☐ Remember Me [Forgot Password](#)

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Definitions

Administer – Function within the narcotics tracking system to document the administration and waste of the narcotic.

Audit – Audit of the control number is a Narcotics Safe and/or Narcotic Box to verify control numbers and/or reseal the Narcotics Box.

Control Number – Unique number assigned by the narcotics tracking system to a vial of medication.

Crew Member – User in the narcotics tracking system.

Incident Report – Report within the narcotics tracking system to document an incident occurring with a medication.

Load Box – Function within the narcotics tracking systems that allows a supervisor to add control numbers (medication) to a narcotics box.

Narcotics Box – An identifiable box within the system that bundles control numbers (medication) into a sealable container to be issued to crewmembers.

Narcotics Safe – A location for a medication when not in the custody of a crewmember. Prince George's County will have three (3) safe locations; Narcotics Supply, Special Events, and APEX (Vending/Surge).

Return – A function used to describe returning a narcotic or a narcotic box to a narcotic safe.

Pick Up – A function in the narcotics tracking system to pick up a narcotic or narcotics box from a crewmember or from a narcotics safe.

Transfer – A function to transfer a narcotic or a narcotics box from one crewmember to another.

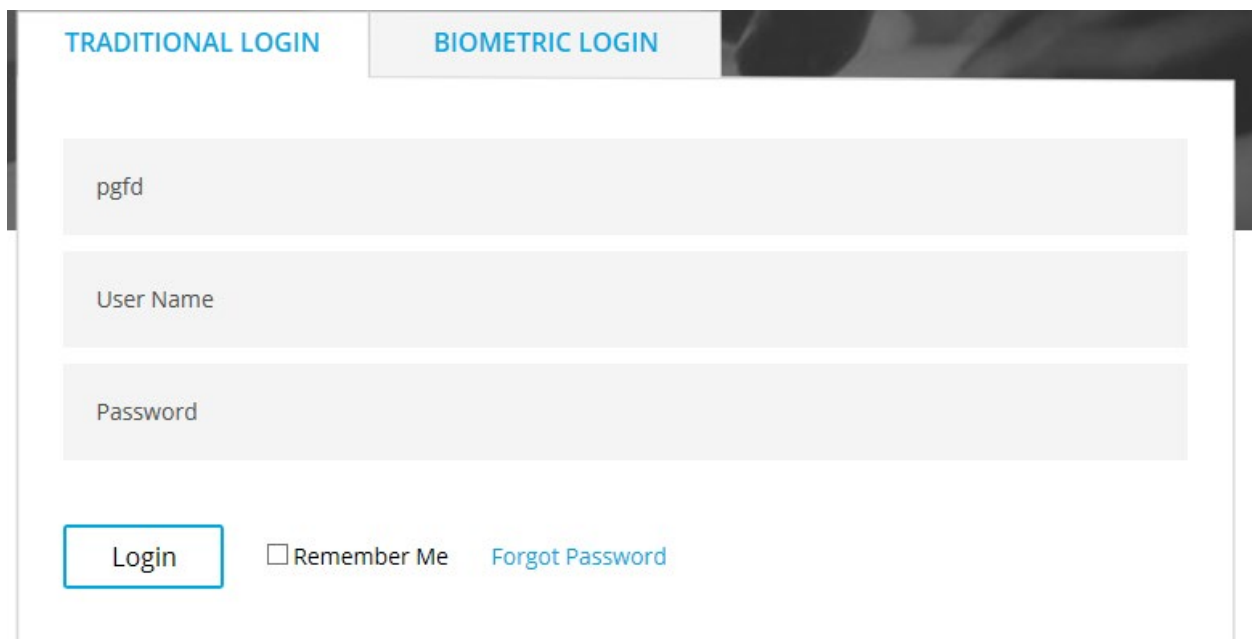
Login to the system

Web address – <https://pgfd.operativeiq.com>

Recommended Browser – Google Chrome or Firefox

Login with User Name – (**Five** Digit County Fire/EMS Department ID Number) ie.00123

