

MISSOULA POLICE DEPARTMENT POLICY MANUAL



<i>Subject:</i> NALOXONE PROCEDURE		
<i>Effective Date:</i> 4/25/2018	<i>Original Date:</i> 4/25/2018	<i>Next Review:</i> 4/25/2020
<i>Chapter</i> 14	<i>Policy #</i> 14.18	<i>Distribution:</i>
<i>References:</i> MCA 50-32-603, 50-32-607, 50-32-608		

I. PURPOSE

The purpose of this policy is to inform sworn members of the Missoula Police Department of circumstances under which the use of Naloxone (Narcan) is appropriate and to record instances where Narcan was administered.

II. POLICY

The use of Narcan is appropriate when the symptoms of the subject are those of an opioid overdose. A properly trained sworn member of the Department, legally in possession of Narcan, may administer the Narcan whenever he or she reasonably believes that a subject is the victim of an opioid drug overdose.

III. DEFINITIONS

NALOXONE (NARCAN) -- A prescription drug which reverses the toxic effects of opioids by competing with the presence of opiates in the brain. It is a fast acting drug that acts within 1-8 minutes of being administered. It is safe to carry and administer with no potential harmful side effects and is impossible to abuse.

OPIOIDS -- For the purposes of this policy the term opioid includes opioid and opiate drugs. The term includes opium-like natural, synthetic, and semi-synthetic narcotic drugs that act on the body's opioid receptors and cause effects including analgesia and respiratory system depression. Opioids include, but are not limited to, heroin, morphine, hydrocodone, oxycodone, fentanyl etc.

OPIATE OVERDOSE -- A life threatening effect of an opiate on the human body often depressing the respiratory and central nervous system resulting in a decreased state of consciousness.

OPIATE OVERDOSE SYMPTOMS -- Individuals experiencing an opiate overdose exhibit symptoms such as not breathing, blue lips and/or blue skin, a limp body, decreased heart rate, lack of consciousness, deep snoring/gurgling, unresponsiveness to external stimuli, and/or pale clammy skin.

IV. PROCEDURES

- A. When a sworn member of the Department reasonably believes, based on their training, that an individual is suffering from an opioid drug overdose the officer should:

1. Request the response of Emergency Medical Service (EMS).
2. Determine the subject's level of conscious through verbal and physical stimuli. If the subject is unconscious, use measures such as shaking the subject or limited use of pain stimuli in order bring the subject to consciousness.
3. Check for signs of an opioid overdose:
 - a. Will not wake up or respond to your voice, touch or pain stimuli.
 - b. Breathing is slow or shallow
 - c. Constricted pupils
 - d. Blue lips
4. Ensure universal precautions, per MPD Policy 14.12 Blood Borne Pathogens, are taken to prevent exposure to potential blood-borne pathogens utilizing appropriate PPE.
5. Administer Narcan pursuant to training received.
 - a. Specific procedures based on type of device available.
6. Place subject into rescue position and monitor condition
7. If the subject has not responded within three to five minutes after administering the first dose, administer additional doses as appropriate per training.
8. Inform responding EMS of the circumstances in which the subject was found that led to the belief that subject is suffering from an opioid drug overdose and number of doses administered (i.e., physical signs, statements by witnesses, etc.).

B. Reporting

1. Notify a supervisor any time Naloxone is administered and complete a report that includes.
 - i. Type of location (house, apartment, business, etc.).
 - ii. Type of controlled substances the subject was suspected of using, including name of prescription drugs, if known.
 - iii. Condition of subject (i.e., if subject was conscious and breathing before administration of Narcan).
 - iv. If CPR was administered.
 - v. If subject survived.
 - vi. Number of doses of Narcan administered.

C. Narcan Replacement

1. Notify the Professional Standards Lieutenant when a replacement kit is needed including the officers' chain of command in the email.
2. If a Narcan device is damaged, lost or stolen, a Case Report must be completed detailing circumstances.

D. Safety Considerations

1. Narcan is generally effective within five to ten minutes of administration. If an individual was suffering from an opioid drug overdose, Narcan may cause that person to regain consciousness and resume normal breathing.
2. Officers are reminded to use proper tactics when administering this drug.
 - i. Subjects who are revived from an opioid overdose may regain consciousness in an agitated and combative state and may exhibit symptoms associated with withdrawal.

3. Narcan will wear off after thirty to forty minutes. Therefore, it is critical that whenever this drug is administered the subject be immediately removed to the hospital.
4. Officers must remain with the subject until they are in the care of medical personnel.
5. Members should also follow universal precautions when administering Narcan.

E. Operational Considerations

1. While officers are on duty, Narcan kits may be kept in officer's gear bag or on officer's person.
2. Recommended storage conditions are between 59 and 86 degrees Fahrenheit. Officers should be mindful of temperature fluctuations.
3. When off duty officers shall store the Narcan in a secure, temperature controlled area.
4. Officers are responsible to regularly inspect Narcan kits issued to them and request repair or replacement of any damaged, lost, stolen or expired items.

F. Narcan shall be acquired, stored, issued and administered by the MPD and its officers in accordance with state law.

V. Authority

- A. Officers are not normally authorized to administer prescription drugs as part of their regular duties. Montana Code Annotated 50-32-603, 50-32-607 and 50-32-608 authorize Sworn Officers to store and administer Narcan after receiving training to do so and protects officers from liability for using it when it is used in accordance with their training.