DISTRICT PROCEDURE FOR
MANAGING DRUG SHORTAGES

PURPOSE: To ensure continuation of high quality prehospital care and to maximize patient safety during the current national drug shortage.

SCOPE: This procedure must be implemented whenever a Clark County EMS provider agency is unable to maintain current par levels of a drug as described in the Southern Nevada Health District (SNHD) official drug inventories.

DURATION: This procedure shall remain in effect until the persistent national drug shortages of formulary drugs have been abated.

PROCEDURE:

I. Use of alternative drugs as directed by the Medical Advisory Board:
   A. The EMS provider agency must submit for approval the training program for alternative drug(s) to ems@snhdmail.org, including a copy of the relevant protocol(s).
   B. The EMS provider agency must submit proof of training to ems@snhdmail.org of at least 90% of responders before implementation of alternate drug(s).
   C. The EMS provider agency is responsible for notifying the Office of Emergency Medical Services & Trauma System (OEMSTS) and any other responding EMS provider agency of the start and stop date for alternative drug(s).

II. An EMS provider agency that cannot obtain a sufficient supply of a drug because of the national drug shortage may lower the par level as described in the SNHD official drug inventories to one therapeutic dose for an average adult male in Clark County. (Note: According to the CDC Behavioral Risk Factor Surveillance System Survey Questionnaires from 2003 to 2009, the average male adult weight in Clark County is 90 kg.)

III. An EMS provider agency that cannot obtain at least one therapeutic dose of a drug must provide documentation of a good-faith effort to obtain a required drug that includes the following:
   A. The contact information, including date of contact, for three sources through which the EMS provider agency attempted to obtain the drug. The sources can be distributors, other health care providers, or any other reseller that could reasonably be expected to be able to sell drugs to the provider agency.
   B. An attestation statement: “I attest that I have made a good-faith effort to obtain [name of drug] from the sources described herein for use by [EMS provider agency name], but was unable to obtain the minimum supply required in the SNHD official drug inventories. I will continue to attempt to obtain a complete complement of all required drugs.” The attestation statement must be signed and dated by the EMS provider agency’s medical director.

IV. If routine and/or random inspections occur during this period, a copy of the EMS provider agency’s good faith effort attestation statement and the letter documenting SNHD approval of an exception to EMS Regulation 1300.530 I.C.(3) must be readily available.

V. Under no circumstance will the documentation required by Section III.A. above be accepted retroactively after a notice of violation for a deficiency is given.