

NOTE: The following applies to EMS agencies, EMS personnel, and EMS medical directors that possess and administer DEA Schedule II-V medications while engaged in EMS operations.

The DEA has released new EMS specific rules for obtaining, administering, and documenting Schedule II–V controlled substances. *The “Registering Emergency Medical Services Agencies Under the Protecting Patient Access to Emergency Medications Act of 2017”* rule goes into effect on **March 9, 2026**. EMS agency medical directors, system administrators, and personnel must familiarize themselves with these new DEA regulations to ensure continued compliance.

We will be holding a virtual conference call on Tuesday, March 10 from 3:00-4:00 PM MT. This call will be for ALS agency administrators and medical directors to discuss the new ePCR documentation requirements. Our State EMS Medical Director will also be available on the call to answer questions.

To ease new patient care reporting documentation requirements for EMS personnel administering Schedule II-V controlled medications, we have made a few small changes on the ePCR form in ImageTrend Elite.

- Identified the Schedule II-V controlled medications in the Elite ePCR formulary that will require the authorizing physician to be identified in the ePCR.
- Added eMedications.11 (Medication Authorization) and eMedication.12 (Medication Authorizing Physician) elements.
 - The **type of authorization** obtained, and **authorizing physician’s name** will need to be populated when documentation for administering a controlled substance is being added.
 - Selection of a Schedule II-V medication will auto-trigger the required fields to be filled out.
 - If the authorizing physician is not identified, a validation error will be triggered, and the provider will be alerted to complete the two new required fields, which should take less than 30 seconds.

The following screenshots display what personnel will encounter when charting the administration of a Schedule II-V controlled medication in ImageTrend Elite.

Medication

Date/Time Medication Administered:

Medication Administered Prior to this Units EMS Care:

Medication Crew (Healthcare Professionals) ID:

Role/Type of Person Administering Medication:

Medication Given:

Medication Administered Route:

Medication Dosage:

Medication Dosage Units:

Response to Medication:

Medication Complication:

Medication Comments:

Medication

Date/Time Medication Administered:

Medication Administered Prior to this Units EMS Care:

Medication Crew (Healthcare Professionals) ID:

Role/Type of Person Administering Medication:

Medication Given: ☒ Fentanyl

Medication Administered Route: ☒ Intravenous (IV)

Medication Dosage:

Medication Dosage Units: ☒ Micrograms (mcg)

Medication Authorization-DEA mandated when controlled substance administered: ☒ On-Line (Verbal Order)

Medication Authorizing Physician-DEA mandated when controlled substance administered:

EMS agencies using vendor charting software (such as ESO, Zoll, First Due, etc.) should contact their ePCR vendors to ensure they are compliant with the new DEA rule. We are also assisting with this by updating our schematron for the vendors to use in updating their ePCR forms.

For a detailed summary of the rule, see [New DEA Rule summary from NAEMSP](#). To view the entire rule, see [Registering Emergency Medical Services Agencies Under the Protecting Patient Access to Emergency Medications Act of 2017](#) or you can also see below for a few highlights.

- Added a dedicated EMS definitions section, including “emergency medical services agency,” emergency medical services professional,” “standing order,” “verbal order,” “medical director,” and “authorizing medical professional.”
- Created an EMS Agency Registration Model
- Clarified designated locations / stationhouses where EMS controlled medications are stored
- Updated security and storage requirements, including jump bags, for EMS
- Clarified restocking and transfer of Schedule II-V controlled medications for EMS
- Clarified required Schedule II-V controlled medication recordkeeping for EMS, including identifying the authorizing physician by name in the ePCR when Schedule II-V controlled medications are administered.

NOTE: This new DEA requirement does **NOT** mandate an on-line order from a physician to authorize administration of Schedule II-V controlled substances. Providers may continue current practices as outlined in agency medical protocols. The new DEA rule only requires a physician name to be associated with administration of a Schedule II-V medication administration. If authorized per protocol to administer these controlled substances, simply document the medical director’s name.

Also, the bureau does not interpret or enforce DEA regulations. Specific questions regarding the contents and requirements of these new regulations should be directed to the DEA.

If you have any questions regarding changes to Idaho ePCR forms, please contact Jim Adair at our office. James.Adair@dhw.idaho.gov or 208-334-4000.