Statewide Standard Treatment Protocol

Peace Officer Naloxone (Narcan®) Standing Order



Effective: November 1, 2022

Approved by the EMS Medical Directors: April 13, 2022

Approved by the Advanced Life Support Subcommittee of the Board of Medical License and Discipline: May 18, 2022

Approved by the Board of Medical Licensure and Discipline: June 7, 2022

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Public Safety Personnel Naloxone (Narcan) Standing Order

Available to Peace Officer Agencies that Select to Participate on Written Approval of the State EMS Director and State EMS Medical Director

INDICATIONS: Respiratory distress as evidenced with slow respirations or no breathing (apnea). This protocol will allow Peace Officers to treat patients with a history based on bystanders, provider's prior knowledge of the patient, or suspicion of potential narcotic overdose as evidenced by nearby medications or drug paraphernalia.

- Perform scene survey.
- Scene Safety
- Observe body substance isolation (BSI) precautions. (Follow your agency's infection control policy and Infection Control Protocol)
- Observe patient position and surroundings that have contributed to the injury.
- Check for level of consciousness
- Initiate or verify that there is an EMS response
- Begin CPR if appropriate
- Be alert to signs of trauma on physical exam.
- Manage cervical spine as needed.
- Administer 2 mg to 4 mg Naloxone (Narcan[®]) to provide for a patient, selfmaintained airway and adequate respirations.
- If no improvement in the patient's respiratory status after four (4) minutes, an additional 2 mg may be given. **Maximum dose of 4 mg on this protocol.**
- **Caution:** patients with near complete reversal of a narcotic overdose <u>may</u> <u>become very agitated and combative.</u>
- Continue to manage the patient's airway until they are breathing adequately and are able to protect their airway from aspirating vomitus.
- Do not delay safe transport to await results of treatment.
- Give a verbal report to responding Emergency Medical Service providers.

Medication and Administration Device:

NALOXONE (NARCAN®)

Description: Naloxone is an opioid antagonist.

Pharmacology: Naloxone is a competitive narcotic antagonist, which reverses all effects of opioids (i.e. morphine), such as respiratory depression and central and peripheral nervous system effects.

Indications: Naloxone is indicated to reverse respiratory and central nervous system depression induced by opioids.

Onset/Duration: The onset of action is within a few minutes following an intravenous dose, whereas intramuscular and endotracheal/intranasal administration results in a slower onset of action. The duration of action is approximately 30-60 minutes.

Dosage and Routes of Administration: Administer a dose of at least 2 mg and up to 4 mg intra-nasally of naloxone (Narcan®) to provide for a patent, self-maintained airway and adequate respirations. (A 4 mg dose may be given as a single 4 mg spray in one nostril or two 2 mg intranasal doses).

2 mg intranasal naloxone consists of a syringe with an atomizer which is assembled and administered in two (2) half doses in each nostril.

4 mg intranasal naloxone (Narcan®) is a nasal spray administered in a single dose in one (1) nostril.

Maximum dose of 4 mg on this protocol.

Storage: Store at 20-25°C (68-77°). Protect from light.