

University of Chicago Laboratory Schools Naloxone (Narcan) 4mg/0.1ml Intranasal Policy

I. Purpose

The purpose of this policy is to establish guidelines and procedures governing the use of intranasal naloxone (Narcan) administered by school nurses at the University of Chicago Laboratory Schools. Naloxone is an opioid antagonist used to treat a suspected opioid overdose.

II. Policy

Per [105 ILCS 5/22-30](#), it is the policy of the University of Chicago Laboratory Schools that it shall provide and maintain on-site at the Historic Campus and Earl Shapiro Hall opioid antagonists. The school nurse *may administer an opioid antagonist to any person whom the school nurse in good faith believes to be having an opioid overdose while in school, while at a school-sponsored activity, while under the supervision of school personnel, or before or after normal school activities, such as while in before-school or after-school care on school-operated property.*

The University of Chicago Laboratory Schools and its employees and agents are to incur no liability or professional discipline, except for willful and wanton conduct, as a result of any injury arising from the administration of an opioid antagonist regardless of whether authorization was given by a student's parents or guardians or by the student's physician, physician assistant, or advanced practice registered nurse. The school nurse shall accept a written or email request from a parent or guardian stating that their student shall not be administered intranasal naloxone under any circumstances. This policy is communicated to parents and guardians in the division handbooks.

III. Training

School nurses shall be trained annually to recognize and respond to an opioid overdose through completing the Red Cross First Aid for Opioid Overdoses Online Course.

Prior to the administration of naloxone, school nurses will submit proof of completion of a training curriculum to the lead nurse. School nurses will also submit to the lead nurse

proof of cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) certification. The lead nurse will maintain records relating to the training curriculum and the trained personnel.

The training will comply with the training requirements under Section 5-23 of the Substance Use Disorder Act and the corresponding rules. It will include, but is not limited to:

1. how to recognize symptoms of an opioid overdose;
2. information on drug overdose prevention and recognition;
3. how to perform rescue breathing and resuscitation;
4. how to respond to an emergency involving an opioid overdose;
5. opioid antagonist dosage and administration;
6. the importance of calling 9-1-1 or, if 9-1-1 is not available, other local emergency medical services;
7. care for the overdose victim after administration of the overdose antagonist;
8. a test demonstrating competency of the knowledge required to recognize an opioid overdose and administer a dose of an opioid antagonist

Training will also include:

1. where the opioid antagonist is stored and how to access the drug;
2. the method by which the school nurse will be notified of an incident that could require the administration of any opioid antagonist; and
3. the process for administering the specific opioid antagonist identified in the standing order.

IV. Procurement of Naloxone

- a. The school nurse will be responsible for the procurement of naloxone. The school lead nurse shall prepare standing orders and update annually.
- b. The school nurse should have the following supplies:
 - i. Narcan (naloxone) 4mg/0.1mL spray
 - ii. Medical grade gloves
 - iii. Face shield/barrier device
 - iv. Written instructions

V. Storage

1. Naloxone will be clearly marked and stored in the exam rooms of the ESH (104), Blaine (S112) and U-High (C-124) Nurse Offices. It will not be accessible to students. The standing protocol for administering naloxone will be kept near the naloxone.
2. Naloxone will be stored in accordance with manufacturer's instructions to avoid extreme cold, heat, and direct sunlight.
3. Inspection of the naloxone shall be conducted regularly, including tracking the expiration date found on the box.

VI. Use

Check for signs of opioid overdose:

1. Individual will not wake up or respond to voice or touch;
2. Breathing is very slow, irregular, or has stopped;
3. Center part of their eye (pupil) is very small or pinpoint.

In the case of a suspected opioid overdose, the school nurse will follow the following protocol:

1. Call 911.
2. Instruct bystanders to grab the AED.
3. Lay the person on their back to receive a dose of Naloxone nasal spray.
4. Administer rescue breathing if indicated.
5. Prepare and administer Naloxone. 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.
6. Press the red plunger firmly.
7. Move the person on their side (recovery position) after giving Naloxone.
8. Alert Lab Emergency Administration Group.
9. Continue rescue breathing if indicated.
10. Give another dose of Naloxone in the other nostril, 2-3 minutes after the first if no response or minimal breathing or responsiveness.
11. Anyone who receives Naloxone must be transported by EMS for continued medical care.

12. Provide comfort as withdrawal can be unpleasant.
13. If applicable, notify the student's parent, guardian, or emergency contact.

VII. Follow-Up

1. The school nurse will
 - a. Write an incident report
 - b. Debrief with Lab's Emergency Management Team
 - c. Notify appropriate Learning and Counseling as appropriate
 - d. Referral to HR/Perspectives counseling for faculty and staff

2. After administration of naloxone, the school nurse will follow Illinois General Assembly's reporting protocols.
 - a. Within 24 hours after the administration of an opioid antagonist, *if applicable*, the lead nurse will notify the health care professional who provided the prescription for the opioid antagonist of its use.
 - b. The lead nurse will submit a report regarding the administration of an opioid antagonist electronically in a format prescribed by the State Superintendent of Education within the timeline specified in Section 22-30(i), (i-5), or (i-10), respectively, of the Code.

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