Lima Memorial
HEALTH SYSTEM

EMS OUTDATED MEDICATION RETURN SHEET

EMS Agency: _____

- Inpatient Pharmacy Hours: 7am – 3pm (Mon-Fri)
- Please complete this form to return outdated medications. This form is only to replace outdated meds
- Current drug license will be maintained in pharmacy for all squads that participate in drug exchange
- Please fax to LMH Pharmacy – 419.226.5138
- Expired medications MUST be received within 24 hours of exchange

Qty	Drug	Qty	Drug
	Activated Charcoal Susp 25gm, 4oz		Lidocaine HCL 2% 20mL Multi Dose Vial
	Adenosine (Adenocard) 6mg/2mL Inj		Lidocaine 2%, 100mg/5mL syringe
	Amiodarone (Cordarone) 150mg/3mL Inj		Ketorolac 30mg/mL Inj
	Aspirin Low Dose 81mg chewable tablet		Lidocaine 0.4% in D5W 500mL (2gm/500mL)
	Atropine Sulfate 1mg/10mL syringe		Magnesium Sulfate 5gm/10mL syringe
	Bumetanide (Bumex) 1mg/4ml Inj		Methylprednisolone (Solu-Medrol) 125mg Inj
	Calcium Chloride1gm/10mL syringe		Methylprednisolone (Solu-Medrol) 500mg Inj
	Benzocaine, Butam, and Tetra (Cetacaine) Spray 56gm		Methylprednisolone (Solu-Medrol) 1gm Inj
	Dextrose 25% (Infant) 2.5gm/10mL syringe		Metoprolol (Lopressor) 5mg/5ml Inj
	Dextrose 50% 25gm/50mL syringe		Nalbuphine (Nubain) 10mg/1mL Inj
	Diltiazem (Cardizem) 25mg/5mL Inj		Naloxone 0.4mg/1ml Inj
	Diltiazem (Cardizem) 30mg tablet		Naloxone (Narcan) 2mg/2mL syringe
	Diphenhydramine (Benadryl) 50mg/1mL Inj		Nitroglycerine (Nitrostat) 1/150GR (0.4mg) 25 tabs/bottle
	Dopamine (Intropin) 400mg/250mL Premix		Ondansetron (Zofran) 4mg/2mL Inj
	Epinephrine 1mg/1mL, 30mL Inj		Ondansetron ODT(Zofran ODT) 4mg tab
	Epinephrine 1mg/10mL syringe		Promethazine (Phenergan) 25mg/1mL Inj
	Epinephrine 1mg/1mL Inj		Rocuronium (Zemuron) 50 mg/5 mL vial
	Epinephrine (EpiPen Jr) auto injector – CHARGED		Sodium Bicarbonate 8.4% 50mEq/50mL syringe
	Epinephrine (EpiPen) auto injector - CHARGED		Succinylcholine(Quelicin) 200mg/10mL Inj vial
	Etomidate (Amidate)2mg/mL, 10mL Inj		Tetracaine 0.5% Ophthalmic 2mL bottle
	Flumazenil (Romazicon) 0.5mg/5ml Inj		Thiamine (Vitamin B-1) 200mg/2mL Inj
	Glucagon 1mg Inj		Tranexamic acid 1000mg/10mL Inj
	Glucose (Glutose) 15g tube		Verapamil 5mg/2mL Inj
			Water, Bacteriostatic for Inj 30mL Multi Dose Vial
	Controlled Substances (must include Waste Sheet)		**Fluids**
	Diazepam (Valium) 10mg/2mL Inj		Dextrose 5% 1000mL bag
	Fentanyl 100mcg/2mL Inj		Dextrose 10% 250ml bag
	Ketamine (Ketalar) 50mg/mL Inj		Sodium Chloride 0.9% 1000mL bag
	Lorazepam (Ativan) 2mg/mL Inj		Sodium Chloride 0.9% 1000mL irrigation bottle
	Midazolam (Versed) 10mg/2mL Inj		Sterile water 1000mL irrigation bottle
	Morphine Sulfate 10mg/mL Inj		
	Morphine Sulfate 2mg/mL Inj		**Respiratory Medications**
	Morphine Sulfate 4mg/mL Inj		Albuterol (Proventil) 0.083%/3mL (2.5mg/3mL) neb
			Albuterol / Ipratropium (Duoneb) 3-0.5mg/ 3mL neb
			Ipratropium bromide (Atrovent) 0.5mg/2.5mL neb
			Racepinephrine (S2) 2.25% 0.5mL neb

Receiving EMT-A or P: Name (print): _____ Date: _____
Signature: _____

Issuing RPh / CPhT: Name (print): _____ Date: _____
Signature: _____