



## DEPLOYMENT OF NARCAN® NASAL SPRAY (NALOXONE) FOR OPIOID OVERDOSES

### PURPOSE

The purpose of this Training Bulletin is to supplement the training each officer receives from LAFD regarding the safety and policy issues in the administration of Naloxone, the generic name for "Narcan."

Port Police officers will be appropriately trained and equipped to assist with the medical emergency of an opioid overdose.

### DEFINITIONS

*Opioids* - A class of drugs derived naturally from the poppy plant or from synthetically produced chemicals. Opioids bind to specific receptors in the brain, spinal cord, and gastrointestinal tract that can affect a person's mood, blood pressure, breathing, and pain sensations.

*Opioid Overdose* - A serious medical condition that may lead to decreased or loss of consciousness, respiratory depression, coma, or death resulting from the consumption or use of an opioid, or another substance with which an opioid was combined.

*Naloxone* - Commonly known by the brand name Narcan, Naloxone is a drug that counteracts the effects of opioid overdose. The drug restores an overdose victim's ability to breath, frequently allowing him or her to survive a potentially fatal overdose.

### BACKGROUND

According to the Centers for Disease Control and Prevention, "the United States is experiencing an epidemic of drug overdose (poisoning) deaths. Since 2000, the rate of deaths from drug overdoses has increased 137%, including a 200% increase in the rate of overdose deaths involving opioids." Narcan Nasal Spray is an opioid antagonist designed to reverse the respiratory depression caused by an overdose of opioids and has been successfully used to save lives.

### PROCEDURES

All officers will check out and return the nasal spray to the Kit Room on a daily basis. Case by case exceptions may be made depending on availability of the product and assignments such as a drug task force where it is not practical to adhere to the daily check out procedure. Each Department member shall check their issued Narcan Nasal Spray daily to ensure that it has not expired. An expired nasal spray shall be returned to the Kit Room and notification made to the Patrol Watch Commander for proper disposal and replacement.

It is recommended that Department members keep their issued Narcan Nasal Spray with their Department issued Cardio Pulmonary Resuscitation (CPR)/First Aid kits after checking it out. Care should be taken to ensure the applicators are not exposed to excessive heat or light to protect the potency of the nasal spray.

### **SYMPTOMOLOGY**

The signs of an opioid overdose may include, but are not limited to loss of consciousness; constricted (pinpoint) pupils; unresponsive to outside verbal or physical stimulus; awake, but unable to speak; breathing is very slow and shallow, irregular, or has stopped; choking sounds, or a snore-like gurgling noise; vomiting; body is very limp; face is very pale or clammy; fingernails and lips turn blue or purplish black; and/or pulse (heartbeat) is slow, irregular, or not present.

**If the patient is not breathing and is unresponsive, FIRST request Medical Aid and begin CPR** then administer Narcan Nasal Spray when possible. If available, personal protective equipment (CPR mask, gloves, face shield, etc.) should be utilized when administering CPR. If you suspect the patient is unconscious due to an opioid overdose, please refer to the Narcan Nasal Spray quick start guide located inside of the OPIOID OVERDOSE KIT. An over the air broadcast to Communications shall be made by the officer to capture the time the Narcan was administered.

The Narcan Nasal Spray may take a few minutes for the patient's body to absorb and react to the medication. If the person does not respond to the nasal spray within three to five minutes, a secondary dose of nasal spray may be required. Prior to administering a second dose of Narcan Nasal Spray, Department personnel shall ensure fire/paramedic personnel are responding to the scene. Each nasal spray applicator contains one full dose.

Symptoms of withdrawal may include nausea/vomiting, cardiac arrest, nose bleed or, in rare cases, aggressive behavior. Officers should be prepared to disengage and create distance in order to minimize the potential of injury to themselves and to minimize the potential need for an escalation of police actions.

**Narcan Nasal Spray shall only be administered on adults and children over one year of age.** The nasal spray will only work on persons who have overdosed on opioid-related drugs. The nasal spray does not have any significant side effects if the cause of unconsciousness is not opioid-related.

Department personnel shall defer the authority for medical treatment and transportation to paramedic and ambulance personnel once they arrive on-scene.

Department personnel should ensure the used Narcan Nasal Spray device is properly disposed of by surrendering it to on-scene fire/paramedic/ambulance personnel, or by placing it in a secure disposal container.

## **REPORTING AN INCIDENT**

After Narcan Nasal Spray has been administered to a patient, whether successful or not, Department personnel shall:

- Verbally advise fire/paramedic personnel who administered the initial Narcan spray(s), what time Narcan Nasal Spray(s) were administered and any change in the patient's condition;
- Complete the Port Police Narcan **Use Report MEDICAL INFORMATION CARD** for providing to the fire/paramedic or medical authority taking over care (4/2-03.68);
- Complete the **Port Police Narcan Use Report form** (4/2-03.67);
- If necessary, such as in cases of death, attempted suicide, suspect in a crime, reportable force used, etc., complete the appropriate report; and
- Submit all paperwork to the watch sergeant for review/approval.

## **LEGAL CONSIDERATIONS**

### Use of Force.

When handling opioid overdose calls, they should be viewed as a medical emergency response. Officers, however, are reminded to always be cognizant of officer safety in any situation. Officers should ensure they take precautions for their own safety when approaching any scene. This includes risks presented by the patient and any external risks from other persons or circumstances. These patients will be in respiratory distress. Placing them in handcuffs or other restraints will likely reduce the effectiveness of CPR and interfere with recovery positions. Handcuffs will only be applied consistent with Department policy. Officers should remove dangerous objects from the proximity of the patient and be prepared to disengage and create distance between you in order to respond to any threat posed at that time.

Please refer to Port Police Policy 470 – Medical Aid and Response deals with medical responses in general opioid overdose and application of Naloxone (Narcan).

### References

NARCAN website ([www.narcan.com](http://www.narcan.com))

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