Intranasal Naloxone Medication Procedure

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Purpose
To provide guidance to County of San Bernardino (County) Department of Behavioral Health (DBH) staff on the appropriate steps for consideration/administration of intranasal naloxone when responding to a client that is experiencing an emergency medical condition potentially caused by an opioid overdose.

Procedure
Staff who meet the Opioid Overdose Responder criteria outlined in the Intranasal Naloxone Medication Policy (MDS2028) shall follow the subsequent steps when an individual at a DBH facility is experiencing an emergency medical condition, and there are credible and/or contextual signs indicating the cause is due to an opioid overdose.

Note: Credible and contextual evidence of opioid overdose includes but is not limited to: shallow and/or profoundly delayed breathing, discoloration (bluing) of lips and hands (cyanosis), and/or altered consciousness/mental state.

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Opioid Overdose Responder, as defined in Intranasal Naloxone Medication Policy (MDS2028), will respond to the medical emergency and evaluate the individual for credible and/or contextual signs of an opioid overdose.</td>
</tr>
<tr>
<td>2</td>
<td>If credible and/or contextual signs of an opioid overdose are present, the intranasal naloxone stored at the clinic location must be accessed and administered by the Opioid Overdose Responder.</td>
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| 3    | Opioid Overdose Responder will call or instruct other responding staff to call a “Code Blue” in the clinic to summon medical staff to the medical emergency.  
**Note:** Staff not directly responding to the individual shall call the “Code Blue” to summon medical staff to respond to the medical emergency. |
| 4    | Opioid Overdose Responder will call or instruct other responding staff to call 9-1-1 to summon Emergency Medical Services (EMS).  
**Note:** Staff not directly responding to the individual shall call the 9-1-1 to request EMS to respond to the medical emergency. |
| 5    | After the initial dose of intranasal naloxone has been administered to the individual experiencing the medical emergency, “Code Blue” and 9-1-1 have been called.  
| **If ...** | **Then ...** |
| The individual **does not** respond to the dose of intranasal naloxone medication and remains **unconscious** | Proceed to **Step 6** |
| The individual **does** respond to the administered dose of intranasal naloxone medication and **regains consciousness** | Proceed to **Step 8** |

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Intranasal Naloxone Medication Procedure, Continued

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<td>6</td>
<td>As the individual did not respond to the administration of the intranasal naloxone medication, Cardiopulmonary Resuscitation (CPR) efforts should be performed on the individual. CPR must only be performed by medical staff or properly trained staff certified in CPR administration, with the use of a mouth barriers for rescue breaths.</td>
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<tr>
<td>7</td>
<td>After the first dose of intranasal naloxone is administered and CPR activities have been performed</td>
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<tr>
<td></td>
<td>If ...</td>
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<tr>
<td></td>
<td>The individual does respond to the administration of intranasal naloxone and CPR</td>
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<tr>
<td></td>
<td>The individual has not responded within 2 minutes to the administration of intranasal naloxone and CPR</td>
</tr>
<tr>
<td>8</td>
<td>Monitor individual’s breathing and vital signs until EMS arrives and are able to provide medical assistance.</td>
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Incident Documentation

Per Intranasal Naloxone Policy (MDS2028), staff who have responded to the emergency medical situation, but are not actively rendering aid to the individual or staff members who are rendering aid, will begin the documentation process.

Staff should begin documenting elements about the individual such as, but not limited to:

- Individual’s respiration rate;
- Quality of their respiration;
- Individual’s pulse;
- Individual’s pupil dilation;
- Individual’s level of consciousness;
- Condition the individual was found in;
- Times events transpired, and
- Name/accounts of any witnesses to the medical emergency.

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Related Policy or Procedure

DBH Standard Practice Manual:
- Control, Access and Accountability of Medications and Medical Supplies Policy (MDS2008)
- Intranasal Naloxone Medication Procedure (MDS2028-1)
- Urgent and Emergency Conditions Procedure (MDS2031)
- Special Incident Reporting Procedure – Client Related (SFT7016)
- How to Report an Incident (SFT7017)

Reference(s)

- California Civil Code, Section 1714.22
- California Department of Public Health, Naloxone Statewide Standing Order Frequently Asked Questions
- Standing Order to Dispense Naloxone Hydrochloride