

EMS Operations
First Responder Naloxone**Date: 07/01/2023****Policy #4140****I. Purpose:**

- A. To define the indications and use of the intranasal medication Naloxone (Narcan) administration in the prehospital setting by First Responders.

II. Authority:

- A. Health and Safety Code, Division 2.5, Section 1798 and 7180. California Code of Regulations, Title 22, Division 9, Sections 100144, 100146, 100147, 100169

III. Policy:**A. FIELD ASSESSMENT/TREATMENT INDICATORS**

- 1. Suspected narcotic overdose
- 2. Environment suspicious for illegal or prescription use of narcotics, and
- 3. Victim is poorly responsive and respiratory (breathing) rate appears slow or shallow; or victim is unresponsive and not breathing.

B. PUBLIC SAFETY INTERVENTION**Poor Breathing and Decreased Consciousness**

- 1. Ensure EMS has been activated using the 9-1-1 system.
- 2. Maintain standard blood and body fluid precautions. Use appropriate personal protective equipment (gloves, face shield).
- 3. Check for responsiveness using verbal or painful stimuli.
- 4. Open the airway using Basic Life Support technique.
- 5. Perform rescue breathing, if indicated, using a bag valve mask (BVM) or protective face shield.
- 6. Administer Naloxone nasal spray.
 - a. Naloxone nasal spray 4 or 8 mg preloaded single dose device.
 - i. Administer full dose in one (1) nostril.
 - ii. If partial response in breathing or consciousness, repeat Naloxone nasal spray 4 or 8 mg preloaded single dose administration in nostril opposite to the first dose.

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- iii. If response is observed, may repeat until patient is breathing greater than eight (8) times a minutes, is breathing adequately, and is protecting their airway.
 - iv. If no response seen, continue as below.
7. After Naloxone nasal spray administration, observe for improved breathing and consciousness. If breathing or consciousness do not improve, assist breathing if BVM is available, or begin CPR if no pulse and breathing detected.
 8. If awakened by Naloxone nasal spray, be alert for sudden, agitated behavior or symptoms of opioid withdrawal such as vomiting, abdominal cramps, or sweating.
 9. If CPR is not necessary, place patient on left side to avoid inhaling any possible vomit.
 10. Report administration of Naloxone nasal spray to EMS field personnel for documentation on the electronic patient care report (ePCR).
 11. Public safety personnel shall complete report per the public safety agency's policy.

Not Breathing/Unresponsive

1. Ensure EMS has been activated using the 9-1-1 system.
2. Maintain standard blood and body fluid precautions. Use appropriate personal protective equipment (gloves, face shield).
3. Begin CPR (chest compressions with ventilation if BVM is available).
4. Administer Naloxone nasal spray.
 - a. Naloxone nasal spray 4 or 8 mg*** preloaded single dose device.
 - i. Administer full dose in one (1) nostril.
 - ii. If partial response in breathing or consciousness, repeat Naloxone nasal spray 4 or 8 mg preloaded single dose administration in nostril opposite to the first dose.
 - iii. If response is observed, may repeat until patient is breathing greater than eight (8) times a minutes, is breathing adequately, and is protecting their airway.
 - b. After Naloxone nasal spray administration, observe for improved breathing and consciousness. If breathing or consciousness do not improve, assist breathing if BVM is available, or begin CPR if no pulse and breathing detected.

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- c. If awakened by Naloxone nasal spray, be observant for possible sudden, agitated behavior or symptoms of opioid withdrawal such as vomiting, abdominal cramps, or sweating.
- d. If CPR is not necessary, place patient on left side to avoid inhaling any possible vomit.
- e. Report administration of Naloxone nasal spray to EMS field personnel for documentation on the ePCR.
- f. Public safety personnel shall complete report per the public safety agency's policy.

APPROVED:

SIGNATURE ON FILE – DATE

Katherine Staats, MD FACEP

EMS Medical Director