

Chain of Custody for Controlled Substance Infusions

PHSA 14574

**Providence AK Learning Institute
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Course Description:

This course will present the procedure for handing off controlled substance infusions between one caregiver and another.

Learning Objectives:

- Define chain of custody for handling controlled substance infusions.
- Discuss the process for handing off IV or epidural controlled substances infusions between one caregiver and another.
- Describe the method for documenting the handoff of controlled substance infusions in EPIC

Controlled Substance Chain of Custody

- Controlled substances, such as opioids and benzodiazepines, must be transferred from one caregiver to another caregiver in a manner that establishes a clear chain of custody.
- Chain of custody: Complete documentation record showing the trackable receipt, custody, control, transfer, and disposition of a controlled substance in its entirety.

Controlled Substances Delivery Sheet
Providence Alaska Medical Center

Receipt Number:
115607

After completing, return to pharmacy immediately

Date: 12/29/14 Time: 0815 Patient Name: Morse, Mickey Room Number: 629

Sent By:	Print: <u>B. Thompson RPH</u>	Received By:	Print: <u>C. Jones RN</u>
	Sign: <u>B. Thompson RPH</u>		Sign: <u>C. Jones RN</u>

Drug	Quantity	Drug	Quantity	Drug	Quantity
Fentanyl PCA		Midazolam PCA		Morphine Epidural	
Hydromorphone PCA		Morphine PCA		<u>Hydromorphone Epid.</u>	<u>①</u>
Lorazepam PCA		Fentanyl Epidural			

7171-265 (5/04)

- **Chain of custody begins with:**
 - Receipt of infusion by removal from Pyxis or obtaining from Rx
 - The RN whose name is on the Pyxis removal or the Controlled Substances Delivery Sheet is fully responsible and accountable for the infusion until the documented transfer of custody to another RN

- **Chain of custody ends with:**
 - Entire infusion accounted for between charted administration volumes + waste records; documented transfer of remaining infusion to another RN; or return of entire intact infusion to Rx.

[illegible]

Documentation for Controlled Substance Infusions:

- For infusions sent from Rx, receiving RN will print and sign his/her name on the Controlled Substance Delivery Sheet
- If infusion is not immediately hung on the patient, sign it in to the Controlled Substance 24 Hour Inventory Log and place in the secure “*Controlled Substances” bin in Pyxis.
 - Two RNs must sign infusion in
 - One RN signs infusion out
- Items on Controlled Substance 24 Hour Inventory Log are inventoried each shift.
- Hanging new infusion:
 - RN documents new bag or new syringe/cartridge action on the EPIC MAR

Bedside transfer of custody of infusing controlled substance



- When the care of a patient is transferred from one caregiver to another:
 - The 2 caregivers together will verify and document the volume remaining of the controlled substance infusion that is hanging.

EPIC Documentation

Schedule Date/Time: 10/03/14 0831 [Request Co-sign](#)

Action	Date/Time	Route/Site	Dose/Rate	Comment
Action: Rate/Dose Verify	Time: 0702	Route: Intravenous	Dose: 50 mcg/hr	Comment: Shift change: 17 mL remain in syringe
	Date: 10/3/2014	Site:	Rate: 1 mL/hr	
Calculation: $50 \text{ mcg/hr} \times 1 \text{ mL}/50 \text{ mcg} = 1 \text{ mL/hr}$				
Order Concentration: 50 mcg/mL				
Last Rate: 1 mL/hr (10/03/14 0600)				

The off-going/transferring RN will access the MAR in EPIC

- Click on the current time cell
- Select rate/dose verify
- Enter “Volume Remaining _____ mL” in the comments box
- Click “request co-sign”

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In the “Request Cosign By” field, indicate the name of the RN assuming care of the patient who also verified volume remaining and is accepting custody of documented volume.

