PURPOSE
To establish the processes and procedures to allow for approved public safety personnel (PSP) to provide intranasal naloxone to patients with suspected acute narcotic overdose.

AUTHORITY
California Health and Safety Code - Division 2.5: Emergency Medical Services [1797. - 1799.207.]
California Code of Regulations, Title 22. Social Security, Division 9. Ch. 1.5 Prehospital Emergency Medical Services

Training Standards
1. Agencies that employ PSPs in Riverside County seeking to utilize naloxone to manage patients with suspected narcotic overdose shall be authorized and approved by REMSA in accordance with state laws, regulations and REMSA policies. Authorized agencies shall administer naloxone in accordance with this policy.
2. PSPs must be trained to the Public Safety Personnel First Aid and CPR standard as outlined in Title 22, Division 9, Chapter 1.5, Section 100017 (found here: https://govt.westlaw.com/calregs/Document/I64A10E20B55D11E4BD3CC9706BA5168A?viewType=FullText&originationContext=documenttoc&transitionType=CategoryPageItem&contextData=(sc.Default)&hcp=1) and maintain ongoing competencies and proficiencies as outlined by Section 100022 (found here: https://govt.westlaw.com/calregs/Document/I654EB340B55D11E4BD3CC9706BA5168A?viewType=FullText&originationContext=documenttoc&transitionType=CategoryPageItem&contextData=(sc.Default).
3. Ongoing competency for the administration of intranasal naloxone must be maintained every two (2) years, training for ongoing competency must be approved by REMSA.
4. Each authorized agency that employs PSPs that is requesting authorization will submit:
   a. A formal request for approval of intranasal naloxone use.
   b. A designated point of contact for the program and provide contact information for the individual in the formal request letter above.

Performance Standards
1. PSPs working for agencies authorized to administer intranasal naloxone by REMSA may provide 4 mg intranasal naloxone following procedure outlined in this policy and in REMSA approved training.
2. Intranasal Naloxone Administration:
   a. Identify the victim of possible narcotic overdose.
   b. Ensure paramedic response has been requested.
   c. Maintain standard blood and body fluid precautions and use appropriate personal protective equipment.
   d. Check victim for responsiveness.
   e. Ensure an open airway using Basic Life Support Techniques. Perform CPR if patient is in cardiac arrest.
   f. As clinically indicated, provide rescue breathing using a bag-valve-mask or face shield.
   g. Administer intranasal naloxone, using procedure from training.
      i. Repeat dose if respiratory depression persists (breathing < 8 breaths/minute).
   h. Continue CPR, rescue breathing, or other first aid as clinically indicated.
   i. Prepare for possible reversal behavior or withdrawal symptoms such as agitation/aggression, combativeness, vomiting, etc.
   j. Notify the responding agency’s paramedic of the administration of naloxone.
   k. Replace the used naloxone device with another intranasal naloxone administration device.
3. Responding EMS providers shall document the intranasal naloxone use as “prior to arrival” and assign the administration to the administering public safety agency.
4. Participating public safety agencies will report all cases of naloxone administration to REMSA via the Naloxone use for Public Safety Personnel form, found here: https://forms.office.com/g/CaDY22ycFA