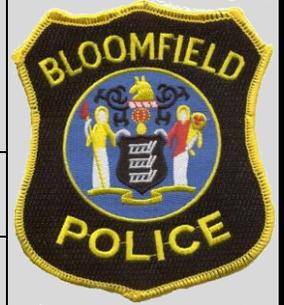


BLOOMFIELD POLICE DEPARTMENT GENERAL ORDERS



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CHAPTER: 13

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SUBJECT: NASAL NARCAN (NALOXONE)

BY THE ORDER OF:

Director of Public Safety Samuel A. DeMaio

ACCREDITATION STANDARDS: N/A

Effective Date:

January 2, 2015

SUPERSEDES ORDER #:

PURPOSE The purpose of this general order is to establish guidelines and regulations governing utilization of the nasal Narcan administered by the Bloomfield Township Police Department. The objective is to treat opioid overdoses and reduce fatal opioid overdoses.

POLICY It is the policy of the Bloomfield Township Police Department for trained officers to administer nasal Narcan to persons suffering from opioid overdoses at the earliest possible time to minimize overdosing in accordance with law and Essex County Prosecutor's directives and guidelines.

It is also the policy of the Bloomfield Township Police Department that officers who will be administering Narcan are properly trained in the use and deployment of the Narcan according to the laws of the State of New Jersey.

PROCEDURES

I. GENERAL

- A. The patrol commander or his/her designee is designated as the Narcan coordinator. Responsibilities include:
1. Ensuring that the Narcan inventory is current and not expired.
 2. Proper and efficient deployment of Narcan for patrol.
 3. Replacement of any Narcan that is damaged, unusable, expired or deployed.
 4. Ensuring that all personnel using Narcan have received appropriate training.
 5. Ensure that any deployment of Narcan is documented with the reports noted in this general order.
 6. Ensure that Narcan use is reported to the Essex County Prosecutor's Office Narcan coordinator within 24 hours. See section III of this general order for reporting requirements.
- B. Extreme temperatures both high and low can affect adversely the efficacy of Nasal Narcan. Due to this fact, Narcan kits should be stored in the interior of a patrol vehicle when these conditions exist. Officers shall take a Nasal Narcan kit on patrol and return the kit following their shift.
- C. The roll call sergeant shall issue Narcan kits to officers assigned to geographically defined zones and to the mobile laboratory.
1. Officers are responsible for inspecting the kit prior to each shift to ensure its integrity.
 2. Officers shall return the kits to the roll call room at the completion of their shift.
 3. Missing or damaged Narcan kit(s) will be reported to the roll call sergeant or shift supervisor. The missing or damaged kit shall also be documented in a CAD record.
- D. The Narcan coordinator shall be notified if a Narcan kit is taken off line or needs replacement/maintenance and shall replace the kit as soon as practicable.
- E. Spare kits will be maintained in the roll call room and the front desk.

II. INDICATIONS & USE

- A. Authorized officers shall utilize Narcan on subjects believed to be suffering from an opioid overdose. Information that a subject is suffering from an opioid overdose include, but are not limited to:
1. Blood-shot eyes;

2. Pinpoint pupils, even in a darkened room/area;
 3. Depressed or slow respiratory rate;
 4. Difficulty breathing (labored breathing, shallow breaths);
 5. Blue skin, lips, or fingernails;
 6. Decreased pulse rate;
 7. Low blood pressure;
 8. Loss of alertness (drowsiness);
 9. Unresponsiveness;
 10. Seizures;
 11. Evidence of ingestion, inhalation, injection (needles, spoons, tourniquets, needle tracks, bloody nose, etc.);
 12. Direct eyewitness account;
 13. Past history of opioid use/abuse.
- B. Officers shall follow the protocols outlined in their Nasal Narcan training.
- C. When using the Narcan kit, officers will maintain universal precautions against pathogens, perform patient assessment; determine unresponsiveness, absence of breathing and or pulse.
- D. Officer(s) should update communications that the patient is in a potential overdose state.
- E. Communications personnel will promptly notify EMS and a paramedic unit.
- F. Nasal Narcan deployment protocol:
1. Identify and assess victim for responsiveness, pulse and status of breathing.
 2. If no pulse, initiate CPR and AED as per normal protocol; notify incoming EMS.
 3. If pulse is present and the victim is unconscious, assess breathing status.
 - a. If breathing is adequate (>8 per minute, no cyanosis) and no signs of trauma, place in the recovery position.
 - b. If breathing is decreased or signs of low oxygen (cyanosis) and overdose is suspected (based on history, evidence on scene, bystander reports, physical examination) then proceed with Narcan administration.

4. Retrieve Narcan kit.
 5. Assemble kit.
 6. Administer a maximum of 1mg in each nostril for a total of 2mg, using the mucosal atomizer device.
 7. Initiate breathing support with pocket mask, bag-valve-mask and oxygen if available.
 8. If no response after 3-5 minutes and a second dose of naloxone is available, repeat the administration.
 9. Continue to monitor breathing and pulse – if breathing increases and there is no evidence of trauma, place in the recovery position.
 10. If at any time pulses are lost, initiate CPR and AED as per normal protocol.
 11. Advise communications that Narcan is being administered. Communications shall ensure that the duty shift supervisor is promptly notified.
 12. Keep responding EMS advised of patient status when able to do so.
 13. Give full report to EMS when they arrive.
- G. After deploying Nasal Narcan that results in a resuscitation of an overdose victim, that officer should ensure that person receives appropriate follow-up care. The effects of Narcan only last for a limited period of time and the person may experience another opiate overdose when the effects of the Narcan wear off.
1. Every effort should be made to encourage that person to be transported to the hospital for additional care. Officers should ensure that person is taken to a medical facility by ambulance regardless of his/her refusal. The administering officer shall not accept a refusal of medical treatment from the patient after administering Narcan. Only EMS, paramedics or hospital personnel can accept a refusal.
 2. Furthermore, the officer should accompany the ambulance personnel for their safety. Police department and EMT procedures should not be otherwise circumvented as a result of this protocol.
- H. Obtain a replacement Narcan kit from the roll call room or the front desk.

III. DOCUMENTATION REQUIREMENTS

- A. Upon completing the medical assist, the officer shall complete a Narcan Administration Reporting Form and a standard incident report detailing the nature of the incident, the care the patient received, and the fact that the Narcan was deployed.
1. The officer's supervisor shall review the form and incident report for accuracy and completeness and forward it to the patrol commander or his/her designee.

2. The patrol commander or his/her designee shall ensure that a copy of the completed *Narcan Administration Reporting Form* is remitted by email to the Essex County Prosecutor's Office Narcan coordinator (Deputy Chief Quivella Spruill) at QM.spruill@njecop.org.
- B. The patrol commander shall maintain these forms and reports for statistical value and tracking of the Narcan deployment.