

## **Administrative Procedures for Use of Naloxone** (Attachment for Policy No. 823)

### **Purpose**

Opioid overdose and deaths from prescription medications and illegal substances is a public health crisis and has the potential to compromise the health and safety of the school community. Training school employees to administer Naloxone to a person at risk of opioid overdose helps enhance the health and safety of students, staff and visitors.

### **Definitions**

**Naloxone:** A life-saving medication approved by the Food and Drug Administration designed to rapidly reverse opioid overdose. Opioid overdose deaths can be prevented when the medication is administered. As a narcotic antagonist, naloxone displaces opiates from receptor sites in the brain and reverses respiratory depression that usually is the cause of overdose deaths.

**Opioid:** A class of drugs used to reduce pain. This class of drugs includes illegal drugs such as heroin and synthetic opioids such as fentanyl, and prescription medication used to treat pain such as oxycodone, hydrocodone, codeine and morphine. Prescription opioids are mostly safe, however, if misused have the potential to cause addiction.

**Drug overdose:** An acute medical condition including, but not limited to severe physical illness, coma, mania, hysteria or death resulting when in the consumption or use of one or more controlled substances causing an adverse reaction. An individual's condition may be deemed to be a drug overdose if a prudent person, possessing an average knowledge of medicine and health, would reasonably believe that the condition is in fact a drug overdose and requires immediate medical attention. A drug overdose can be fatal or non-fatal.

### **Signs and Symptoms of an Opioid Overdose**

- Small, constricted “pinpoint pupils”
- Falling asleep or loss of consciousness
- Slow, shallow breathing
- Choking, snoring or gurgling sounds
- Limp body
- Vomiting
- Inability to speak
- Pale, blue, or cold skin

## **Procedures**

The possession or use of naloxone for emergency use to assist a student, staff member or visitor believed to be experiencing an opioid overdose shall be consistent with the school health program established by the Board of Education (Board).

Before a staff member may possess or administer naloxone in the school setting, the Board shall require the following:

1. A standing order from the School District of Philadelphia's (District) medical officer for administration of naloxone to students, staff members or other individuals suspected or believed to be having an opioid overdose. Copies of the standing order must be kept in each location where naloxone is held.
2. Successful completion of an online [Pennsylvania Department of Health Training Program](#) or the Substance Use Prevention and Harm Reduction (SUPHR) Division of the [Philadelphia Department of Public Health training](#) by the SDP employee.

At a minimum each school should have:

- Naloxone HCL 4mg/0.1 mL Nasal Spray (4)
- Nitrile gloves, box (1)
- Mask/barrier device (1)
- Step-b- step instructions naloxone administration (1)

## **Roles and Responsibilities**

### **The Office of Student Health Services Responsibilities**

The Office of Student Health Services is the key District resource for naloxone policy and procedure development and implementation, and medical direction for responding to an opioid overdose. The Office of Student Health Services is responsible for:

#### **1. Acquiring and maintaining a central stock of naloxone**

Naloxone stock will be obtained through the Philadelphia Department of Health (PDPH) and stored at room temperature, below 77°F (25°C) in a low light environment.

A quarterly report of naloxone inventory should be prepared and sent to PDPH.

#### **2. Distributing naloxone to schools**

Yearly naloxone supplies will be distributed to schools as needed. The school nurse or principal is responsible for notifying the Office of Student Health Services if refills are needed during the school year.

**3. Training School Nurses and other staff to administer, store and dispose of naloxone**

Before any staff member may have custody of naloxone or administer naloxone, the employee must successfully complete an online Pennsylvania Department of Health Training Program or the Substance Use Prevention and Harm Reduction (SUPHR) Division of the [Philadelphia Department of Public Health training](#) about recognizing opioid-related overdoses, administering Naloxone, and promptly seeking medical attention for a person experiencing a drug overdose.

Training should be provided to all school nurses, and at least one other school employee at each school, during their regular work schedule.

**4. Reporting suspected overdoses and use of naloxone**

Notify PDPH of all suspected overdoses and use of naloxone reported to the Office of Student Health Services.

**5. Maintaining list of SDP employees with naloxone administration training**

The Office of Student Health Services will maintain a list of all staff with naloxone administration training.

**6. Maintaining a copy of the naloxone standing order**

The District's school physician shall provide and annually renew a standing order for administration of naloxone to students, staff members, or other individuals believed or suspected to be experiencing an opioid overdose.