Overview

Overview Nursing

Jump: Orders Contacts Overview Refresh

Allergies	Intolerance	Hospital Problems	Length of Stay
Allergies Allergen Reactions Insulin Other (See Comments) Anesthetics Other (See Comments) Antibiotics Other (See Comments) Soft Antibiotics Not tested	Intolerance No active intolerances and/or intolerant diets	Hospital Problems None Care Plan Problems General Plan of Care (Adult, Obstetric) Fall/Trauma/Injury Risk (Adult, Obstetric) Pain Chronic (Adult, Obstetric) Pain Acute (Adult, Obstetric) Acute Coronary Syndrome (Adult, Obstetric) Heart Failure (Adult, Obstetric) Diabetes, Type 2 (Adult, Obstetric) Pressure Ulcer Risk (Using Braden Scale) (Adult, Obstetric) Cardiac Surgery (Adult) Mechanical Vent/Discontinue From Mechanical Vent (Adult) Enteral Nutrition (Adult, Obstetric)	Length of Stay Actual LOS 25 days Emergency Admit 9/6/2014 Inpatient Admit 9/6/2014

Precaution Orders Expand Hide

Ordered	Start
09/13/14 1952	09/13/14 1944

Administrations with Cosign Requests [Cosign All]

"Off-going RN"

fentanyl 50 mcg/mL infusion

Status: Active
 Line: Central Line - Triple Lumen 09/21/14 1800 internal jugular vein, left (Proximal)

Action	Dose	Rate	Route	Site	Time	Requested Cosigner
Rate/Conc Verify	50 mcg/hr	1 mL/hr	Intravenous		10/03/14 0833	"Receiving RN"

[Cosign]

- The receiving RN will log into EPIC and note the request for co-signature on the Overview tab under the Administration with Cosign Requests.
- The receiving RN will click on the EPIC co-sign link to document verification of the remaining volume.

Labs
All Meds

Completed:
Future:
MAR Hold:
Read-only:

0500	0600	0700	0800	0900
!!	Restarted 0600 JS 50 mcg/hr 1 mL/hr		Rate/Dose Verify 0833 JS 50 mcg/hr 1 mL/hr [C]	Rate/Dose Verify 0833 Documented By: "Off-going RN" Requested Cosign From: Receiving RN (cosigned at 10/03/14 0836) Dose: 50 mcg/hr Rate: 1 mL/hr Shift change: 17 mL remain in syringe

- By co-signing this action, the receiving RN accepts custody of the documented remaining volume of the infusion and is now fully responsible and accountable for this volume.

Waste of Unused Infusion

Controlled Substance Waste Documentation

- Waste or destruction of any damaged, partially used, or contaminated controlled substance is performed AND witnessed by TWO qualified personnel. - Disposal should be in a manner that the controlled substance cannot be retrieved, recovered, or in any way salvaged for reuse or possible diversion.	- COMPLETE documentation includes: - drug name, strength and formulation - date and time - total amount of drug being disposed - patient's name - signature of TWO qualified personnel
Drug Name/Strength/Form: <u>Hydromorphone 8mg/1ml Sol</u>	Drug Name/Strength/Form: _____
Date/Time: <u>12/24/18</u> Amount: <u>178ml</u>	Date/Time: _____ Amount: _____
Patient's Name: <u>Mark Hickey</u>	Patient's Name: _____
Witness signature: <u>Celine Ad</u>	Witness signature: _____
Witness signature: <u>K. Smith RN</u>	Witness signature: _____

- If obtained from Pyxis – two RNs document waste electronically in Pyxis
- If obtained from Rx – two RNs document on the Controlled Substance Waste form located on the back of the Controlled Substance 24 Hour Inventory Log

Summary:

- Chain of custody for controlled substance infusions will be fully maintained and documented between caregivers
- The controlled substance infusion volume remaining must be verified by 2 RNs at the change of shift and any upon patient transfer to another department
- The 2 verifying RNs will document the volume remaining of the controlled substance infusion on the EPIC MAR

Information Contact:

- Your Manager, Supervisor, or Clinical Educator
- PAMC Pharmacy