

# Oswego Town Fire Department

## Intranasal Narcan Best Practice

### **Purpose:**

To enable CNYEMS Regionally credentialed Basic Life Support EMS providers to administer intranasal Naloxone to patients experiencing an acute opioid overdose. This is in accordance with New York State Department of Health Bureau of EMS (NYS DOH BEMS) Policy Statement #13-10 and New York State CFR and EMT/AEMT BLS Altered Mental Status Protocol.

### **Education/Credentialing:**

All Basic Life Support EMS providers are required to attend agency training which includes the CNYEMS didactic presentation, skills evaluation and completion of the CNYEMS on-line test prior to the administration of intranasal Naloxone. The training will be conducted by a CLI, CIC, CNYEMS ALS CME Evaluator or Agency Medical Director. Basic Life Support providers need to be credentialed with the CNYEMS Region prior to attending training. Annual agency training will occur on the administration of intranasal Naloxone. Training documentation will be retained by the agency in the provider's training files.

### **Administration:**

The use of and administration of Intranasal Narcan shall be determined by following the New York State CFR and EMT/AEMT BLS Altered Mental Status Protocol.

### **Quality Control:**

At the monthly maintenance nights that are held twice a month, a CNYEMS Regionally credentialed provider will inspect the intranasal Naloxone kit, replace if appropriate and document on the vehicle inspection sheet. Intranasal Naloxone administration will be documented on the patient care report, created with emsCharts, in accordance with standard medical practice.

### **Oversight:**

The agency CQI Committee with oversight by the Agency Medical Director will perform quality assurance evaluations on each intranasal Naloxone administration for the initial six months of the program, or longer at the request of the Agency Medical Director. After this initial program review, the CQI Committee and Agency Medical Director must review intranasal use on a regular basis at a minimum annually.

### **Storage:**

Per (NYS DOH BEMS) Policy Statement #09-11:

- All medications must be stored in an environment that protects them from extreme temperature changes and light.
  - According to most medication manufacturer's guidelines, medications must be stored at temperatures that range from 59 degrees to 77 degrees.
- All medications must be secured in a container or location capable of being secured with a lock or numbered tear-away-type inventory control tag when not being used for patient care.
- The medication must be placed in either a closed compartment or inside a bag or box that is taken to the patient's side.
- BLS medications will be placed in a different locked compartment other than compartments containing medications, syringes or needles used by Advanced Life Support Providers.

### **Safety:**

The EMS vehicle will provide a safe disposal for medical waste/sharps on the vehicle