The standing order shall include at least the following information:

1. Type of naloxone (intranasal or auto-injector)
2. Date of issue,
3. Dosage, and
4. Signature of the school physician.

The original, signed standing order shall be maintained with the Office of Student Health Services, and copies of the standing order shall be kept in each location where naloxone is stored.

### The School Nurse Responsibilities

The school nurse is the key school resource for medical direction, assessment and responding to an opioid overdose. The school nurse must be contacted if there is a suspected overdose. If the school nurse is not available an individual trained in naloxone administration should be contacted. The school nurse is responsible at the school building-level for:

**1. Maintaining naloxone stock**

The school nurse should maintain 4 non-expired naloxone nasal sprays at all times.

The Office of Student Health Services should be notified when replacements are needed. School nurses can request replacement naloxone by the Naloxone Replacement Form.

## 2. Storing and disposal of naloxone

Keep naloxone in an easily accessible area in the nurses' office, school administrator's office, or school's emergency response kit.

Naloxone should be stored at room temperature, below 77°F (25°C) and excursions are permitted up to 104°F (40°C). Naloxone should not be frozen or exposed to excessive heat or light.

Naloxone should be thrown away after use or the expiration date. Naloxone can be disposed of in regular trash.

## 3. Administration of naloxone

If an individual has signs or symptoms of an opioid overdose or is suspected of having opioid overdose:

- Call 911 and request the AED
- Have someone notify the school safety officer and/or school leader
- Attempt to arouse and stimulate the individual
- Monitor and record respirations, heart rate and blood pressure, if possible
- If available, administer naloxone (*let the individual know you are giving them naloxone*)
- Perform rescue breaths/CPR as needed
- Allow 3-5 minutes for the medication to work. If no change in the individual's condition repeat administration of Narcan
- Immediately continue rescue breaths/CPR as needed
- Remain with the individual until EMS arrives and notify them of the naloxone administration

### **Naloxone Administration via Intranasal Narcan:**

Tilt head back and given spray (4 mg) into one nostril. If additional doses are needed, give in the other nostril.

**Remove** NARCAN Nasal Spray from the box.  
 Peel back the tab with the circle to open the NARCAN Nasal Spray.





**Hold** the NARCAN nasal spray with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle.



**Gently insert the tip of the nozzle into either nostril.**

- Tilt the person's head back and provide support under the neck with your hand. Gently insert the tip of the nozzle into **one nostril**, until your fingers on either side of the nozzle are against the bottom of the person's nose.



**Press the plunger firmly** to give the dose of NARCAN Nasal Spray.

- Remove the NARCAN Nasal Spray from the nostril after giving the dose.



(Graphic credit: ADAPT Pharma, 2015)

Administering naloxone to a person who is opioid dependent may result in severe opioid withdrawal symptoms such as restlessness or irritability, body aches, diarrhea, increased heart rate (tachycardia), fever, runny nose, sneezing, goosebumps (piloerection), sweating, yawning, nausea or vomiting, nervousness, shivering or trembling, abdominal cramps, weakness, and increased blood pressure. **Risk of adverse reaction should not be a deterrent to administration of naloxone.**

#### 4. Documenting and reporting suspected overdoses and use of naloxone

Notify the Office of Student Health Services and school administration of the event.

The event, an inventory of the medication, dosage used and supply remaining shall be properly noted in the district's student information system. Student health records shall be confidential and maintained in accordance with state and federal laws and regulations.

For naloxone administered to students, employees and visitors document the event including dosage used on the [Naloxone administration record](#). The Naloxone administration record should be submitted to the school principal or designee and the Office of Student Health Services.

The school leader should report incidents involving controlled substances to the Office of School Safety and/or local police department.

The school leader should notify the parent/guardian of any student involved in an incident with controlled substances.

Any student involved in an incident with controlled substances and/or who experiences a drug overdose should be referred to mental health support through the school or external provider as is clinically appropriate.

**5. Hold a debriefing session after administration of naloxone**

Organize and lead a debriefing session (a directed and intentional conversation) with staff members involved in the response. At the debriefing session review the incident and elicit a response from each staff member on their perspective on how the incident unfolded. Identify if there are key issues or procedural gaps to address. Provide feedback on if any changes need to be made to the policy, administration procedures, communication/information sharing or training. Document outcomes of the debrief on the Naloxone administration record.

