



Naloxone Policy Template

Disclaimer: The administration of Naloxone by a layperson during an overdose emergency is protected under Good Samaritan laws in most states. These laws provide legal immunity to individuals who seek emergency medical assistance or administer Naloxone in good faith to someone experiencing an opioid overdose. However, it is important to understand that the use of Naloxone is not a substitute for emergency medical care and individuals who administer Naloxone should still seek professional medical help as soon as possible. Naloxone may only temporarily reverse the effects of an opioid overdose, and additional doses may be required. The administration of Naloxone should be done carefully and in accordance with the instructions provided. If you are unsure of how to administer Naloxone, seek guidance from a healthcare professional or emergency services personnel.

Purpose

It is the intent of _____ to prevent opioid-related deaths on companies' premises. These established guidelines and regulations will govern the utilization of Naloxone used by _____ within the organization. The objective is to treat and reduce the injury and fatality from opiate overdoses.

Naloxone is a medication that can reverse an overdose caused by an opioid. When administered during an overdose, naloxone blocks the effects of opioids in order to prevent death. Naloxone is safe to use and has no potential for abuse. It is easy to administer, non-narcotic and non-addicting prescription medication. Naloxone (also known as NARCAN) is packaged with two devices, each providing a 4mg/ 1ml dose.

Policy

_____ will thoroughly train and equip _____ so they may administer Naloxone to any person suspected of experiencing an opioid-related overdose. Assure that all _____ stock Naloxone as an opioid antagonist to treat a case of suspected opioid overdose on companies' premises. It is the policy of _____ for trained staff to administer in accordance with state law to persons suffering from opioid overdose symptoms at the earliest possible time to minimize chances of a fatality. Any time Naloxone is administered, the Naloxone Report form must be completed and submitted to the _____ department for review and recordkeeping.

Training

_____ will receive an initial training that will include an overview of the opioid epidemic; the causes and signs of an overdose and how to use naloxone to save a life. The training will cover what to expect when administering Naloxone, as well as how patients may respond, and appropriate aftercare including the requirement for

emergency services after administration. The training will also address Good Samaritan Laws and how to eliminate the risk of an overdose through the use of alternative approaches to pain management. The training will include a brief pre- and post- survey to assess knowledge enhancement and verify the effectiveness of the training. It is important to have First Aid/ CPR trained individuals present onsite where Naloxone is provided. These individuals should, wherever feasible, be involved in the administration of Naloxone and the aftercare for affected individuals. Naloxone training will be provided in conjunction with First Aid/ CPR/ AED training and refreshed on the same interval.

The training facilitator will share with the attendees the organization's current policies and procedures and where the training participants can locate a Naloxone supply for use within their workplace. Continuing education will be offered as a refresher to this topic

_____.

Procedures

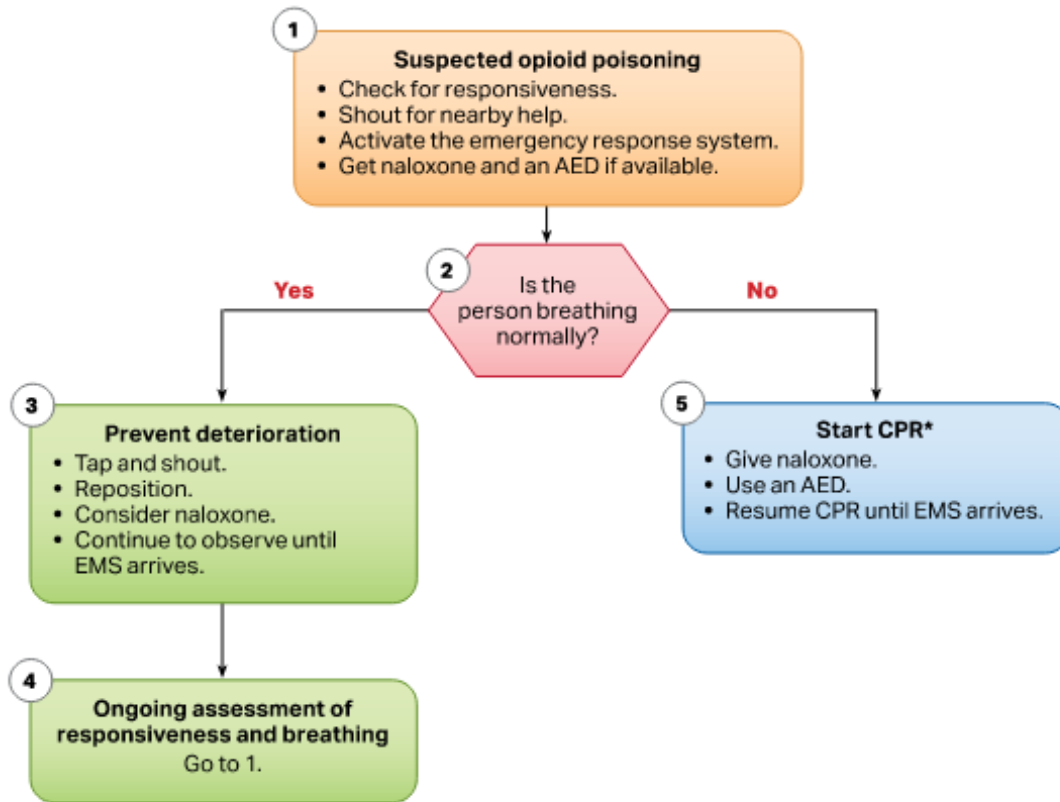
Naloxone will be distributed as Narcan nasal spray in an original, sealed manufacturers box. The box contains two devices each with one dose. The box will contain administration instructions.

