

415 Utilization of Narcan

415.1 PURPOSE

To establish guidelines governing the utilization of Narcan by police officers.

415.2 POLICY

Officers administering Nasal Naloxone (Narcan) shall be properly trained prior to its use and deployment.

415.3 DEFINITIONS

Heroin - Heroin is an opioid drug that is synthesized from morphine, a naturally occurring substance extracted from the seed pod of the opium poppy plant. Heroin usually appears as a white or brown powder or as a black sticky substance, known as "black tar heroin." Heroin chemically converts to morphine in the brain.

Naloxone - Also known as Narcan- a synthetic drug, chemically similar to morphine, which blocks opioid receptors in the nervous system. This drug is intended to restore breathing for subjects experiencing an opioid overdose. It is not intended to bring the subject back to a normal state.

Opioids - Opioids are medications that are naturally or chemically related to heroin. They reduce the intensity of pain signals reaching the brain and affect those brain areas controlling emotion, which diminishes the effects of a painful stimulus.

Common Opioids

<u>Dextropropoxyphene</u>	<u>Diamorphine</u>
<u>Codeine</u>	<u>Hydromorphone</u>
<u>Tramadol</u>	<u>Oxymorphone</u>
<u>Tapentadol</u>	<u>Leverphanol</u>
<u>Anileridine</u>	<u>7-Hydroxymitragynine</u>
<u>Alphaprodine</u>	<u>Buprenorphine</u>
<u>Pethidine</u>	<u>Fentanyl</u>
<u>Hydrocodone (Vicodin)</u>	<u>Sufentanil</u>
<u>Morphine</u>	<u>Bromadol</u>
<u>Oxycodone (Percocet)</u>	<u>Etorphine</u>
<u>Methadone</u>	<u>Dihydroetorphine</u>
<u>Oxycontin</u>	<u>Heroin</u>

415.4 CONSIDERATIONS

(a) General Considerations:

1. Universal precautions should be used with a minimum of nitrile, latex, or equivalent gloves. An officer's first priority should be scene safety.
2. Officers may need to kneel or crouch during evaluation and application. This should only be done if it does not expose the officer to increased risk of assault or injury. If the victim is awake, officers should not administer Narcan and should wait for medical personnel to arrive.
3. Narcan can be administered to a police K9 that has accidentally inhaled an opioid during their search duties. Dosing is the same as for a human.

(b) Narcan use for non-opiates:

1. Narcan will not reverse overdoses that are caused by non-opioid drugs, such as cocaine, benzodiazepines (e.g., Xanax, Klonopin, and Valium), methamphetamines, or alcohol. It should not be used when evidence shows overdose is caused by a non-opioid drug.
2. If a "mixed overdose" is suspected, where non-opioid and opioid based drugs are used together, follow the listed procedures for an opioid overdose. Administering Narcan on a subject that is not experiencing an opioid overdose will not harm the subject.

(c) Considerations for Use of Narcan:

1. Once the officer has decided to administer Narcan, the officer should notify Communications. Communications should relay the information to responding medical personnel. When available a backup officer should also be dispatched to assist with any possible violent reaction.
2. Narcan may be used when an opioid overdose is reported or reasonably suspected and the victim is unconscious. This can include but is not limited to:
 - (a) Where the person is found to be unresponsive, there is an absence of breathing or the victim has no pulse, is unresponsive to a sternum rub and has bluish lips and nail beds, constricted pupils, or bluish general appearance.
 - (b) Where the person is found to be unresponsive, but still has a pulse and breathing.
 - (c) When advised by dispatch that a given person appears to be suffering an opioid overdose at a given location and meets the victim presentation examples above.
 - (d) When observing drugs, drug paraphernalia or drug instruments associated with the individual, or meets other signs listed below:
 1. Breathing may be slow and shallow (less than 10 breaths per minute which equals 1 breath every 6 seconds) or may have stopped
 2. Vomiting
 3. Face may be pale and clammy
 4. Pulse (heartbeat) may be slow, erratic, or not present
 5. Choking or loud snoring noises
 6. May not respond to shaking or sternum rub
 7. Skin may turn gray, blue, or ashen

415.5 PROCEDURE

The Property Control Office (PCO) will keep inventory of all Narcan kits. Additional kits will be issued to Patrol Lieutenants in the event PCO is not available.

415.5.1 STORAGE

Narcan should be stored securely, at room temperature and not exposed to light. It should not be left in a car for extended periods of time and must not be subjected to extreme heat or cold for over 2 hours.

415.5.2 DEPLOYMENT

- (a) Once scene safety and universal protections are in place and the use of Narcan has been decided on as an appropriate action, officers should follow these steps:
 1. Retrieve the Narcan kit and prepare for deployment per Department training.

2. Prepare victim for administration of Narcan by placing the victim into "recovery position" (either left or right side). This will aid in keeping the airway clear, preventing the victim from choking on vomit or other secretions.
3. Insert white cone into nostril; give a short vigorous push on the end of the capsule to spray Narcan into nose.
4. If no reaction in 2-5 minutes, give a second dose if available.
5. Following the dose, ventilation should be provided utilizing a bag-valve mask. AFD carry bag-valve masks and can provide ventilation once on-scene. Officers should not wait for AFD to arrive before administering the dose.
6. Note any changes in the victim's condition to tell medical personnel upon their arrival.
7. Continue to render first aid until medical personnel arrival.
8. Once medical personnel is on scene provide any pertinent information to them including the condition of the victim when found, dose given, the victim's response to the Narcan and the name of the administering officer.
9. The used Narcan dose shall be placed back in the original packaging with the PCO barcode, placed in an evidence bag, labeled "Used", and returned to PCO.

415.6 REPORTING

Upon administering Narcan, an incident report shall be submitted detailing the nature of the incident. The report shall include the PCO barcode. The proper Versadex Role Code shall be applied to the overdosing subject.

Should a dose of Narcan be damaged, lost, or stolen, the officer must comply with General Order 800.4.1 *Damaged, Lost, and Stolen City Property*.

415.7 TRAINING

All officers administering Narcan will receive initial training that will include, at minimum, an overview of Texas Health and Safety Code Subchapter E, 483.106 (b), which permits emergency services personnel to administer Narcan, and the Department's "Naloxone Carry and Use Training" module.

415.8 OFFICER RESPONSIBILITIES

- (a) Officers who have received the appropriate training shall request Narcan through PCO or an on-duty lieutenant at the beginning of each shift and return the Narcan at the end of shift.
- (b) If a dose of Narcan has been damaged the officer will place the dose with original packaging in a bag labeled "Damaged" and returned to PCO.

415.9 LIEUTENANT RESPONSIBILITIES

In the event PCO is not available, the Patrol Lieutenant will issue the Narcan to the officer and email PCO the officer's name and PCO barcode.

415.10 PROPERTY CONTROL OFFICE (PCO) RESPONSIBILITIES

- (a) PCO will issue Narcan to officers at the beginning of the officer's shift and restock when returned.
- (b) PCO will advise Risk Management when a dose has been returned used or of any damaged doses via the SmartSheet submission form.
- (c) PCO will periodically check doses to ensure they have not reached the expiration date.
- (d) PCO will determine the best time to restock based on usage.

415.11 APD RISK MANAGEMENT RESPONSIBILITIES

- (a) The APD Risk Management Lieutenant is responsible for verifying that the individuals having access and/or administering Narcan receive training on overdose response techniques and Narcan administration as well as the proper storage of the medication and disposal of the used or damaged Narcan dispensers.
- (b) APD Risk Management will monitor all doses that have been damaged or used and provide a summary report upon request.