

STOCKTON POLICE DEPARTMENT

GENERAL ORDER

ADMINISTRATION OF OPIOID ANTAGONIST
SUBJECT

DATE: March 12, 2019

NO: M-7

FROM: CHIEF ERIC JONES

TO: ALL PERSONNEL

INDEX: Narcan
Opioid
Overdose

I. PURPOSE

To establish guidelines and regulations governing the utilization of Naloxone by the Stockton Police Department with the objective to reduce the number of fatal opiate overdoses and increase officer safety.

II. POLICY

This policy establishes guidelines and regulations for trained Stockton PD officers to administer intranasal naloxone hydrochloride under the direction of the San Joaquin County Emergency Medical Services Agencies (SJCESMA) Medical Director.

III. BACKGROUND

Assembly Bill 2256 signed into law in 2018 enacted Section 4119.9 of the Business and Professions Code authorizing a pharmacy to furnish naloxone hydrochloride or other opioid antagonist to law enforcement agencies for use by trained employees of the law enforcement agency. Law enforcement agencies and personnel providing emergency medical services including the administration of naloxone hydrochloride in accordance with SJCESMA treatment protocols are protected from civil liability in accordance with the provisions of Health and Safety Code, Section 1799.106.

IV. DEFINITIONS

- A. **Naloxone Hydrochloride (Narcan):** Naloxone, also commonly known as Narcan, is a prescription medication used for the treatment of a possible opioid or suspected opioid overdose.
- B. **Intranasal:** Naloxone is a narcotic antagonist which works by affecting opiate receptor sites within the brain. Naloxone is administered into the subject's nose via intranasal administration (spray). The nasal cavity is covered by a thin mucosa, which is extremely vascular and provides a direct route into the blood stream of the subject. This method of administration is noninvasive and quickly effective.
- C. **Opioid Overdose:** An opioid overdose is an acute, life-threatening, medical condition caused by excessive intake of opiates, such as heroin, morphine, tramadol, and oxycodone. This serious medical condition causes the victim to suffer from an altered level of consciousness, pinpoint pupils, respiratory arrest and can lead to death.

V. PROCEDURE

Naloxone kits will be issued by the Watch Commander or Personnel and Training Section.

A. **ISSUING NALOXONE KITS:**

1. Only sworn personnel who have completed authorized training in the use and application of Naloxone will be assigned to carry and utilize Naloxone.
2. The standing agreement between the Chief of Police and the SJCESMA Medical Director authorizes officers who have been trained by authorized opioid overdose trainers to possess and administer nasal Naloxone to a person who is experiencing a possible opiate overdose.
3. Naloxone must be stored in a climate-controlled area and in a location where access to the medication can be secured and controlled.
4. Each assigned officer shall conduct a pre-service inspection of the Naloxone kit and confirm its condition. The officer will inspect the secured safety case to ensure it is clean and not damaged or expired.
5. Assigned officers will carry the Naloxone kit in a location that can be easily accessed and utilized when needed but out of direct sunlight.

B. USING NALOXONE:

1. Sworn Personnel, trained in the use of Naloxone, are authorized to use the medication without prior approval in cases where an opiate overdose is suspected.
2. When using Naloxone, officers will maintain universal precautions against blood borne pathogens.
3. Prior to administration of Naloxone, officers must assess the victim for lack of breathing, pulse, and unresponsiveness, Officers should conduct a brief visual survey for any obvious evidence of drug use or exposure.
4. If an officer determines the victim is suffering from an opiate based overdose, they will request Emergency Medical Services (EMS) immediately.
5. Naloxone shall be administered by officers utilizing **intranasal** method as approved by the local Emergency Medical Services Director and in accordance with training guidelines.
6. Officers using Naloxone on anyone, including other members of this agency or other law enforcement agencies, shall notify the appropriate medical personnel so further medical needs can be determined.

C. TRAINING:

1. Prior to being issued and/or administering Naloxone, sworn personnel must complete the Opioid Overdose Prevention Training conducted by a qualified Police Officer Standards and Training (POST) instructor or by someone who completed the naloxone train-the-trainer instruction approved by the San Joaquin County EMS Agency (SJCEMSA).
2. The Training Lieutenant in the Administrative Services Division shall ensure initial and refresher training is provided to members authorized to administer opioid overdose medication.
3. Updated Opioid Overdose Prevention Training will be completed at the same time as the mandated CPR training.

D. DOCUMENTING AND REPORTING

1. Upon administering Naloxone and advising appropriate medical staff, the involved officer shall complete the Naloxone Usage Report describing the details, circumstances, and results of the incident. The report shall include information regarding victims, witnesses or suspects and include a detailed narrative describing

symptoms observed and any evidence of drug use observed at the scene. This report is imperative for SJCEMSA to conduct an audit of Naloxone administration within San Joaquin County.

2. The on-duty Watch Commander will ensure that the use of Naloxone is carried on the Confidential Watch Commander Daily, including the name of the officer who administered the treatment, name, and age of the person the Naloxone was administered to, outcome, and location of hospital treatment.
3. The Naloxone Usage Report will be made an attachment to the original report, and a copy will be emailed to the SIS Lieutenant before the administering officer secures from duty.

NALOXONE USAGE REPORT

Date of incident:	Case #:
Arrival time of officers:	Arrival time of EMS:
Gender of person who overdosed (Circle one) M F Unknown	Age of person who overdosed:
Was the person who overdosed transient?	Was the person who overdosed a Veteran?
Were you first on scene (prior to EMS?)	YES NO
Did the victim regain consciousness before EMS arrived?	YES NO
What was the ethnicity of the person who overdosed?	How was the opiate ingested?

Actions taken by Officer (Check all that apply)

Number of nasal sprays used?					
If Naloxone worked, how long until it took effect?					
>Less than 1 minute	1-3 minute(s)	3-5 minute(s)	>5 minutes	Don't know	
Yelled ----	Shook them -----	Sternal rub -----	Mouth to Mouth -----	Mouth to Mask - ----	Chest Compressions -- ---

Was Naloxone Administered by anyone else at the scene? (Check all that apply)

EMS -----	Bystander -----	Other (specify)
Disposition (check one) Care transferred to EMS: _____		Other: _____
Outreach Brochure provided to? Victim: _____		Other: _____
What is the EMS Case number to this event?		

NOTES:

Officer: _____ Badge: _____ Date: _____