

## Monongalia County Health Department

### Naloxone Standing Order

Naloxone HCL is a medication indicated for reversal of opioid overdose that is the result of consumption or use of one or more opioid-related drugs causing a drug overdose event.

#### **PURPOSE**

This standing order is intended to ensure the residents of Monongalia County, in the State of West Virginia who are eligible to receive naloxone, have access to obtain the medication.

Persons eligible to receive naloxone under this protocol include:

1. Persons with a history of receiving emergency medical care for acute opioid poisoning or overdose
2. Persons with a suspected history of substance abuse or nonmedical opioid use
3. Persons receiving high-dose opioid prescriptions (e.g. >50mg morphine equivalent)
4. Persons who are opioid naïve and receiving a first prescription for methadone for pain
5. Persons starting buprenorphine or methadone for addiction treatment
6. Persons taking opioid prescriptions for pain in combination with:
  - a. Smoking, COPD, emphysema, sleep apnea, or other respiratory illness
  - b. Renal dysfunction, hepatic disease, or cardiac disease
  - c. Known or suspected alcohol use
  - d. Concurrent benzodiazepine other sedative prescription
7. Persons who may have difficulty accessing emergency medical services
8. Voluntary request by person or agency
9. Any person at risk of an opioid overdose
10. Family members, friends or other persons who are in a position to assist a person at risk of experiencing an opioid-related overdose.

#### **AUTHORIZATION**

This standing order is intended for utilization by Monongalia County Health Department and Monongalia County QRT to provide naloxone to eligible individuals that have completed West Virginia Office of EMS/ Office of Drug Control Policy Naloxone Training.

Designated Individuals authorized to utilize this standing order include:

- Medical Assistant
- Nurse
- EMS
- Peer Recovery Coach
- Medical Student
- First Responder

Designated Individuals MUST complete the WVOEMS Naloxone Train-the-Trainer Program prior to training individuals in the community and providing naloxone pursuant to this standing order.

#### **ADMINISTRATION**

Per WV State Code:

Any person who administers opioid antagonist in good faith to someone they believe to be suffering from an opioid-related overdose is not subject to criminal prosecution arising from possession arising from the possession of an opioid antagonist or subject to any civil liability with respect to the administration of or

failure to administer the opioid antagonist unless the act or failure to act was the result of gross negligence or willful misconduct.

Any person who administers an opioid antagonist to a person they believe to be suffering from an opioid-related overdose is required to seek additional medical treatment at a medical facility for that person immediately following the administration of naloxone to avoid further complications from medical problems that are not obvious at the time.

### **REQUIRED EDUCATION/ COUNSELING**

Prior to dispensing naloxone, education must be provided to the individual receiving naloxone by the designated individual. All dispensing personnel must provide counseling points on naloxone (see below). Counseling MAY NOT be waived. All individuals receiving naloxone must be counseled.

- If dispensing personnel is not a registered pharmacist or prescriber, the WVOEMS Naloxone Training MUST be included in the education provided.
  - At a minimum, counseling must be provided each time the individual receives naloxone.
- ALL PERSONS DISPENSING MUST supply a copy of both brochures provided through and maintained by the WVOEMS and the Office of Drug Control Policy. Copies of the brochures may be found on the WVOEMS website and the WV Board of Pharmacy Naloxone Protocol webpage.

#### **Counseling points:**

##### *Opioid overdose*

- Signs/symptoms of an opioid overdose
  - Difficulty or stopped breathing, turning blue (lips and fingertips)—lack of oxygen is what causes brain damage and death
  - Not responsive to verbal or physical cues (shouting or sternal rub)
  - Suspicion of possible overdose
- Importance of ensuring open airway and breathing, if possible
  - Maintain an open airway – straighten throat/neck and airway
  - Encourage to take a Red Cross CPR class to ensure training on rescue breathing
  - Assist with breathing—use one-way valve mask or another form of CPR mask
- Provide the recipient with the number to talk with someone regarding available substance use disorder treatment and recovery services (1-844-HELP4WV)

##### *Product*

- Dosing and proper administration of product dispensed
- Effectiveness
- Adverse Effects
- Safety
- Ensure understanding that naloxone may not be used on someone with a hypersensitivity (allergic reaction) to naloxone
- Storage conditions (Room temperature—avoid hot and cold)
- Shelf-life (Expiration date, on box)
- Must be appropriately labeled

*Legal aspects*

- Importance of calling 911 as soon as possible either before or after administration of naloxone and the risks associated with failure to contact emergency services following administration of opioid antagonist
- If 911 is NOT contacted
  - Individual is not protected from liability if they do not call 911 or get the person to the hospital
  - Naloxone may wear off, and the patient can stop breathing again even if the individual does not take more opioids
    - Remain with the person
  - Do not put the person in ice water

**FORMULATION AND DIRECTIONS**

*Intranasal administration:*

**Narcan® Naloxone HCL 4 mg/0.1 ml Nasal Spray**

Dispense #1 Box (2 units each)

SIG: Call 911

Do not prime device. Spray into nostril upon signs of opioid overdose. Ensure head is tilted back and nostril is not blocked prior to administration. May repeat in 3 minutes in opposite nostril if breathing has not returned. Dosing may be repeated as needed until breathing returns or until EMS arrives.

**REVIEW**

This standing order will be reviewed and may be updated as additional information or changes to legislation/ training materials occur. This standing order may be withdrawn by the physician at any time.

ECECUTED on this 27<sup>th</sup> day of November, 2019.

  
Executive Director and County Health Officer  
Monongalia County Health Department

DEA #: F50664347

NPI #: 1659455236