# 5.29 Naloxone Administration, Usage, Maintenance, and Disposal Policy & Procedures

## I. PURPOSE:

Naloxone is indicated for the complete or partial reversal of opioid depression when there is a reasonable belief that a person is suffering from an opioid overdose. Naloxone is also indicated for the diagnosis of suspected or known acute opioid overdosage. Opioid overdose kills thousands of Americans every year.

## II. POLICY:

Naloxone may be administered by any Central Lakes College (CLC) employee formally trained in Naloxone administration procedures. Work-study students may also receive training and administer naloxone at their work-study supervisor's discretion. Naloxone is supplied in a single 4mg dose of naloxone hydrochloride in a 0/1ml intranasal spray or injection.

Training may be completed by attending an in-person or online session through The Steve Rummler Hope Network. Central Lakes College encourages all faculty and staff to complete the training. Training registration can be found at the following link: Naloxone Training. | Steve Rummler HOPE Network.

## III. PROCEDURE:

Employees shall determine, through their investigation and training, if the unresponsive individual is suffering from a suspected or known opioid overdose. However, anyone who administers Naloxone nasal spray using appropriate procedures and calls 911 in good faith is covered under the Good Samaritan Law in Minnesota. Naloxone will not harm someone if you give it to them, and they are not overdosing on an opioid.

In all cases of suspected overdose, the following steps should be taken:

1. Call 911 for any patient who presents signs or symptoms of an overdose. If you do not have a Narcan kit, contact campus security after calling 911. Symptoms of overdose include, but are not limited to:
    a. Respiratory depression, <10breaths/min
    b. Hypotension (low blood pressure)
    c. Cyanosis- blue lips and fingertips
    d. Extreme tiredness- hard to awaken
    e. Progression to stupor or coma, a limp body
    f. Cold or clammy skin
    g. Pinpoint pupils
    h. Bradycardia (slow heart rate)

    i. Unable to speak/incoherent
    j. Gurgling or snoring sounds
2. Provide Rescue Breathing or CPR as determined by your level of training and the most current CPR guidelines: One breath every 5-6 seconds, or CPR if indicated.
3. Administer naloxone per training. Naloxone starts working in 3-5 minutes and lasts 30-90 minutes. Continue rescue breathing/ CPR until Naloxone starts to work. Depending on the type of opiate, additional doses may be needed within a few minutes of the original dose.
4. Procedures for Naloxone (Narcan) nasal spray. Procedures may vary slightly based on the manufacturer. Authorized employees should familiarize themselves with their product's instructions.
    a. Remove Narcan nasal spray from the box, bag, or other packaging. Peel back the tab with the circle to open the Narcan.
    b. Hold the Narcan nasal spray with your thumb on the bottom of the plunger and your index and middle fingers on either side of the nozzle.
    c. Lay the person on their back and administer the naloxone nasal spray as quickly as possible while supporting the back of the neck to allow the head to tilt back.
    d. Gently insert the nozzle tip into one nostril until your fingers on either side of the nozzle are against the bottom of the person's nose.
    e. Press the plunger firmly to give the dose of Naloxone nasal spray. Remove the nasal spray from the patient's nostril after giving the dose.
    f. Continue rescue breathing/ CPR until Naloxone starts to work.
    g. Move the patient to the recovery position once they are breathing.
    h. Administer a second dose of Naloxone nasal spray if the person is not responsive after 2-3 minutes or if they relapse into respiratory depression.
    i. Be prepared for agitation upon emergence from unresponsiveness. Be prepared to control any situation, including where the patient and bystanders or rescuers may need protection from harm.
    j. Nausea and vomiting may occur as the naloxone takes effect. Be prepared to place the patient on their side to avoid choking.
5. Documentation:
    a. Note the doses, times of administration, and patient response.
    b. Communicate pertinent information to EMS and CLC security for reporting purposes.
6. Purchase/Procurement:
    a. The Steve Rummler Hope Network currently offers a free naloxone dose upon completion of training.
    b. A replacement naloxone dose may be requested through the CLC Safety Officer. The CLC Safety Officer may request a copy of the employee's training certification before ordering a replacement dose.
7. Location and storage:
    a. Trained and authorized employees will be responsible for safely storing their naloxone. Naloxone should be stored in a dry and room-temperature location.

b. Authorized employees are responsible for maintaining their naloxone per the manufacturer's guidelines and requesting a replacement when the naloxone has expired.
c. The naloxone dose will be located in the Security office. A centralized location will also be identified on Staples campuses.

8. Disposal:
    a. Expired naloxone should be disposed of as medical waste. Please give expired doses to the CLC Safety Officer.

**VI: REFERENCES**:

a. Naloxone - MN Dept. of Health (state.mn.us)
b. Steve Rummler HOPE Network | Providing Hope. Join The Fight!

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