Password – Capital first Initial, Last name beginning with a capital letter. (i.e., JDoe)



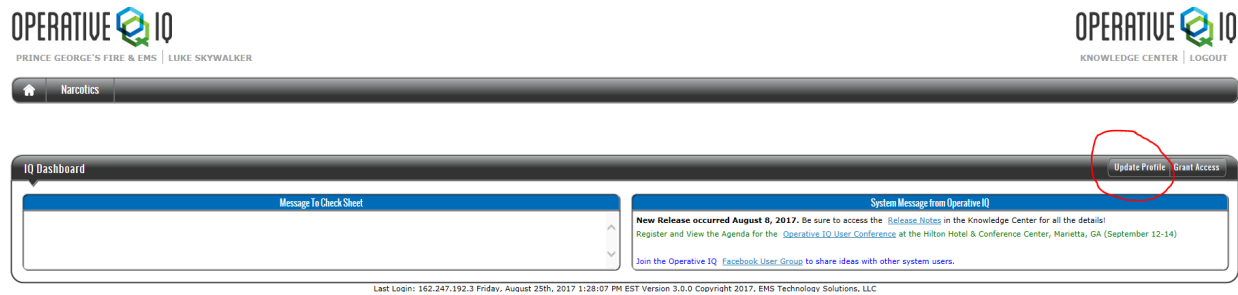
The screenshot displays a login interface with two tabs: "TRADITIONAL LOGIN" and "BIOMETRIC LOGIN". The "TRADITIONAL LOGIN" tab is active. Below the tabs are three input fields: the first contains "pgfd", the second is labeled "User Name", and the third is labeled "Password". At the bottom, there is a "Login" button, a checkbox labeled "Remember Me", and a link labeled "Forgot Password".

*** Note – Upon completing your first transaction, Finger Print will be logged into your profile.

BIOMETRIC Log in once a fingerprint is on file and if there is a finger print scanner on the computer you are using.

First Login to the System

Select Update Profile



Add a secure four (4) digit PIN number. The user will choose their own PIN number.

Delete and type in a NEW password to change your password.

Verify email address and phone number on file is valid, update as needed.

Select **Submit**

The screenshot shows the 'Profile Edit' form. At the top, there is a close button (X) and the title 'Profile Edit'. In the top right corner, there are two buttons: 'Submit' and 'Cancel'. The 'Submit' button is circled in red. The form is divided into three sections: 'Profile Info', 'Biometric Finger Print', and 'Role Security'. The 'Profile Info' section contains fields for First Name, Last Name, Email Address, Phone Number, Login, Password, and Pin. The 'Biometric Finger Print' section contains a field for Biometric Finger Print. The 'Role Security' section contains a field for Role. The 'Pin' field is highlighted in yellow.

Profile Info	
First Name:	John
Last Name:	Doe
Email Address:	
Phone Number:	
Login:	pgtest3
Password:
Pin:	

Biometric Finger Print	
Biometric Finger Print:	Not Available

Role Security	
Role:	User

HELP

User assistance is available through the “Knowledge Center.”

The Knowledge Center will provide videos, instructions, and overview to the Narcotics Tracking.

Operative IQ is an Inventory, Asset Tracking, and Unit Check sheet program, and the Prince George's County Fire/EMS Department is only utilizing the Narcotics Tracking Function of the Program.



My Control Numbers

Control Number Search

My Control Numbers is designed for use by field personnel.

This will display any control numbers assigned to the user.

Go to Narcotics > My Control Numbers.



In this section, the Crew Member can manage the Narcotic Control Numbers they have been issued or have custody of. From this page, the Crew Member can Administer, Transfer, Pick Up, Return, Create an Incident Report and Audit.

