


OGDEN CITY POLICE

Office of the Chief

Policy No: 62

Subject Administering Naloxone	Effective Date May 16, 2022
Department Police	Replaces Policy Dated April, 2019
Division All Police Personnel	Review Date April 2024
Authorized Signature 	

NOTE: This rule or regulation is for internal use only and does not enlarge an officer's civil or criminal liability in any way. It should not be construed as the creation of a higher standard of safety or care in an evidentiary sense, with respect to third party claims. Violations of this directive, if proven, can only form the basis of a complaint by this agency, and then only in a non-judicial administrative setting.

I. PURPOSE

Consistent with the Opiate Overdose Response Act, Utah Code Ann. § 26-55-101 et seq., the purpose of this policy is to establish guidelines and regulations governing the good faith administration of the opiate antagonist medication known as nasal naloxone Narcan® ("*Narcan*") to an individual believed to be experiencing an opiate-related drug overdose. The objective is to treat Opiate/Opioid overdoses and reduce fatal Opiate/Opioid overdoses. Training will give officers the appropriate knowledge and use of the drug, which is relatively simple, and may increase the patient's survivability.

II. POLICY

It is the policy of the Ogden Police Department that officers who will be administering Narcan are properly trained in the use and deployment of Narcan according to the laws of the state of Utah. No officer shall carry or administer Narcan under this policy without first attending the initial Narcan training and subsequent training(s) every 2 years and as appropriate.

This policy is in accordance with the Utah Code Ann. 26-55-103 Voluntary participation which states "This chapter does not create a duty or standard of care for a person to prescribe or administer an opiate antagonist."

III. PROCEDURE

1. The Ogden Police Department will deploy the Narcan kit in the following primary locations:

A. One kit in each patrol vehicle per trained officer.

NOTE: Narcan maybe damaged by extreme temperatures, both high and low. Due to this fact, consideration should be given to (i) storing the Narcan in the interior of a patrol car when extreme temperatures exist, and (ii) removing the Narcan from the patrol car and storing it properly in a secure location after a shift is completed.

2. Narcan Use:

When using the Narcan kit, officers will maintain universal precautions, perform victim assessment, and determine unresponsiveness, absence of breathing or pulse. After such precautions and assessment, officers should update dispatch and state that the victim is in a potential overdose state. The officers shall follow the protocol as outlined in the Narcan training.

3. Officer Narcan Deployment Protocol:

(a) Identify and assess victim for responsiveness, pulse and status of breathing.

(b) If no pulse, initiate CPR with breathing support and an AED (if available) as per normal protocol; notify incoming EMS.

If pulse is present and the victim is unconscious, assess breathing status:

I. If breathing is adequate (>8 breaths per minute, no cyanosis) and no signs of trauma, place in the recovery position.

II. If breathing is decreased or signs of low oxygen (cyanosis), pupils are very small and overdose is suspected (based on history, evidence on scene, bystander reports, and physical examination) then proceed with Narcan administration.

(c) Retrieve Narcan.

- (d) Prepare or assemble Narcan kit.
- (e) Administer a maximum of a single unit dose of 2 mg in the preassembled device in one nostril.
- (f) Initiate breathing support with pocket mask, bag-valve-mask and oxygen if available. If the victim is unresponsive after 3 minutes and a second dose of Narcan is available, repeat the administration. Any application beyond the 2nd dose will require a medical doctor's direction.
- (g) Continue to monitor breathing and pulse - if breathing increases and there is no evidence of trauma, place victim in the recovery position.
- (h) Keep EMS advised of victim status when able to do so.
- (i) If at any time pulses are lost, initiate CPR and AED as per normal protocol until relieved by advanced life EMS support responders.
- (j) Give full report to EMS when they arrive.
- (k) Complete documentation and procedures for restocking and notification.

NOTE: When an officer deploys Narcan and it results in a resuscitation of an overdose victim, that officer should ensure that the person remains on scene until the appropriated EMS units arrive to conduct an appropriate assessment of the victim's medical needs. Once the transporting agency of AEMT or higher arrives on scene, officers shall defer to those EMS units for any additional treatment or decisions regarding treatment, care, and transport of the victim. The effects of Narcan only last for a limited period of time and the person may experience another opiate overdose when the effects of the Narcan wear off.

IV. Reporting and Maintenance

A. Documentation of a Nasal Narcan Deployment:

Upon completing a medical assist, an officer shall submit a "Medical Assist" report detailing the nature of the incident, the care the victim received and the fact that the Narcan was deployed.

The reports will be compiled quarterly by the Training Lieutenant, or his designee, and forwarded to the Weber County Sheriff's Department EMT/Narcan Coordinator.

EMS agency's procedures should not be otherwise circumvented as a result of this protocol.

B. Narcan Coordinator:

The Training Lieutenant, or his designee, shall be responsible for the following:

- (a) Ensuring the Narcan is current and not expired.
- (b) Proper and efficient deployment of Narcan for Ogden officers.
- (c) Replacement of any Narcan that is damaged, unusable, expired or deployed.
- (d) Ensuring all personnel who will administer nasal Narcan have received appropriate training in the Administration of Narcan.
- (e) Ensuring that any deployment of Narcan to a subject will have a corresponding police report documenting said deployment.
- (f) Reports to the medical review physician, which reports may be reviewed and debriefed as necessary.

C. Narcan Maintenance I Replacement:

- (a) An inspection of the Narcan kit shall be the responsibility of the Ogden Police personnel assigned the equipment and will be conducted each shift.
- (b) Missing or damaged Narcan kit(s) will be reported directly to the Sergeant in charge of the shift, who shall notify the Training Lieutenant.
- (c) If any condition exists that necessitates the Narcan kit to be taken offline or be submitted for replacement, this information shall be directed to the Training Lieutenant.
- (d) It should be noted that Narcan has an expiration date per the manufacturer (usually about 2 years from the date of manufacture). As such, all Ogden Police personnel assigned Narcan shall be responsible for checking the expiration date of the product. If expired, the Training Lieutenant shall be notified as soon as possible.
- (e) Replacement: If the patient is transported, the transporting agency should replace the used medication. If not, then the Training Lieutenant shall be responsible for replacing the Narcan and ensuring that the Ogden Police Department has an adequate supply available for use.