

PROCEDURE #214: Naloxone for Public Safety First Responders

I. PURPOSE

- A. To establish procedures as defined by Title 22, Division 9, Chapter 1.5 of the California code of Regulations (CCR), for approval, requirements and responsibilities of Public Safety First Responders to use Naloxone.

II. SCOPE

- A. This policy applies to law enforcement agencies or departments that employ peace officers, and have been approved by the County of SLO Emergency Medical Services Agency (EMS Agency) to carry and deploy Naloxone in cases of suspected opioid overdose as part of a comprehensive opioid toxicity and airway/circulatory protocol.

III. DEFINITIONS

- A. Suspected opioid overdose:
 1. A circumstance suspicious of illegal or prescription use of opioids, AND
 2. Victim is poorly responsive and respiratory rate appears slow or shallow, or victim is unresponsive and not breathing.

IV. PROCEDURE

- A. Victim has poor respiratory rate and decreased level of consciousness:
 1. Identify victim of a suspected opioid overdose.
 2. Ensure EMS has been activated.
 3. Maintain standard blood and body fluid precautions, use personal protective equipment.
 4. Stimulate the patient if initially unresponsive using sternal rub technique.
 5. Open airway using Basic Life Support techniques.
 6. Perform rescue breathing for poor respiratory rate using bag valve mask, or protective face shield.
 7. Administer intranasal Naloxone (2mg Kit):
 - Assemble 2mg syringe and atomizer
 - Administer 1mg into one nostril (half dose)
 - Re-assess patient with sternal rub
 - If patient has no response, administer remaining 1mg into the other nostril
 8. Administer intranasal Naloxone (4mg Kit):
 - Assemble 4mg Kit

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- Administer 4mg into one nostril
 - Re-assess patient with sternal rub
 - If patient has no response after 3-5 minutes, if available, consider administering another 4mg into other nostril
9. If the patient responds to Naloxone, prepare for possible vomiting or irritability by placing patient on their side.
 - If the patient does not respond to Naloxone, continue rescue breathing until EMS arrival.
 10. Notify EMS of Naloxone administration.
 11. Complete EMS Agency Naloxone usage form.

B. Victim is not breathing and is unresponsive:

1. Identify victim of a suspected opioid overdose.
2. Ensure EMS has been activated.
3. Maintain standard blood and body fluid precautions, use personal protective equipment.
4. Stimulate the patient if initially unresponsive using sternal rub technique.
5. Open airway using Basic Life Support techniques.
6. Begin continuous CPR, and apply AED when one becomes available.
7. When possible, administer intranasal Naloxone without interrupting CPR:
 - Assemble 2/4mg syringe and atomizer, if available
 - Administer 1mg into one nostril (half dose); if 4mg kit, administer 4mg into one nostril
 - Re-assess patient with sternal rub
 - If patient has no response, administer remaining 1mg into other nostril
 - If using the 4mg kit, if no response after 3-5 minutes, if available, consider administering another 4mg into other nostril
8. If the patient responds to Naloxone, prepare for possible vomiting or irritability by placing patient on their side.
 - If the patient does not respond to Naloxone, continue CPR until EMS arrival.
9. Notify EMS of Naloxone administration.
10. Complete EMS Agency Naloxone usage form.

V. AUTHORITY

- Title 22, California Code of Regulations, Division 9, Chapter 1.5