The screenshot shows the 'My Control Numbers' page. At the top, there is a header bar with the title 'My Control Numbers' and a row of action buttons: Administer, Transfer, Incident Report, Pick Up, Return, Load Box, and Audit. The 'Administer' button is circled in red. Below the header, there is a section for the 'Crew Member' with the name 'Drummond Jason'. Below that is a search bar. The main part of the page is a table with the following columns: Control #, Description, Part #, Expiration Date, Lot #, and BoxId. The table contains three rows of data, all for 'Fentanyl 13 mg/ml (3 ml Vial)' with Part # 10250 and Expiration Date 12/31/2015. The first row has Control # f24, Lot # 0041, and BoxId nb1. The second row has Control # f25, Lot # 0041, and BoxId nb1. The third row has Control # f26, Lot # 0041, and BoxId nb1. Each row has a checkbox in the first column.

	Control #	Description	Part #	Expiration Date	Lot #	BoxId
<input type="checkbox"/>	f24	Fentanyl 13 mg/ml (3 ml Vial)	10250	12/31/2015	0041	nb1
<input type="checkbox"/>	f25	Fentanyl 13 mg/ml (3 ml Vial)	10250	12/31/2015	0041	nb1
<input type="checkbox"/>	f26	Fentanyl 13 mg/ml (3 ml Vial)	10250	12/31/2015	0041	nb1

Administer (Patient Administration of Narcotic)

Used to track Narcotic medication administration.

Select the Narcotic by flagging it to the left or use the filters to type in the Narcotic's Control Number and click "Administer."

Enter the dosage administered and complete the Department designed form, and click "Submit."

A Password/PIN or biometric confirmation is needed.

Witness – **Required** for any medication waste, a witness is required. Enter the witness information on the form in Narcotics Tracking. A signature and name of the witness will be collected in the ePCR in accordance with General Order 05-18, Advanced Life Support (ALS) Controlled Substances.

Administer				
Control #	Description	Part #	Expiration Date	Lot #
Fentanyl10035	Fentanyl 2 mg / 200 mg (Vial, Solution)	15991005	02/05/2021	T55

Administer form	
EPCR #	
Witness Name	
Administered Amount	
Wasted Amount	

Documentation of the medication administration to include: dose, route, time, provider administering, patient response, and control number listed in comments section of the appropriate ePCR Medication administration data field.

Audit



Used to verify the Narcotics in the Narcotics box that is assigned to a Crew Member, this may involve breaking the seal.

Can be used to reseal the Narcotics Box if the narcotics box is unsealed.

When performing an audit, the Crew Member will be required to enter a seal tag number.

Pick Up (Receive Narcotic Replacement from APEX Vending Machine)

Used to take control of Narcotics from another Crew Member or a Narcotics Safe.

A Narcotics Safe is the term used to describe the location of medication when not assigned to a crewmember.

The Pick Up function **will not** be enabled for Crew Members to pick up Narcotics from another Crew Member. This setting will only be enabled for EMS Supervisors and ALS Battalion Chiefs.

The Pick Up function **WILL** be utilized to pick up a narcotic from the "APEX" Narcotics Safe (Vending Machine) located at the hospital to replenish narcotic supply or to pick up ALS Surge equipment.

Click the "Pick Up" button to the right, select the APEX Narcotics Safe.

Type in the Narcotic Control Number in the Quick Add Control Number field that was dispensed by the APEX Vending Machine, or click select, and choose the appropriate Narcotic Control Number.

Select the appropriate Narcotic Box, to receive the Narcotic into the Unit Narcotic Box.

Complete required fields.

Click "Submit."

A Password/PIN or biometric confirmation is needed.

Note – If the Narcotic box is sealed, the Crew member will have to select to Reseal the Narcotics Box.

This will be confirmed through a **Password/PIN** or biometric confirmation.

Pick Up (Receive Narcotic Box from APEX ALS Surge Locker)

Used to take control of Narcotics from another Crew Member or a Narcotics Safe.

