Marion County Board of Education

Monitoring: Descriptor Term: Descriptor Code: Issued Date:

Review: 5.404 04/01/19
Annually, Rescinds: Issued:

in March Naloxone/Narcan Policy S.404 04/01/19

I. PURPOSE

The purpose of this policy is to establish guidelines and procedures governing the utilizations of the opioid antagonist naloxone administered by members of the Marion County School Department.

II. POLICY

It is the policy of Marion County Schools that all public middle schools, junior high schools, and high schools, shall provide and maintain on-site in each school facility opioid antagonists. To treat a case of suspected opioid overdose in a school setting, any trained staff member may administer an opioid antagonist, during an emergency, to any student or staff suspected of having an opioid-related drug overdose whether or not there is a previous history of opioid abuse.

No trained staff member shall be liable for civil damages which may result from acts of omissions relating to the use of the opioid antagonist which may constitute ordinary negligence; nor shall the school personnel be subject to criminal prosecution which may result from acts of omissions in the good faith administration of an opioid antagonist. This immunity does not apply to acts or omissions constituting gross negligence or willful or wanton conduct. No school employee shall be subject to penalty or disciplinary action for refusing to be trained in the administration of an opioid antagonist.

III. TRAINING

Any employee that is expected to provide emergency care to an individual will successfully complete the training from the Tennessee Department of Health or affiliates on Naloxone/Narcan administration. (T.C.A. 63-1-152 (e)).

IV. PROCUREMENT OF NALOXONE

The Director of Schools and/or Assistant Director of Schools, Health Services Director or designee will be responsible for the procurement of Naloxone/Narcan. The school physician shall prepare standing orders and update annually. The Tennessee Department of Health recommends that schools provide intranasal Naloxone/Narcan.

INTRANASAL NALOXONE/NARCAN PROCEDURE

The purpose of this document is to establish written guidelines and procedures governing the utilization of Naloxone/Narcan.

Location/Placement

The location/placement of the Naloxone/Narcan is to be determined by each school. The Naloxone/Narcan should be placed in the most accessible location. If the Naloxone/Narcan is contained in a closed cabinet, the cabinet will be clearly marked as containing the medication.

Training Requirements

Any employee that is expected to provide emergency care to an individual will successfully complete the training from the Tennessee Department of Health or affiliates on Naloxone/Narcan administration. (T.C.A. 63-1-152(e)).

Indication for Use

Naloxone/Narcan is an opioid antagonist, which means it displaces the opioid receptors in the brain and can therefore reverse an opioid overdose. An opioid is a medication/drug that is derived from the opium poppy or that mimics the effect of an opiate (a synthetic opiate). Opioid drugs are narcotic sedatives that depress activity of the central nervous system, reduce pain, and induce sleep. Naloxone/Narcan is not a scheduled drug, and it has no euphoric properties and minimal side effects. If **it is administered to a person who is not suffering an opioid overdose, it will do no harm.** Naloxone/Narcan can be administered to any child greater than a month old if needed. Do not administer to infant less than a month old.

Procedure for Use of Intranasal Naloxone/Narcan

- 1. Assess scene for safety
- 2. Use universal/standard precautions for protection from blood borne pathogens and communicable diseases. Wear Gloves.
- 3. Determine if individual is unresponsive. If unresponsive, yell for help. Have someone call EMS (911) and get AED and CPR equipment and First AID response team.
- a. Recognizing an overdose
- * Unresponsiveness to yelling or stimulation, like rubbing your knuckles on breast bone.
- * Slow, shallow or no breathing
- * Turning pale, blue or gray (especially lips and fingernails)
- * Choking sounds
- * Reasonable suspicion of ingesting opioid(s)

If person stops breathing, begin CPR per training.

- 4. Administer intranasal Naloxone/Narcan (4mg /O.lml)
- a. Squirt vial into nostril. Push the applicator fast to make a fine mist.
- b. Note time.
- 5. Stay with person and keep him/her breathing.
- a. Continue giving mouth to mouth (with barrier) breathing if the person is not breathing on their own after administration of Naloxone/Narcan.

- b. Give second dose/syringe of intranasal Naloxone (4mg/0.1ml) after 2-5 minutes if person does not wake up and breathe more than 10-12 breaths a minute. Squirt second dose into other nostril
- c. Note time.
- 6. Check for breathing (if not breathing or only gasping, continue CPR per training)
- 7. Place the person on their side if he/she is breathing on their own.
- a. Naloxone/Narcan can induce vomiting, this position will help protect the person from inhaling the vomit.
- 8. Wait for EMS/911 personnel to arrive.
- a. Inform EMS personnel about the treatment and condition of person.

Replacement of Naloxone/Narcan

Damaged Naloxone/Narcan and first aid equipment will be reported to Health Services Director for replacement. A written statement will be required in the event the needed replacement was due to damage or being lost. If available, used, expired or damaged doses will be exchanged/replaced through the Hamilton County Coalition.

Records and Reporting

- 1. Following Naloxone/Narcan *use*, notify the school principal or designee and the Health Services Director who will also notify Director of Schools and Medical consultant.
- 2. The Intranasal Naloxone/Narcan Use Reporting Form will be completed after any incident requiring usage of the Naloxone by the initial responder. Copies will be provided to the designated school and district staff.
- 3. The Health Services Department will maintain an inventory documenting the quantities and expirations of Naloxone replacement supplies and keep copies of the Naloxone/Narcan Use Reporting Forms that are submitted.

V. PROCEDURE

Follow the Intranasal Naloxone/Narcan Procedure Guidelines (See Procedure Guidelines)

Legal References: 1. T.C.A. 63-1-152 (e)