

Emergency Medical Services Program Policies – Procedures – Protocols

Naloxone Use by Law Enforcement (1016.00)

I. Purpose

- a. To describe criteria for law enforcement officer administration of intranasal (IN) Naloxone Hydrochloride (Naloxone) in cases of suspected acute opioid overdose.
- b. To provide medical direction and Naloxone administration parameters for (approved optional scope) for law enforcement officers in Kern County.
- c. This policy is only for the use of Naloxone. If the agency would like to use additional medications or AED's they will need to be compliant with the Kern County EMS Program's Public Safety First Aid Policy.

II. Application

Agencies wishing to apply for the Naloxone use by law enforcement policy must submit the following information:

- a. A letter of intent to be part of the Naloxone use by law enforcement program.
- b. Information on the type, brand, and concentration of the Narcan going to be carried.
- c. All training material that will be provided to staff (PowerPoints, handouts, etc.).
- d. Copy of training records when agency has been approved and started training staff.

III. Procedure

a. Indication:

Overdose: A patient as a result of an individual's intentional/accidental exposure to an excessive or dangerous dose of a pharmacological substance that is:

- i. unconscious or has an acutely altered mental status patient; and
- ii. has depressed respiratory efforts (respiratory rate < 8/min).

b. Contraindication:

Allergy to Naloxone

c. Administration:

- i. Ensure EMS has been activated.
- ii. Maintain standard blood and body fluid precautions, use personal protective equipment.

- iii. Check patient/victim for responsiveness.
- iv. Open the airway using Basic Life Support techniques.
- v. Perform rescue breathing, if indicated. Perform CPR if pulseless.
- vi. Administer IN Naloxone:
 - 1. Preload Naloxone, administer 4 mg IN. If no improvement, consider repeat dose in 2-3 minutes if no response to initial dose (total of 2 doses) or
 - 2. Atomizer Naloxone administer 2 mg IN (administer ½ of dose to each nostril). Consider repeat dose in 2-3 minutes if no response to initial dose. A third dose may be given if there is no response to the second dose, for a total of three (3) doses.
- vii. If response to naloxone and patient is possibly a chronic opiate user, prepare for possible narcotic reversal behavior or withdrawal symptoms (vomiting and agitation).
- viii. Notify transporting EMS personnel of Naloxone administration.

IV. Training

- a. Training shall be done as outlined in California Code of Regulations, Title 22, Division 9, Chapter 1.5. First Aid and CPR Standards and Training for Public Safety Personnel, including the optional skills administration of IN Naloxone for suspected narcotic overdose.
- b. The Training Officer/Coordinator or other designated individual, shall be responsible for the following:
 - i. Ensuring the Naloxone is current and not expired.
 - ii. Proper and efficient deployment of Nasal Naloxone for use.
 - iii. Replacement of any Naloxone that is damaged, unusable, expired or deployed.
 - iv. Ensuring all personnel that will be using Nasal Naloxone has received appropriate training.
 - v. Replacing the Naloxone and ensuring that there is an adequate supply available for use.
 - vi. Keep record of all documented use, restocking, damaged, and unusable or expired Naloxone.
 - vii. Provide a copy of the training roster to Kern County EMS Program.

V. Leaving Naloxone

Law Enforcement may stock naloxone intra-nasal delivery devices intended for layperson use in the event of an opioid overdose. These devices may be obtained through the following mechanisms:

- a. The Narcan Distribution Program (NDP) by completing an application to the DHCS to participate in the NDP program (free of charge)
<https://www.dhcs.ca.gov/individuals/Documents/NDP-Application.pdf>
- b. Purchasing the naloxone intra-nasal delivery devices intended for layperson use through their normal supply chain.

Law Enforcement Officers, under the direction of the Kern County EMS Medical Director, are authorized to leave naloxone with an individual or a family member of an individual that are at high risk of an unintentional overdose.

If the individual is currently overdosed, or the officer used naloxone for an overdosed patient, EMS must be responded to the scene to take over patient care. If the patient meets EMS criteria to not be transported, as determined by the EMS crew with appropriate documentation and a signed AMA, the officer or EMS crew may leave naloxone on scene if appropriate.

VI. Reporting

- a. EMS providers shall document the “prior to arrival” administration of Naloxone by law enforcement personnel.
- b. Participating law enforcement agencies shall report all cases of Naloxone administration to Kern County EMS Program within forty-eight (48) hours using the Administration of Naloxone reporting form (Appendix A).
- c. When Naloxone is left on scene a Naloxone Leave Behind Form (Appendix B) must be filled out and submitted to Kern County EMS within forty-eight (48) hours.

APPENDIX A – ADMINISTRATION OF NALOXONE FORM
APPENDIX B – NALOXONE LEAVE BEHIND FORM



ADMINISTRATION OF NALOXONE FORM

DATE AND TIME OF ADMINISTRATION: _____

DEPARTMENT NAME AND CONTACT INFORMATION:

LOCATION OF EVENT:

AMOUNT OF NALOXONE ADMINISTERED: _____

PATIENT RESPONSE TO NALOXONE ADMINISTRATION:

NAME: _____ **SIGNATURE:** _____

Please fax completed form to Kern County EMS Program 661-868-1204



NALOXONE LEAVE BEHIND FORM

DATE: _____

BRAND OF NALOXONE: _____

LOT NUMBER: _____

NAME: _____

CONTACT NUMBER: _____

INSTRUCTION HANDOUT LEFT AND TRAINING PROVIDED?

YES ____ **NO** ____ **IF NOT WHY?** _____

Please fax completed form to Kern County EMS Program 661-868-1204