



Policy Number: 413 – Administration of Naloxone (Narcan)

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Approved By: Denis Otterness, Chief of Police

413.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the utilization of Naloxone (Narcan) to reduce fatalities from opioid-related overdoses and exposures.

413.2 POLICY

The Montana State University Billings Police Department is committed to reducing fatalities from opioid-related overdoses and exposures. University Police Department officers will be trained in the use of Naloxone (Narcan) by appropriate personnel and will complete biennial in-service training, as required, by appropriately trained personnel. No officer shall carry or administer Naloxone (Narcan) without first attending the initial training and subsequent biennial training, as required. No officer shall, after attending appropriate training, be subject to disciplinary action for not administering Naloxone (Narcan) as long as appropriate medical responders are summoned to the scene.

413.3 TRAINING

413.3.1 Initial Training

Opioid-related overdoses result from the slowing of breathing, eventually leading to respiratory failure. Signs include non-responsiveness, inability to speak, slow or no breathing, and blue or grayish lips and fingernails. Overdose deaths typically occur within one to three hours after intake of the drug.

All sworn personnel will receive initial training that will include an overview of Montana Code Annotated 50-32-6, frequently referred to as Help Save Lives from Overdose Act, use of Naloxone (Narcan), patient assessment (e.g., signs/symptoms of overdose), universal precautions, seeking medical attention, and the use of intra-nasal Naloxone (Narcan) by appropriate trained personnel. In addition, officers will receive an overview of the Montana Department of Health and Human Services' statement, dated October 2017, titled Montana Implementation Guide for Access to Naloxone Opioid Antagonists.

Upon completion of training, officers will have their training recorded and documented by the University Police Department Patrol Sergeant.

413.3.2 In-Service Training

All sworn personnel will receive biennial continuing education that will cover training similar to initial training. This training will be delivered by appropriately trained personnel.

Completion of biennial in-service training will be recorded and documented by the University Police Department Patrol Sergeant.

413.4 Issuing Naloxone (Narcan)

The Department will issue Naloxone (Narcan) to sworn University Police Department personnel to be carried while on duty. In addition, officers will ensure that Naloxone (Narcan) is available for use in Department deployed go-bags at the beginning of each shift.

413.5 Naloxone (Narcan) Deployment

Officers should exercise extreme caution when responding to scenes involving drugs, to include the use of protective clothing. Of particular concern is the increased availability of fentanyl and carfentanil. Inhalation and skin contact with these drugs can result in serious injury or death.

When an officer believes there has been an opioid-related overdose the officer should do their best to:

1. Maintain universal precautions.
2. Perform a patient assessment.
3. Speak with bystanders, if appropriate, and scan the area for indications of opioid use.
4. Determine patient's level of alertness, looks for signs of life, and determine if depressed/absent breathing is occurring.
5. Notify City/County Dispatch that the patient is in a potential overdose state and request medical response, if not already enroute; and
6. Administer Naloxone (Narcan) in accordance with current training standards.

Following the administration of Naloxone (Narcan), victims may wake up confused and lethargic and will often immediately experience opioid withdrawal symptoms, such as sweating, vomiting, and diarrhea. Precautions should be taken as some victims may be agitated and combative.

Officers will notify responding medical units of all medical steps taken prior to or upon their arrival. See also University Police Department Policy 412 – Medical Aid and Response for additional considerations when responding to calls for medical assistance.

413.6 Maintenance and Replacement

An inspection of the Naloxone (Narcan) kits shall be the responsibility of the personnel assigned. Missing, damaged, or expired Naloxone (Narcan) kits will be reported to a Department supervisor and be replaced or pulled out of service as appropriate.

In the event an officer has to administer their Department-issued Naloxone (Narcan) it will be reported to a Department supervisor so it can be replaced.

It is recommended that Naloxone (Narcan) kits not be left in off-duty police vehicles when the ambient outside temperature will drop below freezing or rise above 90 degrees Fahrenheit.

413.7 Documentation

Upon completion of a call for medical assistance, and subsequent administration of Naloxone (Narcan), officer(s) will submit a report detailing the nature of the incident, the care the patient received, and the facts regarding the administration of Naloxone (Narcan).