TITLE: Naloxone Policy			Article: 1719
APPROVED: William Dickinson, Chief Probation Officer			
EFFECTIVE:	REVIEWED:	REVISED:	UPDATED:
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POLICY

This policy will provide trained staff direction and expectations regarding the use of Naloxone in the course and scope of their duties with the Kern County Probation Department.

PURPOSE

This policy authorizes Probation personnel to utilize intranasal Naloxone kits. Naloxone, commonly known by the brand-name Narcan, is an opioid antagonist. This means Naloxone displaces the opioid from the receptors in the brain and can, therefore, reverse an opiate overdose. Naloxone has no euphoric (substance that produces an increased sense of well-being) properties and has minimal side effects. If Naloxone is administered to a person who is not suffering an opioid overdose, it will do no harm.

I. DISTRIBUTION AND STORAGE

Naloxone will be distributed at the discretion of the Chief Probation Officer or designee for the treatment of suspected drug overdose victims. Officers will be trained and must pass a written and skills examination prior to being issued or administering Naloxone. The Special Services Team Supervisor or designee will securely store Naloxone kits and will assign kits to each field officer. The Special Services Supervisors will maintain a written inventory documenting the quantity and expirations of the Department's Naloxone supply, as well as a log documenting the issuance of kits. It shall be the responsibility of each individual officer to inspect issued Naloxone kits prior to the start of each shift and to ensure the kits are intact. Damaged equipment shall be reported to his/her supervisor immediately.

Naloxone kits are temperature sensitive, so they are not to be stored in the trunk of patrol vehicles. Absent exigent circumstances, Officers shall carry the Naloxone kits with them when conducting field activities. Naloxone kits shall be stored in a locked receptacle when not on duty.

II. PROCEDURE

If an Officer contacts and determines an individual is possibly suffering an opioid

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overdose, the Officer may administer one dose of Naloxone into each nostril. If Emergency Medical Services (EMS) is not on scene at the time of administering the Naloxone, the Officer shall request Emergency Medical Services be dispatched to the scene. Officers on the scene will take the following steps:

- A. Officers will ensure the scene is safe and secure prior to medical intervention.
- B. Officers will use universal precautions regarding bloodborne and airborne pathogens, as well as communicable diseases when conducting the assessment.
- C. Prior to the administration of Naloxone, Officers will look for signs of an opioid overdose which include, but are not limited to:
 - 1. Small or pin-point pupils
 - 2. Shallow or labored breathing
 - 3. Heart rate that is slow or is stopped
 - 4. Patient cannot be awakened and does not respond to external stimuli
 - 5. Fingernails or lips have blue or purple coloring
 - 6. Patient is vomiting or making gurgling sounds
 - 7. Statements are made by bystanders alleging opioid usage
 - 8. Patient is a known drug user

After use of Naloxone, the administering Officer shall await EMS response unless other types of medical interventions are appropriate, such as CPR. After briefing arriving EMS about emergency medical intervention or having provided Naloxone, the administering Officer will immediately notify his/her supervisor. A Kern County Probation Department Naloxone Usage Reporting Form will be completed and submitted to the supervisor before the end of the shift.