The Pick Up function **WILL** be utilized to pick up a narcotic from the "APEX" Narcotics Safe (ALS Surge Locker) located at various locations throughout the County.

Click the "Pick Up" button to the right, select the APEX Narcotics Safe.

Click select, and choose the appropriate Narcotic Box to which the Crew Member is taking custody of.

Select the appropriate Narcotic Box, to receive the Narcotic into the Unit Narcotic Box.

Leave the "Receive into Narcotics Box" field Blank.

Complete required fields.

Click "Submit."

Verify the Seal Tag Number on the Narcotics Box.

A Password/PIN or biometric confirmation is needed.

The Narcotics Box can be transferred from provider to provider as indicated in the Transfer section of this guide.

To Return the Narcotics Box to the APEX Surge, use the Return function as described in this guide.

Transfer

Two Crew Members are present, and one is handing off Narcotics to the other Crew Member.

This will occur at shift exchange, and anytime custody of the Narcotics is changed per GO 5-18.

Select the Narcotic to be transferred by flagging it to the left and then click the "Transfer" button to the right.

Choose a Crew Member by choosing from the Crew Member list.

Complete the Form to the right.

Click "Submit"

Verify the Narcotic Box Seal Number

Both Crew Members will be required to scan their finger prints or enter Password/PIN for verification.

A printable Confirmation page will appear, click "OK."

Load My Box

To load narcotic box from My Control Numbers. In order to load the box, the box should be in the crew's possession or should be empty.

Note: Only control numbers assigned to the crew can be loaded to the box by the same crew.

This function is only needed if the Crew Member has a Narcotic that was not loaded into their assigned Narcotic Box. This can occur when picking up Narcotics from the APEX Vending Machine, if the Crew Member forgets to select the Narcotics box.**

Control #	Description	Part #	Expiration Date	Lot #	Box Id	Box Seal	IR
1A3	Ativan 2 mg/ml (1 ml vial)	Ativan	12/06/2018	222			
1A4	Ativan 2 mg/ml (1 ml vial)	Ativan	12/06/2018	222			
1A6	Ativan 2 mg/ml (1 ml vial)	Ativan	12/06/2018	222			
1A9	Ativan 2 mg/ml (1 ml vial)	Ativan	12/06/2018	222			
1A10	Ativan 2 mg/ml (1 ml vial)	Ativan	12/06/2018	222			

After selecting Load Box, the Load Box summary page will show details of the Box Name, Box ID, Last Loaded By and Last Loaded On.

Box Name	Box Id	Narcotics Count	Last Loaded By	Last Loaded On
Narc Box	nb1	3	Jason Drummond	09/02/2014

Perform an "Audit" if needed to ensure appropriate seal tag is placed on the Narcotics Box.

Load Field Box

Ability to load narcotic box from one Narcotics Box to another.

This function will only be utilized by EMS Duty Officers to dispense Narcotic vials from their supply box to a Crew Members Narcotic Box.



This action will take place from the EMS Supervisors log in.

Select the Load Field Box function

In the Load Narcotics Box, type the Box ID into the Search field. The BOX ID must be typed as it appears on the Unit's Narcotics Box for it to populate.

The screenshot displays the 'Load Box' form. At the top, it says 'Load Box' in a dark header. Below is a blue header for 'Load Narcotics Box'. The form contains two rows: 'Loaded By:' with the value 'EMS Supervisor' and 'Box Location:' which is empty. Below these is a 'Search' label followed by an empty text input field. At the bottom, there is a timestamp: 'Last Login: 152 347 102 3 Monday, September 18th, 2017 10:05:00 AM EST'.

The Contents of the Field Narcotic Box will appear.

IF swapping out Narcotic(s) (i.e., due to Expire) then select the Control Number(s) that are being removed from the Field Narcotic Box.

To add and **NOT** remove any Control Numbers, Select Next.

