



Clinical Operating Policy (COP) 2120 – Medication Shortage & Expired Medication Usage

I. Purpose

To provide EMTs and Paramedics with procedures to mitigate drug shortages and prevent patient harm when emergency medications are unavailable or expired. National drug shortages have become more common, requiring proactive response protocols within EMS operations.

II. Scope

This COP applies to EMTs and Paramedics managing medication inventories, responding to drug shortages, and situations requiring use of expired medications under Medical Program Director authorization within Kitsap County.

III. Policy

EMTs and Paramedics will follow established shortage mitigation procedures and may use expired medications only with written Medical Program Director authorization when treating life-threatening conditions where no treatment poses greater risk than expired medication use.

IV. Procedure / Operating Guidelines

A. Initial Shortage Response

1. **EMTs and Paramedics discovering medication shortages will:**
 - a. Immediately check for alternative concentrations or dosage forms available
 - b. Verify availability from alternate vendors or manufacturers
 - c. Identify appropriate substitute medications per current protocols
 - d. Report shortages to agency Medical Officer within 24 hours
2. **Agency Medical Officers will:**
 - a. Contact vendors to explore alternative suppliers and concentrations
 - b. Implement supply management practices including refrigeration requirements
 - c. Adjust stocking levels to reduce waste during shortage periods
 - d. Centralize supply locations when operationally feasible



Clinical Operating Policy (COP) 2120 – Medication Shortage & Expired Medication Usage

B. Medical Program Director Authorization Process

- 1. Agencies requesting expired medication authorization will:**
 - a. Submit written notification to the Medical Program Director describing current shortage
 - b. Document completion of alternative supplier searches per Section A
 - c. Provide specific medications, quantities, and expiration dates involved
 - d. Propose storage and tracking procedures for expired medications
- 2. The Medical Program Director will:**
 - a. Review shortage documentation and alternative medication options
 - b. Issue written authorization for expired medication use when appropriate
 - c. Specify which expired medications may be used and under what conditions
 - d. Set termination date for authorization upon resupply availability

C. Expired Medication Management

- 1. EMTs and Paramedics will:**
 - a. Store expired medications in designated reserve locations separate from current stock
 - b. Use all unexpired medication supplies before accessing expired reserves
 - c. Administer only the most recently expired medications as authorized
 - d. Maintain expired medications according to manufacturer storage instructions
- 2. Patient care procedures require:**
 - a. Obtain patient consent for "extended expiration" medication when possible
 - b. Document "extended expiration" next to medication name in PCR
 - c. Notify Medical Program Director within 24 hours of each expired medication use
 - d. Complete Pre-Hospital Care Unusual Incident Report with PCR incident number

D. Controlled Substance Transfer Procedures

- 1. When transferring patients with controlled substance infusions:**
 - a. If receiving provider will continue infusion: Document approximate amount transferred and receiving provider in PCR



Clinical Operating Policy (COP) 2120 – Medication Shortage & Expired Medication Usage

- b. If receiving provider will not continue infusion: Disconnect and waste remaining medication with witness per standard procedures
- c. Record all transfers and waste in controlled substance documentation

2. EMTs and Paramedics will:

- a. Follow agency-specific controlled substance tracking procedures
- b. Document all medication transfers in patient care reports
- c. Report any discrepancies to agency Medical Officer immediately

E. Quality Assurance and Tracking

1. Agency Medical Officers will:

- a. Track expired medication usage patterns and effectiveness
- b. Monitor compliance with authorization conditions
- c. Report recurring shortages to Medical Program Director
- d. Coordinate with EMS Office on regional shortage impacts

2. The Medical Program Director will:

- a. Review all expired medication usage reports monthly
- b. Evaluate authorization effectiveness and patient outcomes
- c. Coordinate regional responses to widespread shortages
- d. Update authorization procedures based on utilization data

V. References

NWREMS 2024 Protocols - Medication Administration Standards

Washington State DOH Controlled Substance Regulations

FDA Drug Shortage Database and Guidelines

DEA Controlled Substance Storage and Transfer Requirements

Manufacturer Storage and Handling Requirements

Kitsap County EMS Pre-Hospital Care Unusual Incident Report Procedures



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VI. Review and Approval

Medical Program Director:  Date: 03/08/2026

Fire Chief: Jim Gillard Date: Jun 11, 2026

Effective Date: 6/11/2026

Next Review Date: 6/11/2029

Attachment: Pre-Hospital Care Unusual Incident Report Form