

Northwest Community EMS System
CONTROLLED SUBSTANCE (CS) LOG – NT vehicles - Rev. 2/6/20

EMS Agency: _____ Vehicle ID# _____ Month/Year: _____

Instructions: This log must be signed daily by two different PMs (one off-going and one on-coming) AND initialed whenever the CS inventory is changed after visually inspecting drugs to confirm that they are present, intact, within exp. dates, and in required quantities per System policy M9. If any alternate drug is added due a shortage, note on the log (see example). If any drug is not present, the discrepancy must be reconciled immediately per System policy C6 Controlled Substances. Note the number present in that column. **Begin a new Log on the first day of each month.**

Date	Signatures	EMS license #	Fentanyl 100 mcg (1)	Morphine 10 mg (1)	Midazolam 10 mg (1)	Diazepam 10 mg (1)	Ketamine 500 mg	Change Initials
Ex	Off going <i>John Doe</i>	060112032	3	0	2	0	1	JD
	Oncoming <i>Jane Smith</i>	060000046	0	2				JS
1								
2								
3								
4								
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10								
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12								
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14								
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Date	Signatures	EMS license #	Fentanyl 100 mcg (1)	Morphine 10 mg (1)	Midazolam 10 mg (1)	Diazepam 10 mg (1)	Ketamine 500 mg	Change Initials
16								
17								
18								
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Instructions: Return the completed Log to your PEMSC who will review for QI purposes, sign, and forward to the assigned Hospital EMSC/educator by the 4th week of the following month to review, sign, and electronically archive for at least 5 years. The signer affirms that they have reviewed this Log for CQI purposes. If any signatures or counts were omitted, I have addressed the omissions with the involved personnel and have appended their explanations to this form.

Signature: Provider EMS Coordinator

Date

Signature Hospital EMSC/educator

Date