Revised Date: September 1, 2018

## PUBLIC SAFETY INTRANASAL (IN) NALOXONE (NARCAN) PROVIDER AUTHORIZATION

### **PURPOSE**

To describe criteria for Public Safety Agency authorization and administration of Intranasal (IN) Naloxone in cases of suspected acute opioid overdose as authorized by California Code of Regulations (CCR).

### **AUTHORITY**

Health & Safety Code, Division 2.5, EMS California Code of Regulations, Title 22, Division 9, Chapter 1.5, Article 3, § 100019 (f)

### **DEFINITIONS**

- I. Public Safety personnel are individuals as defined in CCR, Title 22 Division 9 Chapter 1.5, §§ 100008, 100011.
- II. Public Safety Agency is an organization that employs individuals as defined in CCR, Title 22, Division 9, Chapter 1.5, §§ 100008, 100011.
- III. Local Emergency Medical Services Agency (LEMSA) is the local EMS oversight agency tasked to provide authorization to qualifying agencies for the provision of optional scope Intranasal (IN) Naloxone Administration to a defined set of patients.

### REQUESTS FOR PROGRAM AUTHORIZATION AND RENEWAL

- I. Any Public Safety Agency wishing to utilize IN Naloxone within the YEMSA area will meet the requirements per CCR, Title 22, Division 9, Chapter 1.5, Article 3, § 100019 (a) (b)(f)) along with the following:
  - A. A Public Safety Agency shall be approved by YEMSA, prior to beginning IN Naloxone administration services. The following shall be submitted along with any administrative fee in order to receive and maintain IN Naloxone Service Provider approval.
    - 1. Completion of YEMSA Provider Authorization/Renewal form
    - 2. Proof of orientation of authorized personnel to the Agency IN Naloxone Kit
    - 3. Description of and documentation used to ensure maintenance of IN Naloxone Kits, per manufacturer recommendations, including expiration dates
    - 4. Descriptive process used for initial training and continued competency of IN Naloxone authorized personnel

### B. ADDITIONAL REQUIREMENTS

1. Current certification in Basic Life Support (BLS) Cardiopulmonary Resuscitation (CPR) for participating Public Safety personnel

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### **TRAINING**

- I. Training shall be provided as outlined in CCR, Title 22, Division 9, Chapter 1.5, Article 3, § 100019, Optional Skills Administration of Naloxone for suspected narcotic overdose.
- II. Agencies may develop an internal training program or use an approved training provider. All training programs must obtain curriculum approval through YEMSA.
- III. Approved training programs will consist of a minimum one (1) hour presentation which will cover the following and will include a written examination, instructor demonstration along with successful participant demonstration of the administration of IN Naloxone:
  - A. Background information on opioid use and abuse
  - B. Definition of opioids
  - C. Common causative agents
  - D. Assessment findings
  - E. Management to include but not be limited to:
    - Need for appropriate Personal Protective Equipment (PPE) and scene safety
    - 2. Profile of Naloxone to include, but not be limited to:
      - a. Indications
      - b. Contraindications
      - c. Side/adverse effects
      - d. Routes of administration
      - e. Dosages
  - F. Mechanisms of drug action
  - G. Calculating drug dosages
  - H. Medical asepsis
  - I. Orientation to the YEMSA Treatment Protocol for Public Safety IN Naloxone Administration

### PROVIDER AGENCY RESPONSIBILITIES

- I. The Training Officer/Coordinator or other designated individual, shall be responsible for the following and furnish documentation upon request to YEMSA:
  - A. Ensure IN Naloxone is current and not expired
  - B. Proper and efficient deployment of IN Naloxone methods
  - C. Replacement of any IN Naloxone that is damaged, unusable, expired or used
  - D. Ensure agency personnel administering IN Naloxone have received the appropriate training
  - E. Keep records of all documented use, restocking, damaged and unusable or expired medication

### **DOCUMENTATION**

- I. Public Safety Provider Agencies which provide First Responder EMS services shall complete ePCR requirements per LEMSA Administrative Guidelines #6000 and #6001
- II. Public Safety Provider Agencies whose primary emergency response role is either Law Enforcement or Lifeguard duties shall advise the responding EMS Provider Agency of the circumstances related to the administration of IN Naloxone. Including initial patient

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assessment, administered dose IN Naloxone and any resulting change in patient assessment/condition.

III. EMS Provider Agencies will document Public Safety First Responder IN Naloxone administration on the ePCR via the provided special reporting power tools. The documentation will include initial patient assessment, dosage administered, changes in the patient assessment/condition, including adverse outcomes.

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