

## Sample Medical Guidelines

### Law Enforcement Guidelines: Intranasal Narcan (Naloxone) Administration

#### GENERAL SCOPE

The following shall serve as guidelines for all State of Wisconsin Law Enforcement (LE) personnel regarding the treatment of victims with a suspected narcotic (opiate, opioid, etc.) overdose and for the administration of intranasal Narcan. **NOTE: Local LE or EMS procedure should NOT be circumvented as a result of these guidelines.**

#### GUIDELINES - INTRANASAL NARCAN ADMINISTRATION

##### Assessment

Perform rapid assessment of victim(s) with a suspected narcotic overdose (i.e., history of narcotic overdose according to bystanders, paraphernalia, and/or medical/pertinent history consistent with narcotic use, pinpoint pupils, etc.), **assessing for the following findings:**

- **Poor Responsiveness** - Unresponsive; *OR*, displays an extremely altered level of consciousness where the victim is alert **ONLY** to painful stimulus and is **NOT** able to maintain adequate respiratory effort
- **Poor Respiratory Status** - Inability to maintain adequate respiratory effort (i.e., **SLOW** breathing that is less than eight (8) breaths/minute); *OR*, displays signs of cyanosis (i.e, bluish or purplish discoloration of the skin due to lack of oxygen)

##### Narcan Administration

If the above assessment criterion is met (**suspected narcotic overdose + poor responsiveness + poor respiratory status**), initiate Narcan administration as follows:

- **Assemble** - Retrieve and assemble Narcan kit
- **Dosing** - Administer 0.4-1 mg Narcan via one (1) nostril per administration; **MAX.** dose per nostril is 1 mg; **TOTAL MAX.** dose for both nostrils is 2 mg
- **Effects** - If there is **NO** effect or response noted after three to five (3-5) minutes from administration (and a second dose of Narcan is available), repeat the administration process as above

##### EMS Interface

- EMS ambulance response **is required** to the scene of every suspected narcotic overdose.
- A suspected narcotic overdose victim **should** in most instances be transported by ambulance to an Emergency Department (ED).
  - A Chapter 51 hold or arrest may be considered based on individual circumstances
  - A decision for medical transport should be made by the responding ambulance service
- Narcan resuscitations by LE **will likely necessitate** EMS escort by LE to the ED to:
  - Ensure EMS and/or victim safety. As the effects of Narcan are temporary, the victim may experience another narcotic overdose episode
  - Ensure victim receives appropriate follow-up care and remains at the ED until medically cleared