



County of San Diego

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COUNTY OF SAN DIEGO EMERGENCY MEDICAL SERVICES MEDICAL DIRECTOR'S GUIDANCE DURING MORPHINE SHORTAGE

Our Emergency Medical Services (EMS) system is challenged by national drug shortages, with morphine being the most pressing concern at this time. With the shared goal of continuing to provide appropriate pain management for our patients, we share the following guidance for 1) immediate actions, 2) strategies in process for near-term implementation, and 3) options for longer-term solutions.

Immediately Available Actions

- Concurrent with pursuing a menu of medication options for prehospital analgesia, please consider basic measures for pain management. Cold packs, elevation, and splinting all reduce pain in selected patients.
- If expired morphine is the only option available, please contact the base hospital for direction. After weighing risks and benefits, the base hospital physician may consider authorizing use of expired medication on a case-by-case basis. If expired morphine is used, please document this in the patient care report (PCR). Agencies shall be responsible for notifying the patient, per state and federal requirements.
- Unit stocking of morphine may be reduced to minimum levels. Also consider using reserve vehicles that stock morphine. If supply is completely exhausted, contact County EMS if you would like to request a temporary waiver to policy to allow an individual unit to remain in service.

Near-Term Strategies Currently Being Implemented

- We will be switching to fentanyl as the opioid pain medication of choice on July 1, 2018. At this month's Base Station Physicians' Committee (BSPC), a draft protocol will be presented for your input prior to finalization.
- While fentanyl will become our primary opioid analgesic, as both morphine and fentanyl are currently in shortage, we plan to authorize individual units to temporarily stock either

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morphine or fentanyl (but not both) in addition to non-opioid medications for pain treatment as soon as the fentanyl protocol is finalized (prior to July 1, 2018). Agencies should be prepared to implement ordering, controlled substance tracking, and training for fentanyl use.

- After discussion with state leaders, we have developed a formal “Local Optional Scope of Practice” (LOSOP) application to the State requesting authorization to use IV acetaminophen locally. Our goal is for the LOSOP proposal to be reviewed at the next EMS Medical Directors’ Association of California meeting (March 2018) and, if approved by the various steps in the state process, to implement IV acetaminophen use on or before July 1, 2018.
- Additionally, we are working with state leaders to propose consideration of a LOSOP application for ketamine.
 - The initial proposal is being drafted and will be finalized after we consider your input at this month’s BSPC. We have arranged for an expert speaker from the military to discuss both IV and IN routes of ketamine administration.
 - As we anticipate this proposal will take more time for state approval and it requires additional time for DEA authorization for prescribing, management of controlled substances, and training, it would likely be implemented some time in 2019.

Longer-Term Solutions

In light of the opioid crisis facing the nation, there is a significant push to implement use of non-opioid options for pain management. We are actively collaborating with California’s Emergency Medical Services Authority, the California EMS Commission, and the EMS Medical Directors’ Association of California to investigate long term solutions, including the possibility of broader policy changes.

County of San Diego EMS staff appreciate the challenges the field is facing with these ongoing national drug shortages. We are grateful for your collaboration and partnership in identifying potential solutions that are feasible for implementation within our complex system. We look forward to continuing to work together proactively.

Thank you for all you do to provide quality, timely, and evidence-based care to our residents and visitors.

Sincerely,



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