



University of Rochester
River Campus Medical Emergency Response Team
Medication Protocols

University of Rochester
CPU Box 273155
Rochester, NY 14627
www.security.rochester.edu/mert

The following protocols will go into effect at 20:00 hours on February 8, 2015, pending approval from University Health Services and RC MERT Medical Director.

1. Medication Overview

1.1. Medications approved for carrying and use by R/C MERT are listed below:

1.1.1. Albuterol sulfate

1.1.1.1. Form: ampules containing 2.5 mg 0.083% albuterol sulfate solution administered via nebulizer

1.1.2. Aspirin

1.1.2.1. Form: chewable 81mg tablets administered PO

1.1.3. Epinephrine

1.1.3.1. Adult form: 0.3mg epinephrine, 1:1000 administered IM via auto-injector

1.1.3.2. Pediatric form: 0.15mg epinephrine, 1:2000 administered IM via auto-injector

1.1.4. Naloxone hydrochloride

1.1.4.1. Form: 2mL syringe containing 2mg naloxone hydrochloride administered IN via mucosal atomization device

1.1.5. Glucose

1.1.5.1. Form: tube containing 15g glucose paste administered BUCC

1.1.6. Oxygen

1.1.6.1. Form: concentrated oxygen administered via appropriate adjunct

1.2. Usage of Medications

1.2.1. All medications shall be handled and administered in accordance with New York State Public Health and BLS protocols, MLREMS regional protocols, and R/C MERT agency protocols.

1.2.2. On-line approval from adult or pediatric medical control (as appropriate) must be obtained prior to administration of any medication except oxygen.

1.2.2.1. Epinephrine auto-injector may be administered prior to contact with medical control in the presence of life-threatening anaphylaxis.

1.2.3. The use of any medication other than oxygen shall be documented via special report following the call. The Director of Operations and Equipment Manager shall be notified of the medication usage.

1.2.4. Quality Assurance procedures regarding medication usage shall be followed in accordance with MERT QA/QI protocols.

1.2.4.1. R/C MERT Medical Director shall be informed of medication usage as indicated by QA/QI protocols

2. Training and Credentialing of R/C MERT Members

2.1. Medications may be administered only by an R/C MERT field staff member with an active NYS EMT-B certification who has received approval through the Training Department.

2.2. R/C MERT Training Department shall approve individuals to administer medications through a regular training program.

2.2.1. All members of field staff must receive training for all R/C MERT approved medications at least once per year.

2.2.1.1. Training shall include the following information for each medication:

2.2.1.1.1. Signs and symptoms of illness that medication is intended to treat

- 2.2.1.1.2. Indications, contraindications, and considerations for medication
 - 2.2.1.1.3. Other skills directly related to treating illness (e.g. rescue breathing)
 - 2.2.1.1.4. Administration of medication
 - 2.2.1.1.5. Follow-up care
- 2.3. The Training Department shall maintain an updated list of all MERT members who have active approval to administer medications.
- 2.4. MERT members who do not have active approval to administer medications may not take shifts as an 801 or 802.
- 3. Storage and Inventory of Medications
 - 3.1. Medication storage locations
 - 3.1.1. All medications (except oxygen) shall be stored in the four following locations:
 - 3.1.1.1. Primary Crew Chief medication bag
 - 3.1.1.1.1. Primary medication bag shall be kept on the person of the 801 or 802 while on shift. When not in use, the medication bag shall be stored in MERT UHS office, which is accessible to field staff by key or key code.
 - 3.1.1.2. Standby Crew Chief medication bag
 - 3.1.1.2.1. Standby medication bag shall be used and stored in the same manner as the primary medication bag, as outlined in 3.1.1.1.1.
 - 3.1.1.3. Wilson Commons jump bag
 - 3.1.1.3.1. Jump bag is located in Wilson Commons fifth floor locker number 72, which is accessible to field staff by combination lock.
 - 3.1.1.4. Goergen Building jump bag
 - 3.1.1.4.1. Jump bag is located in cabinet in Goergen room 103, which is accessible to field staff by ID swipe access and combination lock.
 - 3.1.2. All medication storage locations shall be stocked with the following:
 - 3.1.2.1. 10 tablets chewable aspirin
 - 3.1.2.2. 1 adult epinephrine auto-injector
 - 3.1.2.3. 1 pediatric epinephrine auto-injector
 - 3.1.2.4. 10 ampules albuterol sulfate inhalation solution
 - 3.1.2.5. 1 kit naloxone hydrochloride (containing 2 syringes and 2 mucosal atomization devices)
 - 3.1.2.6. 2 tubes oral glucose paste
 - 3.2. Additional supplies of all medications (except oxygen) shall be stored in the medication box located the R/C MERT office located in the UHS basement. Both the office and medication box are accessible to field staff by key or key code.
 - 3.3. Oxygen is stored at the following locations:
 - 3.3.1. Primary oxygen sling, located in office when not in use
 - 3.3.2. Primary backpack, located in vehicle 800
 - 3.3.3. Back-up oxygen tanks, located in vehicle 800
 - 3.3.4. Standby bag, located in MERT UHS office
 - 3.3.5. Wilson Commons jump bag
 - 3.3.6. Goergen jump bag
 - 3.3.7. Additional oxygen tanks in MERT UHS office and Spurrier office
 - 3.4. Temperature and light
 - 3.4.1. All medications (except oxygen) shall be stored in temperature-regulated environments, with an estimated temperature between 68 and 77 degrees Fahrenheit.
 - 3.4.1.1. Oxygen should be stored at room temperature whenever possible.
 - 3.4.2. All medications shall be stored out of direct light.
 - 3.5. Security of medications

- 3.5.1. All medications shall be stored under at least one lock that is only accessible to R/C MERT field staff.
- 3.6. Inventory
 - 3.6.1. Written inventory of all medications shall be performed at a minimum once per month by the Equipment Manager.
 - 3.6.1.1. Inventory report shall include quantity, expiration date, and storage temperature of medications in all locations.
 - 3.6.1.2. Each listed medication shall include brand name, generic name, dosage, and route of administration.
 - 3.6.1.3. Medications that are past expiration date, appear abnormal, or show signs of damage shall be disposed of appropriately.
 - 3.6.1.4. Equipment manager shall send inventory report to Director of Operations and inform him/her of necessity to restock medications as appropriate.
- 3.7. Disposal
 - 3.7.1. Medications deemed necessary for disposal shall be delivered to UHS for appropriate disposal by the Equipment Manager.
 - 3.7.2. Used epinephrine auto-injectors must be disposed of in a sharps container.
 - 3.7.3. Used medication administration devices shall be considered a biohazard and disposed of appropriately.