Step 1: Remove from the Box Back Next

Load Narcotics Box	
Loaded By:	EMS Supervisor
Box Location:	Luke Skywalker

Narcotics Box Information	
Name:	TEST Medic
Box Id:	TestMD3
Seal Number:	1234
Color:	
Additional Information:	View Box Attachments

Select Control Numbers To Remove from the Box						
<input type="checkbox"/>	Control #	Description	Part #	Expiration Date	Lot #	IR
<input type="checkbox"/>	V9	Midazolam (Versed) 5 mg/mL (1 mL Single Dose Vial)	NDC 0409-2308-01	10/12/2017	Test1234	
<input type="checkbox"/>	V13	Midazolam (Versed) 5 mg/mL (1 mL Single Dose Vial)	NDC 0409-2308-01	10/12/2017	Test1234	
<input type="checkbox"/>	V26	Midazolam (Versed) 5 mg/mL (1 mL Single Dose Vial)	NDC 0409-2308-01	10/12/2017	Test1234	
<input type="checkbox"/>	MS10	Morphine Sulfate 10 mg/mL (1 mL Single Dose Vial)	NDC 0641-6070-01	10/12/2017	Test12345	
<input type="checkbox"/>	MS11	Morphine Sulfate 10 mg/mL (1 mL Single Dose Vial)	NDC 0641-6070-01	10/12/2017	Test12345	

To Issue a Narcotic(s) to the Narcotic Box, in the “Add Control Number to Narcotics Box” hit the Select button.

Select the Narcotic(s) from the EMS Supervisor Supply Narcotic Box.

Step 2: Issue Narcotics and Seal the Narcotics Box Back Finish

Load Narcotics Box	
Loaded By:	Supervisor EMS
Box Location:	Luke Skywalker

Narcotics Box Information	
Name:	TEST Medic
Box Id:	TestMD3
Seal Number:	1234
Color:	
Additional Information:	View Box Attachments

Quick Add Seal Number

Narcotic Box Seal Numbers	
<input type="checkbox"/>	Seal Number
<input type="checkbox"/>	99999
<input type="checkbox"/>	1234

Comments

Quick Add Control Number

Add Control Number to Narcotics Box						
<input type="checkbox"/>	Control #	Description	Part #	Expiration Date	Lot #	Box Id
<input type="checkbox"/>	MS26	Morphine Sulfate 10 mg/mL (1 mL Single Dose Vial)	NDC 0641-6070-01	10/12/2017	Test12345	TESTEMS881

Existing Numbers in Narcotics Box						
Control #	Description	Part #	Expiration Date	Lot #	IR	
V9	Midazolam (Versed) 5 mg/mL (1 mL Single Dose Vial)	NDC 0409-2308-01	10/12/2017	Test1234		
V13	Midazolam (Versed) 5 mg/mL (1 mL Single Dose Vial)	NDC 0409-2308-01	10/12/2017	Test1234		
V26	Midazolam (Versed) 5 mg/mL (1 mL Single Dose Vial)	NDC 0409-2308-01	10/12/2017	Test1234		
MS10	Morphine Sulfate 10 mg/mL (1 mL Single Dose Vial)	NDC 0641-6070-01	10/12/2017	Test12345		
MS11	Morphine Sulfate 10 mg/mL (1 mL Single Dose Vial)	NDC 0641-6070-01	10/12/2017	Test12345		

Enter the new Seal Tag number for the FIELD Narcotic Box that the EMS Supervisor has issued Narcotic(s) to.

Click Finish.

The system will prompt for a verification Password/PIN or biometric from the Crew Member receiving the Narcotic and the Supervisor Issuing.

Incident Report

This function is used to document a Narcotics vial that has been:

- Dropped and Cracked – No Compromise
- Dropped and Cracked – Medication Compromise – Immediate EMSDO notification
- Vial Seal came off – No Compromise
- Vial Seal Off – Medication Compromise – Immediate EMSDO notification
- Other – Loss/Stolen or other not described above. Immediate EMSDO notification for any Medication Compromise or unaccounted for medication.