**6. Maintaining list of school staff with naloxone administration training**

The Office of Student Health Services will maintain a list of all staff with naloxone administration training and will provide a school-specific list to be maintained and kept in the relevant school nurse's office and the school's building emergency plan.

**7. Documenting and reporting suspected overdoses and use of naloxone**

Notify the Office of Student Health Services and school administration of the event.

The event, an inventory of the medication and dosage used, and the supply remaining shall be properly noted in the district's student information system. Student health records shall be confidential and maintained in accordance with state and federal laws and regulations.

For naloxone administered to students, employees and visitors the event including dosage used must be documented in the [Naloxone administration record](#). The Naloxone administration record should be submitted to the school principal or designee and the Office of Student Health Services.

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### The School Leaders (Principal or designee) Responsibilities

The principal or designee is key to ensuring school staff are aware of Policy 823, supporting the nurse or other trained staff member and communication and follow up with District staff and parents/guardians, as appropriate. The school leader is responsible at the building-level for:

- 1. Maintaining a list of school staff with naloxone administration training**  
Keep a list of trained school staff in the school's building emergency plan. If the school nurse is not available an individual trained in naloxone administration should be contacted.
- 2. Communicating Policy 823 to staff members**  
Ensure school staff are aware of Policy 823.
- 3. Contact School Safety Officer (SSO) or designee during the incident**  
The school leader or designee should ensure that a SSO is present to provide support should an individual become agitated and/or aggressive upon awakening. For locations without an assigned SSO or when the SSO is not on location, the principal or designee should contact the School Safety Dispatch at 215-400-6000 so an SSO or supervisor can be assigned to the location.
- 4. Notify and follow up with appropriate District staff after naloxone administration**  
The school leader or designee should report incidents involving controlled substances to the Office of School Safety and/or local police department.

The school leader should notify the parent/guardian of any student involved in an incident with controlled substances.

### Other School Staff Trained in Naloxone Administration (non-nurse) Responsibilities:

If the school nurse is not available an individual trained in naloxone administration should be contacted. Each school should have at least one other school employee trained in naloxone administration. The non-nurse school staff trained in naloxone administration is responsible at the school building-level for:

- 1. Administration of naloxone**  
If an individual has signs or symptoms of an opioid overdose or is suspected of having opioid overdose:
  - Call 911 and request the AED
  - Have someone notify the school nurse, school safety officer and/or school leader
  - Attempt to arouse and stimulate the individual
  - Monitor and record respirations, heart rate and blood pressure, if possible





- If available, administer naloxone (*let the individual know you are giving them naloxone*)
- Perform rescue breaths/CPR as needed
- Allow 3-5 minutes for the medication to work. If no change in the individual's condition repeat administration of Narcan
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**Press the plunger firmly** to give the dose of NARCAN Nasal Spray.

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## **2. Documenting and reporting suspected overdoses and use of naloxone**

Notify the school nurse and school administration of the event.

The school nurse should document the event, an inventory of the medication, dosage used and supply remaining shall be properly noted in the district's student information system. Student health records shall be confidential and maintained in accordance with state and federal laws and regulations.



The trained staff member should provide the necessary information about the event to the school nurse to support completion of the [Naloxone administration record](#). The trained staff member and school member should work together to complete the Naloxone administration record. The Naloxone administration record should be submitted to the school principal or designee and the Office of Student Health Services.

The school leader should report incidents involving controlled substances to the Office of School Safety and/or local police department.

The school leader should notify the parent/guardian of any student involved in an incident with controlled substances.

Any student involved in an incident with controlled substances and/or who experiences a drug overdose should be referred to mental health support through the school or external provider as is clinically appropriate.

- 3. Help organize and participate in debriefing session after administration of naloxone**  
Help the school nurse organize the debriefing session (outlined above in the school nurse responsibility session) with staff members involved in the response. Participate in the debriefing session and complete tasks as designated by the school nurse.

### **Maintenance Schedule**

The Office of Student Health Services will review administrative procedures for Policy 823 on an as needed basis.

**These administration procedures are specific to School District of Philadelphia schools. For non-public school certified school nurses please reach out to the Philadelphia Department of Health to obtain naloxone and request training for your school staff: <https://redcap.phila.gov/surveys/?s=MN7RN8C8XCXA3YYM>. Contact [charles.nolan@phila.gov](mailto:charles.nolan@phila.gov).**