

---

# INTRANASAL NALOXONE

## 4340.1 PURPOSE

This procedure establishes guidelines and regulations for trained Santa Ana Police Officers to administer Intranasal Naloxone.

## 4340.2 SUMMARY

Naloxone (Naloxone) to person(s) suspected of experiencing opioid-related overdose. It is the policy of the Santa Ana Police Department that employees who administer Naloxone shall be properly trained in its use and deployment according to the law and guidelines in this procedure. In 2014, Senate Bill 1438 tasked the California Emergency Medical Services Authority with adopting training and standards for all prehospital emergency medical care personnel, including peace officers, with the use and administration of Naloxone Hydrochloride to treat opioid overdoses to reduce fatalities. Peace officers who administer Naloxone are protected from civil and criminal liability if they “act with reasonable care and in good faith” (California Health and Safety Code 1797.197 and Civil Code 1714.22). Naloxone is now in the Public Safety First Responder optional scope of practice under the California Code of Regulations, Title 22, Division 9 Prehospital Emergency Medical Services, Chapter 1.5 First Aid and CPR Standards and Training for Public Safety Personnel, specifically section 100019(f).

## 4340.3 PROCEDURES

### 4340.3.1 DEFINITIONS

1. Opioid: A medication or drug that is derived from the opium poppy or that mimics the effect of an opiate. Opiate drugs are narcotic sedatives that depress activity in the central nervous system; these will reduce pain, induce sleep and in overdose will cause people to stop breathing. First responders often encounter opiates in the form of Morphine, Methadone, Codeine, Heroin, Fentanyl, Oxycodone and Hydrocodone.
2. Naloxone: Prescription medications that can be used to reverse depressed breathing and improve alertness. Specifically, it displaces opiates from the receptors in the brain that control the central nervous system and respiratory system. It is marketed under various trademarks, including Narcan®.
3. Naloxone Kit: A Naloxone Kit consists of at least
  - A. Naloxone Nasal Spray (4 mg)
  - B. Pair of Gloves
  - C. Mask
  - D. Eye Protection

# Santa Ana Police Department

Santa Ana PD Procedures Manual

## INTRANASAL NALOXONE

---

### 4340.3.2 TRAINING

1. Initial Training - Officers may not administer Naloxone without the completion of mandated training by HCA/EMS. All participating Officers will receive initial training that will include, at a minimum, an overview of California Civil Code 1714.22, patient assessment (signs/symptomogoy of overdose,) universal precautions, rescue breathing, seeking medical attention and the use of Intranasal Naloxone. Upon completion of training, Officers will have their training recorded with the Training Division.
2. Continuing Training - Officers will receive refresher training as deemed appropriate by HCA/EMS.

### 4340.3.3 NALOXONE APPLICATION

Naloxone should be used by officers who have received Naloxone training and are certified in CPR and First Aid in suspected narcotic overdose:

- Environment is suspicious for illegal or prescription use of narcotics
- Victim is poorly responsive and respiratory (breathing) rate appears slow or shallow; victim is unresponsive and not breathing

### 4340.3.4 ADMINISTERING NALOXONE

Officers should maintain universal precautions and be mindful of conditions that present officer safety concerns, including the individual's history of violence, mental condition and physical size prior to making a determination to administer, or administering Naloxone. Two officers should be present prior to administering Naloxone. Officers should follow these steps before deployment:

1. Identify and assess the individual for responsiveness, pulse and breathing
2. Ensure EMS is responding
3. Don personal protective equipment (gloves, face shield, etc.)
4. Establish an airway and stimulate the individual to determine if the person will awaken (sternum rub technique)
5. If the individual does not respond to stimulation and continues to show poor breathing, an officer may administer Naloxone. Once an officer makes the determination to administer Naloxone, the following procedures will be followed:
  - A. Peel back the sealed package and remove the device
  - B. Place the tip of the nozzle in a nostril until your fingers touch the bottom of the person's nose
  - C. Press the plunger to administer/release full does of the Naloxone into one nostril
  - D. Assess the individual for breathing and improved consciousness
  - E. If partial response in breathing or consciousness, repeat second dose in opposite nostril to first dose
  - F. Officers will use proper tactics when administering Naloxone. Individuals revived from an opioid overdose may regain consciousness in an agitated and

# Santa Ana Police Department

Santa Ana PD Procedures Manual

## *INTRANASAL NALOXONE*

---

combative state and may exhibit symptoms associated with withdrawal including vomiting, sweating, diarrhea, restlessness or irritability. An officer administering Naloxone shall notify a field supervisor as soon as practicable.

### 4340.3.5 FIRST AID

In any situation where the use of Naloxone is considered, if CPR is not necessary and there are no other life-threatening conditions, officers should place the individual in a recovery position on his/her side. Placing someone in the recovery position will ensure their airway remains clear and open. It also ensures that any vomit or fluid will result in choking. Maintain the individual in this position until the arrival of medics.

### 4340.3.6 NALOXONE KIT CHECK OUT AND REPLACEMENT PROCEDURES

Officers who have received the required training and are designated as a first responder will be issued a Nasal Naloxone kit or have the ability to check one out from CDC. Officers assigned to other details will be able to check out a kit from CDC at the start of their shift. Officers will be responsible for the inspection of the Naloxone kit. CDC personnel will be responsible for replacing the kit and monitoring the expiration on each kit. The following procedures will be followed:

1. Officers shall report missing damaged, or expired Nasal Naloxone kit (s) to DBD personnel as soon as practicable
2. Naloxone may be damaged by extreme temperatures, both high and low. Therefore, officers should remove it from the police unit when they are not working. Officers who check out Naloxone at the beginning of their shift shall return the kit to CDV at the end of each shift
3. If a Naloxone kit is administered, the officer administering the Naloxone will be responsible for informing CDC personnel that the kit needs to be restored

### 4340.3.7 REPORTING REQUIREMENTS

When Naloxone is administered on an individual, officers will collaborate with paramedics to ensure the OCFA Patient Care Report (PCR) documents that Naloxone was administered including the number of doses administered. Additionally, an officer who applies Naloxone shall notify a supervisor and document the details of the application on an Information Report including a description of any evidence of drug use (narcotics, drug paraphernalia, etc.) observed at the scene and witness statements. The supervisor shall document deployment on a Supervisor's Log. The supervisor will forward a copy of the log and the original Intranasal Naloxone Report to the Naloxone Coordinator. The Administration Bureau Commander will designate a member of the Training Division to perform the collateral duties of Naloxone Coordinator.