Notification to an on-duty EMS Duty Officer as required by General Order 05-18, Advanced Life Support (ALS) Controlled Substances.

Select the Narcotic to file the Incident Report against by flagging it to the left, then click the "Incident Report" button to the right.

My Control Numbers Administer Pick Up Transfer **Incident Report**

Crew Member: Sams Malia

	Control #	Description	Part #	Expiration Date	Lot #	Box Id
<input checked="" type="checkbox"/>	M1019	Morphine Sulfate 2 mg / 1 ml (Vial, Solution)	76045-004	04/18/2015	6598	
<input checked="" type="checkbox"/>	XT46	Codeine 20 ml / 4 mg (Vial, Solution)	04	10/26/2014	5283 ap101	

Complete the Incident Form and click "Submit."

A printable Confirmation page will appear, click "OK."

Incident Report Submit Cancel

Control #	Description	Part #	Expiration Date	Lot #
MID1021	Midazolam Hydrochloride 1 mg / 2 ml (Vial, Solution)	55154-0352-S	02/01/2015	887-224F

Incident Report Form

Units Involved: ALS322

Incident Date: 4/14/2014

Case Type: ☒ MD/MOD ☐ PD/SO ☐ OMD QAR

Incident Time: 3:38 PM

Incident Number: 1001

Paramedic/EMT 1: [Select Crew Member](#)

Paramedic/EMT 2: Yakusheva, Alina

Paramedic/EMT 3: White, Snow

Disposition: ☐ Missing ☐ Damaged ☐ Complete Waste ☒ Broken

Incident Details: Vial dropped and broke on floor as Alina was taking it out of Narcotics Box to administer to Patient

Return

Use the "Return" button to return Narcotics to a Narcotic safe.

This will only be used to return the Narcotics Box to the APEX Surge Locker once the use of the Surge is completed.

The Narcotics Box must be fully stocked and sealed in accordance to the procedures outline in this guide and General Order 05-18, Advanced Life Support (ALS) Controlled Substances.

The screenshot shows the 'My Control Numbers' interface. At the top, there is a navigation bar with buttons: Administer, Transfer, Incident Report, Pick Up, Return, Load My Box, Load Field Box, and Audit. Below this, a 'Crew Member' section displays the name 'Hudak Bridgette' and a search field. The main area contains a table with columns: Control #, Description, Part #, Expiration Date, Lot #, Box Id, Box Seal, and IR. The table lists several control numbers (1A3, 1A4, 1A6, 1A9, 1A10) for 'Ativan 2 mg/ml (1 ml vial)' with an expiration date of 12/06/2018 and lot number 222. A 'Print' button is located at the top right of the table.

Control #	Description	Part #	Expiration Date	Lot #	Box Id	Box Seal	IR
1A3	Ativan 2 mg/ml (1 ml vial)	Ativan	12/06/2018	222			
1A4	Ativan 2 mg/ml (1 ml vial)	Ativan	12/06/2018	222			
1A6	Ativan 2 mg/ml (1 ml vial)	Ativan	12/06/2018	222			
1A9	Ativan 2 mg/ml (1 ml vial)	Ativan	12/06/2018	222			
1A10	Ativan 2 mg/ml (1 ml vial)	Ativan	12/06/2018	222			

From My Control Number, Select the Narcotics Box that is being returned to the Surge Locker.

Select Return.

Click Submit.

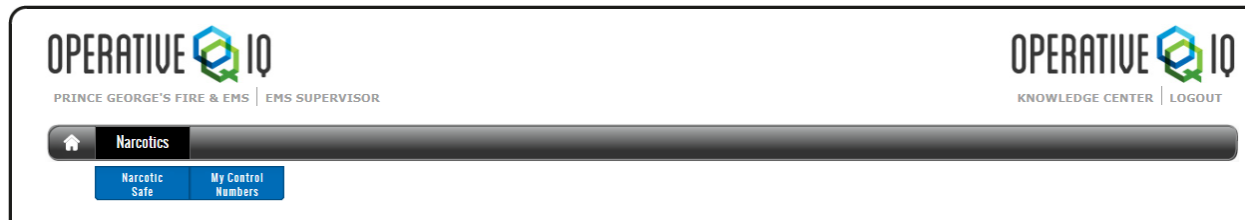
Verify the Seal Tag Number.

