Law Enforcement FAQ on Naloxone Programs

Why can’t we rely solely on EMS to respond to overdoses?

We can and should continue to rely in EMS to respond to overdoses—but not to the exclusion of others who may be the first on the scene. Every second counts in an overdose. It is a medical emergency. With appropriate training, administering naloxone is relatively simple. Having trained individuals in the community makes saving lives easier for EMS. The NC Office of EMS and most local EMS are extremely supportive of law enforcement naloxone programs.

Why are we training law enforcement officers?

Law enforcement personnel are often the first to arrive on the scene of an overdose. Sometimes they are responding to an EMS call; and sometimes, in the course of their work, they just happen to encounter someone who has overdosed. We want to ensure that these officers have the training and the necessary tool, naloxone, to make a difference when it matters most. Many law enforcement officers are already trained in using AEDs (automated external defibrillators) or in administering CPR (cardiopulmonary resuscitation). Adding naloxone to their set of tools will help save lives.

How does one get trained to save the lives of people who have overdosed?

A simple, single session generally lasting less than one hour is all that is necessary for an officer to be trained in recognizing and responding to an opioid overdose. The training is likely to be a joint effort between the North Carolina Harm Reduction Coalition, your law enforcement department, and your local EMS. A standard curriculum has been developed to guide these trainings.

Does my agency need to do anything special so that my colleagues and I can get naloxone?

Yes. Your agency should develop policies and procedures that address its officers intervening in overdoses and administering naloxone. The NC Harm Reduction Coalition is prepared to help your agency by sharing recommended policies and procedures for the administration of naloxone.
How do I get naloxone?

Although naloxone is not a controlled substance, it is a prescribed drug. However, a new law in North Carolina, SB20: 911 Good Samaritan/Naloxone Access law, allows naloxone to be distributed under a standing order model, which means that a medical provider does not need to be present in order to issue a prescription for naloxone. NCHRC can work with your department to order naloxone and to secure a medical provider who can issue a standing order for law enforcement officers in your department to carry and administer naloxone. In most NC law enforcement departments, the naloxone is ordered through the county EMS.

How should naloxone be maintained?

As a general rule, naloxone should be kept as close to room temperature as possible. It should also be kept out of direct sunlight. Your agency’s policies and procedures should address the maintenance of naloxone. However, naloxone maintains 89% concentration even when exposed to extreme hot and cold temperatures, such as in a car.

How long can naloxone be kept?

Naloxone should be within the expiration date that appears on its packaging. Your agency’s policies and procedures should address maintaining naloxone consistent with its expiration date (usually about 2 years from the date of issue).

Will I have to use a needle to administer naloxone?

No. Naloxone is available in an intranasal form that can be sprayed up the nose and requires no needle. Naloxone is also available an intramuscular form that does come with a syringe. Intramuscular is significantly less expensive, so it depends on your agency’s budget and preferences. You will receive hands-on training on how to administer both forms.

Can the naloxone harm me or others around me?

No. Naloxone has no side effects and causes no harm even when administered in error to a person who is not overdosing on opioids.
How do I get refills?

Generally the refills are provided by your department.

What is North Carolina’s Overdose Prevention Project?

Since August 1, 2013, the North Carolina Harm Reduction Coalition (NCHRC) has had a program that provides training to individuals in the community on how to recognize an overdose and how to respond to it appropriately. The applicable law is SB 20: 911 Good Samaritan/Naloxone Access law. The appropriate responses to an opioid overdose include calling 911 and administering naloxone (Narcan), an opioid antagonist which reverses the potentially life-threatening consequences of an overdose.

Is this program successful?

NCHRC has distributed over 4200 kits since August 1, 2013. The distribution includes training on how to recognize and reverse opioid drug overdose. As of October 13, 2014, the individuals receiving the kits have successfully administered naloxone more than 160 times according to reports that have been submitted to the NCHRC. The actual number of reversals these responders have been responsible for is likely to be substantially higher.

How many Law Enforcement Departments in the US carry naloxone?

Currently over 350 US departments carry naloxone. Quincy PD is the most successful program, which has reversed over 300 overdoses.

Which Law Enforcement Departments in the US South carry naloxone?

<table>
<thead>
<tr>
<th>Georgia</th>
<th>North Carolina</th>
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<tbody>
<tr>
<td>-Chamblee Police Department</td>
<td>-Ayden Police Department</td>
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<tr>
<td>-Holly Springs Police Department</td>
<td>-Carrboro Police Department</td>
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<tr>
<td>-Kennesaw State University Police</td>
<td>-Greenville PD <em>(Starting October 22, 2014)</em></td>
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<tr>
<td>-Southern Polytechnic State University Police</td>
<td>-Pitt County Sheriff</td>
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<tr>
<td>-University of Georgia Police</td>
<td>-State Bureau of Investigation</td>
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<td>-Woodstock Police Department</td>
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**Starting in Nov/Dec 2014**

Winston Salem PD, Multiple Departments in Haywood County, Wilmington PD, Yadkinville Police