

Administration of Nasal Naloxone

Index Code: 1613

Effective Date: 04/15/14 (Revised 7/22/19)

I. Purpose

Queen Anne's County, as well as other counties throughout Maryland, has seen an increase in Heroin overdoses and Heroin related deaths. Naloxone has been successful in treating overdoses of Heroin and other opiates including Morphine, Fentanyl, Oxycodone, Oxycontin, Percocet, Percodan Hydrocodone, and Vicodin by Emergency Medical Services for many years. The drug reverses the effects of an overdose.

Naloxone is a scheduled drug, but has no euphoric properties and minimal side effects. If it is administered to a person who is not suffering an opiate overdose, it will do no harm. During an opiate overdose a person may suffer a disruption of normal breathing. In some cases breathing may stop altogether quickly causing death.

The purpose of this directive is to provide training for personnel in the pre-hospital administration of Naloxone, which is commonly known by the brand name Narcan, and provide guidelines for its use. Deputies often arrive on the scene of overdoses before Emergency Medical Services personnel. Deputies administering Naloxone is an effort to save lives.

II. Policy

It is the policy of the Office of the Sheriff to utilize Naloxone as a means of saving lives. In conformance with this policy, the Medical Director for Queen Anne's County will provide medical oversight for the training, use, and administration of Naloxone. The following procedures will serve to direct the administration, handling and use of Naloxone.

III. Implementation

When a deputy arrives on the scene of a medical emergency prior to the arrival of Emergency Medical Services personnel, and determines that a person is suffering from an opiate overdose, the deputy should administer one dose of their supplied Naloxone to the patient by the way of the person's nasal passage(s) following the directions supplied with that kit.

When the decision is made to administer Naloxone the following steps should be taken:

1. Deputies should utilize universal precautions.
2. Deputies should conduct a medical assessment of the person and surroundings to include statements made by witnesses regarding drug use.
3. If the deputy makes the determination that there has been an opiate overdose, the naloxone kit should be utilized.
4. Deputies should be aware that reversal of an opiate overdose may cause projectile vomiting and/or violent behavior.
5. The person should be observed and treated as the situation dictates.
6. The deputy should inform Emergency Medical Services that Naloxone was administered and the current condition of the patient.
7. Deputies will help ensure the patient is transported to the hospital. If the patient will not go to the hospital then the emergency evaluation process will be initiated.
8. Deputies will conduct any criminal investigations and gather evidence as a result of the call for service notwithstanding the Maryland Good Samaritan Law provisions as described in item #9.
9. Deputies will be aware of Maryland's Good Samaritan Law that protects from certain misdemeanors (possessing or administering CDS, possessing drug paraphernalia, obtaining, possessing or furnishing alcohol for underage consumption) and violations of a condition of pretrial release, probation or parole any person who seeks, provides, or assists with the provision