MINISTRY OF HEALTH
SINGAPORE

HSA
Health Sciences Authority

MH 78:9 V4
HPRG (EB) 006:03/34024

MOH Circular No. 54/2025
HSA Circular No. 02/2025

29 August 2025

All Registered Medical Practitioners
All Providers licensed under the Healthcare Services Act

Dear Colleagues

RECLASSIFICATION OF ETOMIDATE AS A CONTROLLED DRUG (CD) UNDER THE MISUSE OF DRUGS ACT (MDA)

AIM

1 This circular serves to update on the measures to be implemented following the reclassification of etomidate as a Class C controlled drug (CD) under the Misuse of Drugs Act (MDA) and provides guidance on the reporting and handling of etomidate e-vaporiser offenders from 1 September 2025.

BACKGROUND

2 The Ministry of Health (MOH) and Health Sciences Authority (HSA) have observed an increase in the number of cases involving use of etomidate-laced e-vaporisers in Singapore. To curb this growing trend, the government will be listing etomidate and its eight analogues as a Class C CD under the MDA for a period of six months from 1 September 2025, while we review the longer-term legislative measure to tackle this issue in the longer term.

3 To enable medical use of therapeutic products containing etomidate for anaesthetic purposes, etomidate will be listed as a Second Schedule CD under the Misuse of Drugs Regulations (MDR). Currently, ETOMIDATE-LIPURO INJECTION 20 mg/10 ml (product registration number SIN08849P) is the only registered etomidate therapeutic product in Singapore. In line with the reclassification of etomidate as a CD, healthcare institutions which had purchased etomidate for its use will be required to step up the handling, storage, documentation and record-keeping requirements for etomidate to comply with the MDR. All institutions should implement the necessary measures on secured storage and transfers, accountable clinical usage, abuse case management and reporting. You may adopt existing in-house procedures and workflows for existing CDs such as morphine, fentanyl and oxycodone.

4 To avoid any supply chain disruptions for etomidate, HSA has worked with the respective etomidate distributors to ensure that the relevant CD licensing and workflows are in place.

REQUIREMENTS UNDER MDA TO BE IMPLEMENTED

Secured storage and transfers within healthcare institutions and clinics

5 All etomidate-containing products must be **stored securely under lock and key** (as required under regulation 20 of the MDR). Equivalent secured systems with an access log such as validated systems using biometrics, fingerprint, secured access code, facial recognition, etc. are acceptable. Interdepartmental transfers can be facilitated using standardised requisition forms to document the chain of custody including origin, destination, date and time, quantity and personnel signatures. Regular stock reconciliation is recommended. Any wastage or breakage should be reported as per the institution's in-house procedure.

Clinical usage and documentation

6 Prescribing and clinical usage of etomidate should follow existing in-house institutional procedures similar to that for other CDs (as required under regulations 10 to 13 of the MDR). Purchases of etomidate should be accompanied by a written order specifying the product details, quantity, intended purpose, and signed off by a pharmacist or doctor. Pharmacists or doctors should acknowledge the receipt of purchases upon delivery. Records of purchase, receipt, transfers within departments, clinical usage should be retained.

7 A **CD register** recording all transactions in chronological sequence including dates, batch numbers, quantities and personnel involved should be maintained (as required under regulations 14, 15 and 17 of the MDR). Any unused, expired CD and wastages should be disposed of under the witness of HSA inspectors (as required under regulation 28 of the MDR). Institutions can book an appointment online to schedule the CD disposal in advance:

https://www.booking.gov.sg/public/services/Vk6mkEeA/availability?anonymous=true

Reporting and handling of suspected etomidate abusers

8 Following the reclassification of etomidate as a CD, medical practitioners will be required (under regulation 19 of the MDR) to **report suspected etomidate e-vaporiser offenders** to the Director, Central Narcotics Bureau ("CNB") and the Director-General of Health (DGH), MOH within 7 days of attending to the patient. Suspected etomidate e-vaporiser offenders would be individuals who present to healthcare institutions or clinics in possession of any e-vaporisers or who admit to consuming e-vaporisers, and who show any of the following signs and symptoms suggestive of etomidate intoxication such as unsteady gait, confusion or slurred speech (see Annex for more details).

9 Reporting should be made through the CNB's eNOTIF portal (https://www.eservices.cnb.gov.sg/enotif/). This reporting workflow is similar as that for the reporting of current suspected drug addicts. Healthcare institutions and clinics will be required to inform all your registered medical practitioners on the mandatory reporting requirements for suspected etomidate e-vaporiser offenders and put in place the necessary workflows to facilitate such reporting.

