

Controlled Substances Policies

Controlled substances are dispensed from the OmniCell Cabinets located in the Operating Room, PACU, Preop holding, 52 Psych and Block Room. Please carefully read and follow the procedures listed below to obtain controlled substances.

- **Login with Username and Password or fingerprint.** In the event you forget your password while you are on a call or mole shift, please see the recovery room charge nurse for a temporary ID and e-mail Suremed Requests (suremed@shands.ufl.edu) to reset your password. In addition, you may contact the pharmacy at 4-5608.
- **Controlled substances should be removed under patient's name.** In the event of a **trauma** patient whose ID is unknown, use the generic trauma ID. If you have the patient information but cannot find them listed use the “**add new patient**” icon on the left of the screen to record their information. Drugs must be signed out for individual patients and not for the whole day.
- A **receipt** will print which must be retained. If it doesn't print don't worry about it.
- **Confirm that the drugs you receive match that requested.** If they do not, immediately talk with a pharmacist and document the problem on the anesthesia controlled substance card.
- **Complete an anesthesia controlled substances card accurately** (see below). Ensure the “number issued” matches what you checked out; that the “amount administered” is reflected on the OR record; and the “amount returned” is in the return bag.
- **Unused controlled substances** and all syringes to be wasted should be placed in plastic bags (cap syringes, no needles please) together with the case receipt and completed anesthesia controlled substances card and deposited into the return bin in the OR hallway or to the pharmacy.

Notes:

- **Syringes and ampoules of narcotics must NEVER be left on the anesthesia machine or cart without your presence.** They must be either taken with the anesthetist or locked in the cart.
- **Narcotics must not be exchanged among anesthesia personnel or between the ICU and the operating room.** This includes exchanging a new vial for an unused syringe of previously drawn-up drug. Personnel permanently relieving other residents or CRNA/AA must bring their own supply of any controlled substances they anticipate needing. (This policy does NOT apply to breaks of any type where the person being relieved is expected to return to the case.) The person being relieved should return all unused controlled substances they signed out at the beginning of the case to the pharmacy, accounting for usage as described above. This policy DOES APPLY to all drugs administered by infusion as well. For example, if a patient is being managed with an infusion of fentanyl, the anesthetist leaving the case should take ALL unused medications with him / her including whatever is left in the infusion. The new anesthetist may then choose to start a new infusion of fentanyl if he /she desires to do so. In addition, if a patient is being sedated or given analgesia by infusion in the ICU, the practitioner should bring his / her own medications to continue sedation during transport. The ICU infusions of controlled substances MUST be left in the ICU with the nurse caring for the patient.
- If you **drop a controlled substance** and the vial shatters rendering the drug unusable, or if you **accidentally waste** any controlled substance, please have another person who witnessed the event sign (AND print name) on your drug use card indicating a witnessed drug wastage.
- If you dilute a controlled substance for use during a case, please be sure to label the syringe accordingly with the correct concentration.

Cabinet difficulties – contact the pharmacy (4-5608)

What happens if policies are violated or drugs handled inappropriately?

Anesthesiologists and providers are at significant risk for addiction and we take our job monitoring and protecting you and our patients very seriously. There are numerous ways in which we can monitor usage, via the electronic system as well as refracting the drugs returned to the pharmacy. We need your help to keep everyone safe.

All variances will be entered into a **narcotic variance database**. Each recorded variance will trigger an email to the anesthesia provider requiring a response. The provider must log in to the system (link provided in the alert email) and explain the variance within 7-days. Higher level or repeated minor variances will escalate the level of concern and follow-up (see below).

- **Dropped or discarded narcotics – witnessed:** The witness **MUST** sign and print their name on the narcotic card. 1-3 episodes in a month would not trigger consequences, unless repeated in subsequent months.
- **Dropped or discarded narcotics – unwitnessed:** More than 1-2 in a reasonable period of time will result in at least an administrative note in the provider's file.
- **Failure to return narcotic use cards within 24h:** Repeated offenses will result in an administrative note and may result in unsatisfactory professionalism scores.
- **Narcotics left unattended and returned by someone else:** This is a serious offense resulting in an administrative warning on the first offense, and possible probation on the second. Repeat offense during probation may result in dismissal. Lifting of probation is at the discretion of the Program Director or head CRNA/AA.
- **Narcotics lost:** A very serious offense treated as above.
- **Incomplete or inaccurate documentation on anesthetic record or controlled substances card:** The pharmacy will first counsel the provider, but repeat offenses will be directed to the Program Director or head CRNA/AA for counseling.
- **Incorrect refraction on returned medications:** Drug returns from all practitioners may be refracted at random to verify returned drug content. All syringes **MUST** be accurately labeled with concentration.

If you receive an email about a variance, please respond immediately. If you have concerns, please contact the pharmacy or Program Director. Most importantly, if you have concerns about a colleague, contact the Program Director, OR Director, or Chair **immediately**. Your identity will be kept confidential and the concerns will be investigated discreetly first.

Variance Database: <https://rx.anest.ufl.edu>

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