A Password/PIN or biometric confirmation is needed.

SPECIAL EVENTS UNIT

The Special Events Unit Coordinator and designated employees will have access to the Special Events Unit (SEU) Narcotics Safe.

When Narcotic Boxes are not assigned to Crew Members for the purposes of patient care, the SEU Narcotic Boxes, will be securely stored, and assigned to the SEU Narcotics Safe in the Narcotics Tracking system



SEU Employee responsible for the Narcotics will Issue and Receive Narcotics through the Narcotic Safe Tab.

The screenshot shows the "Narcotics Safe" interface. At the top, it says "PRINCE GEORGE'S FIRE & EMS | EMS SUPERVISOR" and "KNOWLEDGE CENTER | LOGOUT". Below the header, there is a navigation bar with a home icon and the word "Narcotics". Under "Narcotics", there are two buttons: "Narcotic Safe" and "My Control Numbers". The "Narcotic Safe" button is highlighted. Below the navigation bar, there is a section titled "Narcotics Safe" with buttons "Issue to Crew", "Return to Safe", and "Load Box". Below this, there is a "Narcotics Summary" table with columns: Description, Part #, Last Control #, Near Expiration Date, Total Qty, Loose Qty, and Boxed Qty. The table contains two rows of data: Midazolam (Versed) 5 mg/mL (1 mL Single Dose Vial) and Morphine Sulfate 10 mg/mL (1 mL Single Dose Vial). Below the summary table, there is a section titled "Individual Control Numbers" with columns: Description, Part #, Control #, Expiration Date, Lot Number, Box Id, and IR. There are also buttons "Print Barcodes", "Administer", and "Incident Report".

Description	Part #	Last Control #	Near Expiration Date	Total Qty	Loose Qty	Boxed Qty
Midazolam (Versed) 5 mg/mL (1 mL Single Dose Vial)	NDC 0409-2308-01	V36	23	23	18	5
Morphine Sulfate 10 mg/mL (1 mL Single Dose Vial)	NDC 0641-6070-01	MS26	17	17	12	5

Description	Part #	Control #	Expiration Date	Lot Number	Box Id	IR
			All			

Issue a Narcotic Box

Select Issue to Crew.

Select the Crew Member being issued the Narcotics Box.

Hit the Select button to choose the Narcotics Box being issued.

Issue Narcotics [Submit] [Cancel]

Issue Narcotics

From Safe: [Narcotic Safe](#)

Crew ID:

Crew Member: [Luke Skywalker](#)

Issue in to narcotics box

Box Id:

Box Name: [Select Box](#)

Quick add control number

Comments

Add Control Number - Control Numbers being Issued [Delete] [Select] [Print]

Control #	Description	Box Id	Box Seal	Part #	Expiration Date	Lot #	IR
<input type="checkbox"/>							

Verify the Seal Tag on the Narcotics Box.

Receiving Crew Member will acknowledge receipt by Biometric scan or Password/PIN entry.

Return Narcotic Box to SEU Narcotics Safe

Prior to the Crew Member returning the box to the Narcotics Safe, the Narcotics Box must be appropriately stocked and sealed.

The SEU employee with access to the SEU Narcotics Safe will, utilize the Narcotics Safe Tab.

Select Return to Safe.

Select the Crew Member.

Choose the appropriate Narcotics Box.

Verify the Seal Tag Number.

The Crew Member Returning the Narcotic Box will acknowledge return by Biometric scan or Password/PIN entry.