



MANAGEMENT OF LEAVE-BEHIND NALOXONE (NARCAN)

PURPOSE

To provide guidance for using YEMSA-provided naloxone kits to reduce the risk of opioid overdose and to ensure accurate tracking of distributed kits.

AUTHORITY

Health & Safety Code, Division 2.5, Chapter 4, Article 1, § 1797.220
California Code of Regulations, Title 22, Division 9, Chapter 4, Article 2, § 100145

POLICY

- I. EMS personnel are authorized to leave behind a YEMSA-provided naloxone kit with any individual who is deemed at risk of an opioid overdose or individuals who are considered likely to encounter and assist a person experiencing an opioid overdose.
 - A. EMS personnel may consider offering leave-behind naloxone to lay persons who request it on a scene or in the following situations:
 1. A reversed overdose regardless of further treatment or transport disposition.
 2. Prescription opioids, drug paraphernalia, or suspected opioid use are found on a scene, including bystanders who may have been using opioids.
 3. A person who self-identifies as a person who uses drugs (recreationally or prescribed).
 4. A person who states that they have close contacts who use drugs.
- II. Providers may consider offering leave-behind naloxone regardless of the nature of the contact between EMS personnel and the subject(s) receiving the naloxone kit(s). Leave-behind naloxone distribution is not limited to 911 calls for service for a suspected overdose.

PROCEDURE

- I. Ambulance logistics staff will receive naloxone kits from YEMSA that have been labeled with tracking QR codes.
 - A. Logistics staff shall facilitate the distribution of leave-behind kits to all 911 ambulances and fire department apparatus that may respond to EMS calls in Yolo County.
- II. While IV administration of naloxone is the preferred route by ALS responders, personnel may administer YEMSA-provided naloxone to a patient/patients with a suspected overdose in accordance with YEMSA treatment protocols.
 - A. Requirements for use of YEMSA-provided intranasal naloxone in patient treatment:
 1. Documentation of the administration in the electronic patient care report (ePCR).
 2. Documentation of the administration via QR code tracking form to allow for proper state reporting and restock (see REPORTING REQUIREMENT section below)
 3. EMS providers will not bill for the administration of YEMSA-provided medication.
- III. EMS providers may offer leave-behind naloxone kits as described in the policy above.



Yolo County Emergency Medical Services Agency

Policy

Revised Date: July 11, 2023

- A. Providers shall not leave behind naloxone from department-purchased supplies of medication.
- IV. EMS provider(s) shall provide brief instructions to the recipient of the leave-behind naloxone kit, including:
 - A. Recognition of opiate overdose and activation of 911
 - B. Signs and Symptoms of opiate overdose
 - C. Lay-person Rescue Breathing
 - D. Administration of intra-nasal naloxone
 - E. Post-Overdose Care
 - F. Direction to complete the form at the QR code
 - G. Recommend that the trained individual complete further training online at <https://youtu.be/nurz9qPGKws>
- V. Re-supply of naloxone kits:
 - A. First responders will restock leave-behind naloxone, one-for-one, from the ambulance crew as stock is available.
 - B. If YEMSA-provided naloxone is not available from the ambulance, this will be recorded by the first responder on the QR tracking form and restock will be arranged automatically within the following week; no further action is required by the first responder agency to initiate restock.
 - C. Ambulance crews should restock leave-behind naloxone from department logistics.
 - D. Ambulance logistics must monitor the inventory of leave-behind naloxone and request restocking from YEMSA.
 - E. Leave-behind naloxone kits are not required for a unit to be in-service.

REPORTING REQUIREMENT

- I. Participating agencies are responsible for assisting YEMSA in tracking state required information on the distribution of naloxone kits into the community. Each carton of naloxone (containing two doses) will have a QR code (below) that personnel must scan and complete when:
 - A. Naloxone is left behind.
 - B. EMS personnel administer YEMSA-provided naloxone to a patient.
 - 1. When administering one dose from the carton (containing two doses) EMS personnel should save the carton to document when the second dose is administered.
 - 2. Administration of the YEMSA-provided naloxone to a patient should still be documented in the ePCR following standard documentation procedures.



<https://shorturl.at/qzD01>