10 Specifically for our public healthcare institutions, suspected etomidate e-vaporiser offenders may also be brought to the Emergency departments (EDs) by Singapore Police Force (SPF) officers or Singapore Civil Defence Force (SCDF) ambulances. For some of these cases, the e-vaporisers may be handed over to the hospital staff with the offender. Hospital staff should retain and safekeep the e-vaporisers, document the handing and taking over in the medical notes and immediately notify HSA at Tel: 6031 3139. Suspected etomidate e-vaporiser offenders may also be brought to the EDs by their family members or friends, and in such instances, hospital staff should similarly retain and safekeep the e-vaporisers and immediately notify HSA at Tel: 6031 3139. The HSA officer will advise on the appropriate follow-up actions. There is no requirement to notify HSA if the patient is not in possession of, or does not admit to, the use of any e-vaporiser.

11 Medical practitioners are not obligated to conduct a urine test on the patient solely to ascertain the presence of etomidate. The decision to perform a urine test on the patient should be driven solely by the patient's clinical needs and management. However, should a urine toxicology be performed as part of clinical investigations and the results come back positive for etomidate, medical practitioners will be required to report on eNOTIF and notify HSA thereafter.

REPORTING OF ETOMIDATE ADVERSE REACTIONS

12 In addition, medical practitioners are requested to record all suspected or confirmed etomidate e-vaporiser offender cases in your Electronic Medical Records (EMR) system. The procedure is as follows:

a) For systems that use SNOMED Concept ID (applicable to most GP CMSes)
Etomidate adverse reaction (disorder) - 292164000

b) For systems that use SNOMED Description ID (applicable to Singhealth SCM EMR):
Etomidate adverse reaction - 686917012 or 432288012 or
Adverse reaction to etomidate – 2164319011

c) For NGEMR (Using NGEMR Ext ID):
Adverse Effect of Etomidate – 1308723

If the above SNOMED codes are not available, please report the adverse event using HSA's adverse event reporting forms:

d) Online reporting form:

https://go.gov.sg/hsa-adverse-event-online-form

e) Mobile friendly FormSG reporting form

https://go.gov.sg/hsa-adverse-reporting-healthcare-professional

Please indicate “Etomidate in vape” in the “Suspected Product” section.

SUPPORT TO QUIT

13 Etomidate e-vaporiser users may also present at healthcare institutions and clinics to seek medical advice for their addiction, following the government’s call for such individuals to step forward for help. Should your institution encounter such individuals who voluntarily come to seek help, hospital or clinic staff may refer patients to the following website for information on the agencies that provide the QuitVape programme to support individuals to quit vaping:

https://go.gov.sg/stopvaping-avenues-for-help

14 For such individuals who voluntarily step forward to seek professional help, the reporting requirement to DGH and CNB (mentioned in paragraph 9 above) applies only for registered medical practitioners. There is no need to notify or report to HSA for such cases.

HOTLINES

15 Should you require any assistance in handling e-vaporiser cases, or if there are any queries or concerns, you may contact the 24/7 hotline set up for the healthcare institutions at Tel: 6031 3139.

16 If you detect any illegal possession of e-vaporisers, you can contact HSA to support our enforcement efforts through two convenient channels:

- Submit information through our online reporting form: www.go.gov.sg/reportvape or scan the QR code:

https://go.gov.sg/reportvape

- Call the vape reporting hotline at Tel: 6684 2036 or 6684 2037, operational daily, including weekends and public holidays, from 9am to 9pm

17 Please note that this circular supersedes and replaces the circular on Provision of Information on the Use and Adverse Effects of Etomidate in E-vaporisers Pursuant to Section 36(1) of the Healthcare Services Act 2020 - (MOH Circular No. 39/2025, HSA Circular No. 01/2025).

18 Any further details on the longer-term legislative measures for the use of etomidate in e-vaporisers will be provided at a later stage.

Yours faithfully

Professor Kenneth Mak
Director-General of Health
Ministry of Health, Singapore

Adj Prof (Dr) Raymond Chua
Chief Executive Officer
Health Sciences Authority

Annex

SIGNS AND SYMPTOMS SUGGESTIVE OF ETOMIDATE INTOXICATION

Central Nervous System Effects	
• Sedation or loss of consciousness • Slurred speech • Myoclonus (involuntary muscle jerks	• Dizziness, confusion • Motor incoordination • Seizures
Respiratory Effects	
• Respiratory depression or apnoea • Coughing or choking from inhaled irritants	• Bronchospasm or laryngospasm • Hypoxia or cyanosis
Cardiovascular Effects	
• Hypotension • Bradycardia	• Arrhythmias (especially if hypoxia develops
Pulmonary / Chemical Injury	
• Chemical pneumonitis or acute lung injury from inhalation of non-volatile compounds or additives used in e-cigarette liquid • Thermal injury to airways	