The Naloxone Nasal spray will be kept in a zippered bag marked "overdose response kit" and the zipper will be sealed with a tamper evident tie. These overdose response kits will be located _____.

If an employee with training encounters a person who may be suffering from an apparent opioid overdose, that employee shall follow the protocols provided with the AHA training. Here is a summary of the response along with algorithm:

- If the person is responding and breathing, phone 911, get the AED and overdose kit, if available.
- If the person is not responding but breathing, phone 911, tap and shout, reposition and consider giving a dose of Naloxone
- If the person is not responding and not breathing or is only gasping, phone 911, start CPR, give a dose of Naloxone, and use an AED.
- Refer to American Heart Association (AHA) algorithm below:

Opioid-Associated Emergency for Lay Responders Algorithm



*For adult and adolescent victims, responders should perform compressions and rescue breaths for opioid-associated emergencies if they are trained and perform Hands-Only CPR if not trained to perform rescue breaths. For infants and children, CPR should include compressions with rescue breaths.

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After administering Naloxone, the responding employee will complete the Naloxone use report form (see attached) and provide the form to _____.

In order to ensure safe and effective access to Naloxone, _____ will ensure a proper inspection and replacement schedule that mirrors that of the AED maintenance schedule. _____ is responsible for weekly checks of the overdose response kits, ensuring they are stored in a climate-controlled environment (do not allow to freeze or store above 104° Fahrenheit) and replacements are on hand in a timely manner should a kit get used or expire.

Attachment A

Naloxone Nasal Spray Use Report

Date: _____ Time response was initiated: _____ Ended: _____

Project Name: _____

Address: _____

Name(s) of person administering Naloxone: _____

Name of person Naloxone was issued to: _____ Age: _____ Gender: _____

Signs of Overdose:	
<input type="checkbox"/>	Unresponsive
<input type="checkbox"/>	Blue lips, fingertips
<input type="checkbox"/>	Body very limp
<input type="checkbox"/>	Face very pale

Breathing:	
<input type="checkbox"/>	Slow
<input type="checkbox"/>	Breathing irregular
<input type="checkbox"/>	Not breathing

Pulse:	
<input type="checkbox"/>	Slow pulse
<input type="checkbox"/>	Erratic pulse
<input type="checkbox"/>	No pulse

Other: _____

Dosage: How many doses of Naloxone nasal spray were administered to the person?

<input type="checkbox"/>	1	<input type="checkbox"/>	2	<input type="checkbox"/>	More (explain):	_____
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Did the person respond to the Naloxone?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Other:	_____
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What was the disposition of the person after the Naloxone was administered?

<input type="checkbox"/>	Aggressive	<input type="checkbox"/>	Combative	<input type="checkbox"/>	Disorientated	<input type="checkbox"/>	Vomiting
<input type="checkbox"/>	Other: _____						

Was 911 called?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Did the EMS, Fire or Police arrive first on scene?

<input type="checkbox"/>	EMS	<input type="checkbox"/>	Fire	<input type="checkbox"/>	Police
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What was the response time? _____ minutes

Were additional doses of Naloxone administered?

<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	By what agency?	<input type="checkbox"/>	EMS	<input type="checkbox"/>	Fire	<input type="checkbox"/>	Police
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Was the person transferred to a hospital?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Explain why (if known) _____
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Name of individual completing this form