

# **Elder Grove Schools Naloxone Protocol:**

## **Indications for Usage:**

Naloxone is a medication indicated for use in the reversal of opioid overdose in the setting of respiratory depression or unresponsiveness. In accordance with 20-5-426, MCA and Board Policy 3416, schools may implement the use of stock Naloxone. A school nurse or other authorized and trained personnel may administer Naloxone to any student or non-student as needed for an actual or perceived opioid overdose.

## **What are Opioids:**

Opioids include illegal drugs such as heroin, as well as prescription medications used to treat pain such as morphine, codeine, methadone, oxycodone, hydrocodone, fentanyl, and hydromorphone.

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

- **Cyanosis: blue tinged skin particularly around the lips and fingers**
- **Pulse is slow, irregular, or not present**
- **Vomiting**
- **Choking sounds, gasping or snoring sounds while breathing**
- **Breathing is slow, irregular or not present (less than 10/minute)**
- **Unresponsive, limp body**
- **Pupils are pinpoint (constricted)**

## **Maintenance and Storage of Naloxone:**

The school nurse will be responsible for maintaining a stock supply of naloxone and as available, utilizing free State funded resources for obtaining the medication. The naloxone kits will be stored inside each one of the AED cupboards, the nurse offices, principal offices, Superintendent's office, and anywhere else deemed beneficial. Naloxone will be available for use during school hours and is not required to be available for use during before or after school activities. The school nurse will be responsible for performing regular checks on stock medication and for requesting replacement items for those that have been used or expired.

## **Training and Education:**

Only Naloxone Master Trainers may train other interested staff members. Training will not be made mandatory for all staff. Training shall meet the requirements of MCA 20-5-426, which includes causes of opioid overdose, recognition of signs and symptoms of opioid overdose, indications for the administration of an opioid antagonist, administration technique of the opioid antagonist carried by the school, and the need for emergent medical follow up. The school nurse will maintain a list of non-health services trained staff.

**Naloxone Administration Occurrence:**

9-1-1 / Emergency Medical Services must be called and the person should be transported for further advanced medical care and evaluation. The school nurse, with contributing staff member input as applicable, is responsible for completing a Naloxone Administration Report for all naloxone administrations. A debriefing should then occur with involved staff and administrators.

**What it looks like: Opioid HIGH vs. Opioid OVERDOSE:**

<b>OPIOID HIGH:</b>	<b>OPIOID OVERDOSE:</b>
Muscles become relaxed	Pale, clammy skin
Speech is slowed/slurred	Speech infrequent or not at all
Sleepy looking	Deep snoring or gurgling
Responsive to stimuli	Not responsive to stimuli such as calling name, shaking, sternal rub
Normal heartbeat/pulse	Weak, slow, or no heartbeat/pulse
Normal skin tone/color	Blue lips or fingers
	Vomiting
	Pinpoint pupils (black part in center of eye)
	Infrequent or no breathing

**Opioid-Associated Life Threatening Emergency Algorithm:**

Please see attached.

# Opioid-Associated Life Threatening Emergency Algorithm & Protocol

