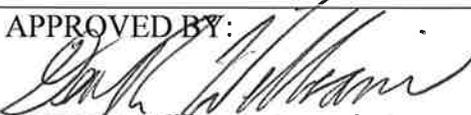


<p>STATE OF ALASKA DEPARTMENT OF CORRECTIONS</p>  <p>POLICIES & PROCEDURES</p>	SECTION: Probation And Parole		PAGE: Page 1 of 3
	CHAPTER: 903	NUMBER: 903.01	P&P TYPE: Public
	TITLE: Narcan® Administration		
	APPROVED BY:  Dean R. Williams, Commissioner		DATE: 02/01/18
ATTACHMENTS / FORMS: (None.)		AUTHORITY / REFERENCES: 22 AAC 05.155 AS 44.28.030 AS 33.05.010 DOC P&P 104.01 AS 33.16.180 AS 33.30.011 AS 33.30.021	

POLICY:

- I. It is the policy of the Department of Corrections (DOC) to train the Division of Probation & Parole (DPP) staff in the administration of Naloxone Hydrochloride (Narcan®) to individuals whom are demonstrating signs of a heroin / opioid overdose.
- II. It is the policy of the Department that the administration of Narcan® to an individual exhibiting overdose signs shall only be performed by a DOC staff member who has completed naloxone opioid overdose response training.

APPLICATION:

This policy and procedure will apply to all Division of Probation & Parole employees.

DEFINITIONS:

As used in this policy, the following definitions shall apply:

Naloxone Hydrochloride (Narcan®) Nasal Spray:

An FDA-approved drug approved for use to reverse an opioid overdose.

Opioid:

Any of various compounds that bind to specific receptors in the central nervous system and have analgesic and narcotic effects, including naturally occurring substances such as morphine; synthetic and semisynthetic drugs such as methadone and oxycodone; and potent synthetic drugs such as fentanyl. The most common opioids being used are heroin, prescription opiates, and fentanyl.

Opioid Overdose:

A respiratory emergency which can result in a person's death. Signs of an opioid overdose may include: failure to respond when spoken to; failure to wake up when prompted; slow breathing, obstructed breathing that sounds like snoring, or no breathing and / or tiny pupils.

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PROCEDURES:

I. Naloxone Opioid Overdose Response Training:

DPP staff shall complete the naloxone opioid overdose response training prior to the administration of Narcan® to an individual.

II. Narcan® Distribution And Storage:

A. Narcan® Rescue Kits, which shall include the: Narcan® nasal spray; a cardiopulmonary resuscitation (CPR) barrier patient face shield; and nitrile sterile gloves, shall be maintained in central and accessible locations within the probation office or within field search bags for work conducted outside of the office.

B. Narcan® Rescue Kits shall be stored and handled appropriately:

1. Store at room temperature only, 59° F to 77° F (15° C to 25° C). Excursions permitted up to 104° F (40° C).
2. Do not freeze Narcan®.
3. Protect Narcan® from light.

Note: Staff shall not use any Narcan® that has been frozen or stored outside of the above temperature ranges. Staff may verify storage instructions by referring to the Narcan® “Prescribing Information” literature supplied in each package.

C. Narcan® Rescue Kits shall be inventoried monthly to ensure kits are complete and ready for use. Expired Narcan® nasal spray shall be removed from the kits and replaced with new ones.

D. Any expired or otherwise unusable Narcan® shall be disposed of via one of the following methods:

1. In an available “bio-hazard” container; or
2. By returning the Narcan® to the DOC pharmacy through DOC health care staff.

III. Narcan® Administration:

Should a staff member suspect an opioid overdose, the following protocol shall be followed:

A. Initiate CPR. Because an opioid overdose is a respiratory emergency, pay particular attention to providing one (1) full breath every 5-6 seconds. Provide chest compressions if there is no pulse and continue breathing support even when a pulse has been restored.

B. Check for heroin / opioid overdose signs. If any of the below signs are present go to Step C:

1. Failure to respond when spoken to;
2. Failure to wake up when prompted; and / or

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3. Slow or no breathing.

C. Administer a dose of Narcan® nasal spray (do **not** test or prime the spray prior to use):

1. Turn person on their back, tilt their head back and support neck with hand;
2. Insert tip of the nozzle into either of the nostrils and press plunger firmly to deliver the dose. Do not prime the spray or test the spray prior to delivering the dose.

D. Call 911 for help (even if person wakes up after receiving Narcan®) and continue to evaluate the person's condition until emergency medical services (EMS) arrives.

E. Resume CPR. Rescue breathing or basic life support may be required while waiting for EMS response.

F. If the person awakens, move the person on to their side (rescue position) and watch closely for a response.

G. Give the person a second dose in the other nostril if they do not respond in 2-3 minutes by:

1. Waking up;
2. Responding to voice or touch; and / or
3. Breathing normally.

H. Narcan® may cause sudden opioid withdrawal symptoms. Individuals may become angry or violent upon awakening. For individuals whom have been using opioids regularly, they may also exhibit the following withdrawal symptoms: body aches; diarrhea; increased heart rate; fever; runny nose; sneezing; goose bumps; sweating; nausea or vomiting; nervousness; restlessness or irritability; shivering or trembling; stomach cramping; weakness; or increase in blood pressure.

I. In the field, staff may also refer to the Narcan® "Quick Start Guide" included in each package for instructions on administering the spray.

IV. Post Narcan® Administration:

An incident report shall be completed in accordance with DOC P&P 104.01, Special Incident Reporting.

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