

 <b>Kinston Police Department</b>	<b><u>POLICY: Naloxone Utilization</u></b>						<b><u>POLICY #:</u></b>  <b>200-23</b>
	<b><u>NCLEA Standards:</u></b>						
	<b><u>CALEA Standards:</u></b>						
	<b><u>NCLM Standards:</u></b>						<b>Effective Date:</b>
<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	<b>Revision Dates:</b>	01/01/21	02/06/25				<b>07-01-2019</b>
<b>Approval: Chief of Police</b>							

## I. PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines and regulations governing utilization of Naloxone (Narcan) used by the Kinston Police Department. The objective is to treat and reduce the injury and fatality from Opiate overdoses.

## II. DEFINITIONS

- A. Naloxone (also known as Narcan): Is a medication called an “opioid antagonist” used to counter the effects of opioid overdose, for example morphine and heroin overdose. Specifically, naloxone is used in opioid overdoses to counteract life-threatening depression of the central nervous system and respiratory system, allowing an overdose victim to breathe normally.

## III. POLICY

It is the policy of the Kinston Police Department that all officers are required to be initially trained in the use of Naloxone by Lenoir County Emergency Services, EMS Division.

## IV. PROCEDURES

When using the Narcan / Naloxone kit members will maintain universal precautions, perform patient assessment; determine unresponsiveness, absence of breathing and or pulse. Member(s) should update 911 Communications that the patient is in a potential overdose state. The telecommunicator will then notify the local EMS and Paramedic Unit. Members shall follow the protocol as outlined in the Narcan / Naloxone training.

Narcan / Naloxone Deployment protocol is as follows:

1. Identify and assess victim for responsiveness, pulse and status of breathing.
2. If no pulse, initiate CPR as per normal protocol; notify incoming EMS.
3. If pulse is present and the victim is unconscious, assess breathing status.
4. If breathing is adequate (>8 per minute, no cyanosis) and no signs of trauma, place in the recovery position.
5. If breathing is decreased or signs of low oxygen (cyanosis) and overdose is suspected (based on history, evidence on scene, bystander reports, and physical examination) then proceed with Narcan / Naloxone administration.

6. Retrieve Narcan / Naloxone kit.
7. Prepare kit.
8. Administer the issued Narcan/Naloxone kit as approved by the County Medical Director.
9. Initiate breathing support with pocket mask, bag-valve-mask and oxygen if available.
10. Continue to monitor breathing and pulse – if breathing increases and there is no evidence of trauma, place in the recovery position. If at any time pulse is lost, initiate CPR per normal protocol.
11. Keep responding EMS advised of patient status when able to do so.
12. Give full report to EMS when they arrive.
13. Complete documentation and internal agency procedures for restocking and notification.
14. Notate, by name, any EMS personnel who responded in the incident report.

## **V. STORAGE OF NARCAN / NALOXONE**

The Kinston Police Department will deploy its Naloxone kits in the following primary locations:

1. One in each patrol vehicle.
2. Kinston Police Department processing room.
3. Patrol Sergeants' Office.

NOTE: Narcan / Naloxone may be damaged by extreme temperatures, both high and low. Due to this fact, consideration should be given to storing the Narcan / Naloxone in the interior of a patrol car when these conditions exist and taking the Narcan / Naloxone from the vehicle and storing it in an environment away from extreme temperatures.

## **VI. NARCAN / NALOXONE COORDINATOR**

The Training Coordinator is designated as the Narcan / Naloxone Coordinator.

The Narcan / Naloxone Coordinator shall be responsible for the following:

1. Ensuring the Narcan / Naloxone is current and not expired.
2. Proper and efficient deployment of Narcan / Naloxone for the agency.
3. Replacement of any Narcan / Naloxone that is either damaged, unusable, expired or deployed.
4. Ensuring all personnel that will be using Narcan / Naloxone has received appropriate training.
5. Ensure that any deployment of Narcan / Naloxone to a subject will have a corresponding Sheriff's Office incident report documenting such deployment.

NOTE: When a member deploys Narcan / Naloxone and it results in a resuscitation of an overdose victim, that member should ensure that person receives appropriate follow-up care. The effects of Narcan / Naloxone only last for a limited period of time and the person may experience another opiate overdose when the effects of the Narcan / Naloxone wear off. Every effort should be made to encourage that person to be transported to the hospital for additional care.

## **VII. MAINTENANCE / REPLACEMENT**

An inspection of the Narcan / Naloxone kit shall be the responsibility of the personnel assigned the equipment and will be done monthly.

Missing or damaged Narcan / Naloxone kit(s) will be reported directly to the supervisor in charge of the shift who shall notify the Agency's Narcan / Naloxone Coordinator.

Any condition that necessitates the Narcan / Naloxone kit to be taken off line or be submitted for replacement shall be directed to the Agency's Narcan / Naloxone Coordinator.

It should be noted that Narcan / Naloxone has an expiration date per the manufacturer. All personnel assigned Narcan / Naloxone shall be responsible for checking the expiration date of the product. If expired, the Agency's Narcan / Naloxone Coordinator shall be notified as soon as possible.

The Agency Narcan / Naloxone Coordinator shall be responsible for replacing the Narcan / Naloxone and ensure the department has an adequate supply available for agency use.

## **VIII. DOCUMENTATION / NARCAN / NALOXONE REPORT**

Upon completing the medical assist, the officer will submit a report detailing the nature of the incident, the care the patient received and the fact that the Naloxone was deployed. The report will be forward to the department Naloxone coordinator who will then forward the data to Lenoir County Emergency Services, EMS Division. These records must be completed for statistical value of the Naloxone program. The document shall be retrievable via hardcopy and electronic format.

## **IX. Training**

Training for administering of Naloxone will consist of two parts:

1. All participating officers will receive initial training that will include, at minimum, an overview of 2013 Senate Bill 20 that permits Law Enforcement use of Naloxone, patient assessment (eg., signs/symptoms of overdose), universal precautions, rescue breathing, seeking medical attention, and the use of Intra-Nasal and/or Intra-Muscular Naloxone as detailed in the standing order. Upon completion of training, officers will have their training recorded with the Lenoir County Emergency Services, EMS Division.
2. Officers participating in the Kinston Police Department Overdose Prevention Program will receive training refresher during their yearly continuing education by the Lenoir County Emergency Services, EMS Division.