

Department of Public Safety

JESS L. ANDERSON Commissioner

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Utah EMS Medication Shortage Procedure: for emergency medication use up to six months beyond labeled expiration date.

Nationally, many emergency medications used by EMS continue to be in severe shortage. The following medications utilized by Utah EMS agencies are currently in short supply and are critical to emergency prehospital patient care:

adenosine	dopamine	ketorolac	naloxone
albuterol	epinephrine	lidocaine	nitroglycerin
amiodarone	etomidate	lorazepam	norepinephrine
atropine	fentanyl	magnesium	oxytocin
calcium	hydromorphone	midazolam	promethazine
dextrose	ketamine	morphine	sodium chloride

In order to ameliorate the current shortage and prevent patient harm resulting from inadequate supplies of emergency medications, the Utah State EMS Committee, with the support of the Utah Bureau of EMS, has approved this policy for the use of expired critical shortage medications.

The Utah State EMS Committee and the Bureau of EMS authorize the use of the above medications for up to six months after their posted expiration dates, with the following restrictions:

- 1. This authorization will be for a period of six months, expiring December 31, 2024, and will be reviewed every six months by the Bureau of EMS or renewal until shortages resolve.
- 2. Use of expired medications is at the discretion of the EMS agency and must be approved by the agency medical director.
- 3. Expired medications must be kept in reserve. EMS agencies must use all of their supply of a medication that has not passed the expiration date prior to administering expired medications.
- 4. When unexpired medications are obtained by the EMS agency, the use of expired medications will cease and the unexpired medications used preferentially.
- 5. Expired medications kept in reserve must be stored and maintained according to the manufacturer's instructions.
- 6. When possible, patients should give consent for use of expired medications
- 7. A record must be kept of the use of all expired medications, which will be submitted to the Bureau of EMS for review, upon request.