PURPOSE: To establish guidelines and procedures governing use, reporting, issuance, maintenance, and replacement of nasal naloxone, to be administered by Division members.

POLICY: It is the policy of the Cleveland Division of Police to provide members naloxone kits for use during lifesaving efforts conducted prior to the arrival of professionally trained emergency medical personnel.

DEFINITIONS

Carfentanil - the most potent fentanyl analog detected in the United States; estimated to be 10,000 times more potent than morphine.

Emergency Medical Personnel – Personnel trained to provide emergency medical assistance to persons suffering from an illness or injury (i.e., Emergency Medical Technicians [EMTs], paramedics, etc.).

Fentanyl - a synthetic opioid pain reliever, approved for treating severe pain, typically advanced cancer pain. Fentanyl is reportedly 50 to 100 times more potent than morphine.

Heroin - a highly addictive analgesic and illegal narcotic derived from morphine.

Mucosal Atomization Device - an intranasal mucosal atomization device (MAD) used to deliver a mist of atomized medication, such as naloxone, into the nose for absorption into a person's bloodstream.

Naloxone hydrochloride (aka NARCAN) - a prescription medication that rapidly reverses the effects of opioid overdose; a standard treatment for known or suspected opioid overdose, with signs of breathing problems, severe sleepiness, and/or an inability to respond.

NARCAN® (Nasal Spray) - brand name of the medicine naloxone hydrochloride, administered via an intranasal mucosal atomization device (MAD).

Opioids - Substances that act on opioid receptors to produce morphine-like effects, including prescription medications, such as hydrocodone, oxycodone, and fentanyl, are prescribed to relieve pain medically. Opioids also include illegal narcotics, such as heroin, mixed with otherwise legal medications, such as carfentanil and fentanyl.

PROCEDURES:

I. Access to and Storage of Naloxone Kits

A. Members assigned to a two-person patrol car who have received training with naloxone shall:
1. Sign out a naloxone kit from the Officer-in-Charge (OIC) at the beginning of their tour.
   a. Verify the kit is intact.
   b. Maintain the kit in the front of their vehicle (e.g., glove box, passenger compartment) throughout their tour.

2. Return the naloxone kit to the OIC at the end of their tour.

B. When not maintained in the OIC's office, naloxone kits shall be stored away from direct sunlight and protected from excessively cold (freezing) temperatures.

II. Use of Naloxone

A. Members who have received training with naloxone and encounter a suspected opioid overdose shall:

   1. Immediately request EMS to respond.
   2. Take precautions against accidental exposure, remaining alert for powders, liquid residue, or drug paraphernalia.
   3. Don personal protective equipment (PPE).
   4. Check for the following indications:
      a. Unresponsiveness.
      b. Altered mental state.
      c. Inadequate respirations or not breathing.
      d. Pinpoint pupils.
      e. Presence of opioids or related paraphernalia.

3. Administer naloxone as instructed during training.
   a. Do not administer to a person known to be allergic or hypersensitive to naloxone.
   b. Do not open the blister pack until ready to administer.
   c. Do not test as each spray injector is designed for single (one) use only.
   d. Place the person on their side if vomiting occurs.
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   a. In the "Detail" section of the report in Field-Based Reporting, select the ACTION TAKEN tab at the bottom of the screen.
   
   b. Check the "Naloxone (Narcan) Kit Used" box.

5. Return any opened/damaged/used kits to the OIC and sign out a replacement.

B. Persons revived with naloxone from a suspected overdose may not formally refuse care and transport to the hospital, and only EMS personnel are authorized to complete the refusal procedure.

III. Supervisor Responsibilities

A. District OICs shall:

   1. Maintain a supply of naloxone kits.
   
   2. Distribute kits to members assigned to a two-person patrol car who have received training with naloxone.
   
   3. Maintain a log of all kits.
   

B. Commanders or designees shall:

   1. Ensure an accurate and full inventory of naloxone kits is maintained.
   
   2. Contact EMS headquarters, 1701 Lakeside Avenue, to arrange for an exchange of kits (one replenished kit for each used, damaged, or expired kit).

IV. Ohio Revised Code 2925.61 Lawful Administration of Naloxone

A. If a peace officer, acting in good faith, administers naloxone to an individual who is apparently experiencing an opioid-related overdose, both of the following apply:

   1. The peace officer is not subject to administrative action, criminal prosecution for a violation of ORC 4731.41 Practicing medicine without certificate, or criminal prosecution under this chapter.
   
   2. The peace officer is not liable for damages in a civil action for injury, death, or loss to person or property for an act or omission that allegedly arises from obtaining, maintaining, accessing, or administering the naloxone.
References


Ohio Attorney General's Naloxone Educational Video

THIS ORDER SUPERSEDES ANY PREVIOUSLY ISSUED DIRECTIVE OR POLICY FOR THIS SUBJECT AND WILL REMAIN EFFECTIVE UNTIL RESCINDED OR SUPERSEDED.