



Applies to: All Agency Staff

POLICY

Issued: 8/1/18

Revised:

Revision being considered:

PURPOSE: Athens County Children Services supports established guidelines governing the utilization of Naloxone (Narcan) used by the agency. This policy establishes the ability for trained staff or interns to use Naloxone for life saving purposes.

OBJECTIVE: Policy 10.12 establishes a tool that can be used on an individual that has an emergency overdose situation caused by an opioid drug (heroin or prescription pain medication). When used Naloxone can reduce the possibility of a fatality from an opiate overdose.

DEFINITION: Naloxone (also known as Narcan) is a medication that can reverse an overdose caused by an opioid drug (heroin or prescription pain medications). When administered during an overdose, Naloxone blocks the effects of opioids on the brain and quickly restores breathing. Naloxone has been used safely by emergency medical professionals for decades and has only this one critical function: to reverse the effects of opioids in order to prevent overdose death. If Naloxone is given to a person who is not experiencing an opioid overdose, it is harmless. If Naloxone is administered to a person who is dependent on opioids, it will produce withdrawal symptoms. Withdrawal, although uncomfortable, is not life-threatening. Naloxone does not reverse overdoses that are caused by non-opioid drugs, such as cocaine, benzodiazepines (e.g. Xanax, Klonopin and Valium), methamphetamines, or alcohol. – Ref. Ohio Department of Health

It should be noted that Naloxone is only a tool to help save a life in an opioid overdose, further federal, state and local resources are required to combat the opioid epidemic.

GUIDELINES

Lawful administration of Naloxone is governed by Ohio Revised Code 2925.61.

While you may not be required to obtain licensure to purchase Naloxone, the State of Ohio Board of Pharmacy strongly recommends the implementation of the following safeguards to ensure the safe use of Naloxone in the event of an opioid overdose:

STORAGE AND TEMPERATURE CONTROL: Naloxone should be stored at room temperature and away from light. According to the manufacturer, the drug must be kept out of direct light and at room temperature (between 68 and 77 degrees Fahrenheit). Please be aware that it should not be left in a car



for extended periods of time and should not be subjected to extreme heat or cold (it will freeze) as it may impact the effectiveness of the medication.

SHELF LIFE: The shelf life of Naloxone is approximately two years. All doses should be checked periodically to ensure that the Naloxone is not adulterated. A dose of Naloxone is considered adulterated when:

- A) It is beyond the manufacturer's or distributor's expiration date; and/or
- B) There are signs of discoloration or particulate matter in the Naloxone solution.

In order to keep track of expiration dates, agencies should keep careful records of when and to whom the medication was dispensed.

TRAINING: The State of Ohio Board of Pharmacy strongly encourages regular trainings on the administration of Naloxone in the event of an apparent opioid overdose. These training should consist of the following standard overdose response components:

- A) Recognizing the signs and symptoms of overdose
- B) Distinguishing between different types of overdose
- C) Performing rescue breathing

PROCEDURES

Athens County Children Services utilizes the Athens City-County Health Department and Athens County Emergency Management System for Naloxone supplies and/or training. Supplies are limited, therefore ACCS will obtain supplies through other means as needed.

TRAINING: The Human Resource Manager will organize training for staff and interns that desire to be an Approved Naloxone Carrier. It is NOT mandated that all staff or interns be an Approved Naloxone Carrier. Individuals that desire to carry Naloxone must be approved by their Supervisor. Approved Naloxone Carriers must provide a certificate of Naloxone training (see reference Naloxone Request / Training Form). If significant Naloxone training practices change, the staff or intern must provide a new Naloxone Request / Training Form.

STORAGE & MONITORING: The agency will store the Naloxone in a secure location near each receptionist desk area (excluding bld. 18). A minimum of 4 Naloxone kits will be on-hand. Approved Naloxone carriers must sign out & sign in when carrying Naloxone, using a sign out/in procedure will minimize confusion of where or who has the Naloxone. The Facility Manager is responsible for reviewing the expiration date of the Naloxone. The Facility Manager will conduct expiration audits through the established regular scheduled safety walks.

USE & REPORTING: In an emergency overdose situation, Naloxone is intended for immediate administration. Naloxone is not a substitute for emergency medical care and 911 must be called if it is an emergency and notify your immediate supervisor.

- 1) Identify Opioid Overdose and check for response



- a) Ask person if he or she is okay and shout name
- b) Check signs for an opioid overdose, such as not waking up or responding to voice or touch, breathing very slow irregular or stopped
- c) Lay person on their back
- 2) Administer Naloxone Nasal Spray
 - a) Peel back tab to open Naloxone Nasal Spray
 - b) Hold spray with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle
 - c) Gently insert the tip of the nozzle into one nostril with the persons head tilted back.
 - d) Press the plunger firmly to give a dose of the Naloxone spray and remove
- 3) Call for emergency medical help, evaluate and support
 - a) Call 911 for emergency help
 - b) Move the person on their side in the “recovery position”
 - c) Monitor person closely
 - d) If the person does not respond by waking up to voice or touch or begins breathing normally another dose may be given every 2 to 3 minutes if available. (one unit is one dose, so a separate unit is needed for a second dose)

You must complete an ACCS Incident Report after care is provided.

Note: Staff and Interns may have unintentionally been in contact with a highly potent opioid called Fentanyl. Naloxone training discusses self-administration scenarios and techniques.

REFERENCES

ORC 2925.61

Naloxone Request / Training Form

ACCS Incident Report

<https://www.narcan.com/>

<https://www.odh.ohio.gov/health/vipp/drug/ProjectDAWN.aspx>

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