

Washington State Department of Health Hospital Pharmacy Provision of Drugs to Ambulance or Aid Services Guidelines



Background

In 2015 the Washington State Legislature passed legislation codified as, [RCW 18.64.540](#). This law allows ambulance and aid services to obtain drugs from pharmacies operated by hospitals.

The pharmacy must be licensed under chapter 18.64 RCW and operated by a hospital licensed under chapter 70.41 RCW. The ambulance or aid service must be licensed under chapter 18.73 RCW.

Pharmacy participation in providing local ambulance and aid services drugs is at the discretion of the hospital's leadership and the hospital's responsible pharmacy manager. Pharmacy participation is not mandatory.

What Does This Mean?

Ambulance and aid services may obtain drugs from hospital pharmacies as described in [RCW 18.64.540](#). The intent of the law is to make the drugs available to ambulances and aid services that experience difficulty with obtaining drugs through the normal wholesale distribution channel. For example, difficulties seen in small rural locations where the lack of access to drugs may create long out-of-service ambulance or aid service times waiting to replace drugs.

Hospital pharmacy personnel, if electing to participate in this program, will work with the EMS MPD to develop a pharmacy protocol for the transfer of drugs to EMS and maintain required records. Guidelines and criteria that should be included in a protocol for the transfer of drugs to EMS are below.

Terms

1. **Drug** as defined in [RCW 18.64.011](#)
2. **Medical Program Director (MPD)** means a person who meets the requirements of chapters 18.71 and 18.73 RCW and is certified by the secretary. The MPD is responsible for both the supervision of training and medical control of EMS providers ([WAC 246-976-010](#)).
3. **Pharmacy Protocol** means the written procedure for the transfer of drugs to EMS.
4. **Prehospital Patient Care Protocol** means the department-approved, written orders adopted by the MPD under [RCW 18.73.030\(17\)](#) and [RCW 70.168.015\(27\)](#), which direct the out-of-hospital care of patients. These protocols are related only to delivery and documentation of direct patient treatment. The protocols meet or exceed statewide minimum standards developed by the department in rule as authorized in chapter 70.168 RCW and [WAC 246-976-010](#).

5. **Responsible Pharmacy Manager** as outlined in [WAC 246-945-310](#).

The Hospital May Provide Drugs If

1. The hospital responsible pharmacy manager and EMS physician Medical Program Director (MPD) mutually agree to participate. It is a best practice to ensure management and leadership at the hospital and ambulance or aid service are also aware and approve of participation.
2. A written pharmacy protocol for the transfer of drugs to EMS services has been established. (Guidelines for a pharmacy protocol for the transfer of drugs to EMS are included in this document).
3. The hospital is located in the same county or an adjacent county to the county in which the ambulance or aid service is approved to operate.
4. The MPD or the MPD delegate (MPDD) approved by the MPD for an ambulance or aid service has requested drugs from the hospital pharmacy. A MPD or MPDD may only request drugs from a hospital pharmacy that:
 - a. Are relevant to the licensed level of service provided by the ambulance or aid service (BLS, ILS, or ALS);
 - b. Are relevant to the training and scope of practice of its emergency medical personnel; and
 - c. Are included as part of the department approved MPD prehospital patient care protocols for use by emergency medical personnel in the county(s) in which the ambulance or aid service is approved to operate.
5. The provision of the drugs by the hospital pharmacy is not contingent upon arrangements for the transport of patients to the hospital that operates the pharmacy for reasons other than the consideration of patients' medical needs and any patient care procedures.

Guidelines for a Pharmacy Protocol for the Transfer of Drugs to EMS

The purpose of these guidelines is to assist the MPD and hospital pharmacy to develop a written pharmacy protocol for the transfer of drugs to ambulance and aid services.

The pharmacy protocol should:

1. Ensure compliance with all applicable federal and state laws and regulations.
2. Define when EMS may obtain replacement drugs from the hospital pharmacy.
 - a. The transfer of hospital pharmacy drugs to EMS should be pre-planned.
 - b. EMS should place orders for drugs in advance. The pharmacy will determine the amount of notice required prior to fulfilling an EMS request for drugs.
 - c. The pharmacy will determine how they wish to receive medication requests.
3. Define the scenarios where the hospital pharmacy may provide drugs to ambulance and aid services. For example, after patient use of a drug, to replace an expired drug, replace a drug with a broken seal, illegible, incomplete, or missing labels.
 - a. The pharmacy will not accept returned drugs. Expired, recalled, or partially used drugs are the responsibility of the EMS service. EMS services should develop a process for appropriate disposal or return of expired, recalled, or partially used drugs.

4. Include provisions for drug replacement during pharmacy hours of operation, during hours when the pharmacy is not in operation, and / or emergency situations.
5. Address billing and recordkeeping. This shall include a procedure to prevent patients from being charged by more than one entity.
6. Address recordkeeping to ensure that drug transfers are properly documented. This documentation should include,
 - a. A copy of the purchase order or request for medication signed by the designated representative of the ambulance or aid service.
 - b. For controlled substances this should include the Form 222 of the Drug Enforcement Administration (DEA).
 - c. Name and signature of the pharmacist providing the medication to the ambulance or aid service.
 - d. Adequate information to allow track and trace of drug transfers in case of recall such as, drug name, strength, quantity, manufacturer, lot number of the drug supplied.
 - e. The date the drug was supplied,
 - f. The DOH issued EMS service ambulance or aid service license number and MPD or MPDD license number.
 - g. Any deletions or changes to the order.
 - h. The name and signature of the ambulance or aid service representative receiving the drugs.
 - i. The date the order was filled.
7. Address documentation and administrative requirements such as:
 - a. The MPD will provide the hospital pharmacy with proof of Department of Health certification as a Medical Program Director. The department maintains a public credential search feature on our website that can be used to verify if a person holds an active license or certification. The credential search website can be accessed at: [Search \(wa.gov\)](#)
 - b. The MPD must provide a copy of the department approved MPD Patient Care Protocols, including the drug list authorized by the MPD for EMS personnel use in the county(s) where the MPD has oversight.
 - c. The MPD will provide the hospital pharmacy with the policy outlining MPD requirements for EMS regarding storing, dispensing, and administering controlled substances per [WAC 246-976-920](#).
 - d. All documents for the transfer of drugs and policies and procedures related to transfer of drugs will be maintained at the pharmacy site for review and consultation with pharmacy commission inspectors. -
 - e. MPDs and MPDDs must retain a copy of the documents and agreements identified in section d.