

Course Title:

Chain of Custody for Controlled Substance Infusions

**Course Number:
14574**



**Providence AK Learning Institute
2015 by Providence Health & Services Alaska
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AK**

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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.**



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.

Controlled Substances Delivery Sheet
Providence Alaska Medical Center

Receipt Number:
115607

After completing, return to pharmacy immediately

Date: 12/28/14	Time: 0815	Patient Name: Mouse, Mickey	Room Number: 629
Sent By: Print: B. Thompson RPH Sign: <i>B. Thompson RPH</i>		Received By: Print: C. Jones RN Sign: <i>C. Jones RN</i>	

Drug	Quantity	Drug	Quantity	Drug	Quantity
Fentanyl PCA		Midazolam PCA		Morphine Epidural	
Hydromorphone PCA		Morphine PCA		Hydromorphone Epid.	①
Lorazepam PCA		Fentanyl Epidural			

7171-252 (204)

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

- 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”

Schedule Date/Time: 10/03/14 0831					Request Co-Sign
Action	Date/Time	Route/Site	Dose/Rate	Comment	
Action: Rate/Dose Verify	Time: 0702 Date: 10/3/2014	Route: Intravenous Site:	Dose: 50 mcg/hr 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)	Comment: Shift change: 17 mL remain in syringe	

EPIC Documentation cont.

- 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.

Action	Date/Time	Route/Site	Dose/Rate	Comment
Action: Rate/Dose Verify Request Cosign By: "Receiving RN"	Time: 0833 Date: 10/02/14	Route: Intravenous Site:	Dose: 50 mcg/hr Rates: 1 mL/hr Calculation: $50 \text{ mcg/hr} \times 1 \text{ mL/50 mcg} = 1 \text{ mL/hr}$ Order Concentration: 50 mcg/mL Last Rate: 1 mL/hr (10/02/14 0600)	Comment: Shift change: 17 mL remain in syringe

- 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.

The screenshot displays the EPIC Overview Nursing interface. Key elements include:

- Overview Nursing** header with navigation options like Alerts, Orders, and Reports.
- Alerts** section with sub-sections for Allergies, Medications, and Labs.
- Precaution Orders** section showing active orders.
- Administration with Cosign Requests** section, which is highlighted. It shows a table with columns for Line, Central Line, Type, Location, Date, Rate, Route, Site, and Time. A red box highlights the "Request Cosign" link in the table.
- Length of Stay** section showing dates for Actual LOS, Emergency Admit, and Inpatient Admit.
- Hospital Problems** and **Care Plan Problems** sections.

EPIC Documentation cont.:

- 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.

Labs		All Meds	
Completed: <input type="checkbox"/>		Future: <input type="checkbox"/>	
MAR Hold: <input checked="" type="checkbox"/>		Read-only: <input type="checkbox"/>	
0500	0600	0700	0800
	<p>Restarted 0600 JS 50 mcg/hr 1 mL/hr</p>		<p>Rate/Dose Verify 0833 JS 50 mcg/hr 1 mL/hr</p>
		<p>[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</p>	

Waste of unused infusion

- 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

Controlled Substance Waste Documentation	
<ul style="list-style-type: none">• 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.	<ul style="list-style-type: none">• COMPLETE documentation includes:<ul style="list-style-type: none">○ drug name, strength and formulation○ date and time○ total amount of drug being disposed○ patient's name○ signatures of TWO qualified personnel
Drug Name/Strength/Form: <u>Hydromorphone 10mg/ml Epid</u>	Drug Name/Strength/Form: _____
Date/time: <u>12/29/14 12:10</u> Amount: <u>175 ml</u>	Date/time: _____ Amount: _____
Patient's Name: <u>Malik, Mickey</u>	Patient's Name: _____
Witness signature: <u>[Signature]</u>	Witness signature: _____
Witness signature: <u>K. Smith RN</u>	Witness signature: _____

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 or Clinical Educator or PAMC Pharmacy