



# GENERAL ORDER OPS-02 USE OF NALOXONE

EFFECTIVE OCTOBER 8, 2018

---

This Special Order contains the following numbered sections:

- I. POLICY
- II. DEFINITIONS
- III. TRAINING
- IV. EQUIPMENT
- V. PROCEDURES
- VI. REPORTING
- VII. CANCELLATION

## **I. POLICY**

In an effort to prevent opioid overdose deaths, the Howard County Department of Police (HCPD) shall have members trained to carry and administer Naloxone to an individual experiencing or believed to be experiencing an opioid overdose, whether intentional or through accidental exposure.

## **II. DEFINITIONS**

- A. Naloxone: An opioid antagonist (reversal) medication used to counter the effects of an opioid overdose. Narcan is a brand of Naloxone used by the HCPD.
- B. Opioid: Medications that relieve pain such as Vicodin, Oxycodone, Percocet, morphine, etc. Heroin is an opioid drug that is synthesized from morphine.
- C. Universal Precautions: Treating all blood and body fluids as if they are contaminated with infectious materials.

## **III. TRAINING**

- A. All sworn members, cadets, members of the Crime Scene Unit and the Property and Evidence Section, and any other members identified by the Chief of Police will receive training in the administration of Naloxone to individuals experiencing or believed to be experiencing an opioid overdose.
- B. Members who have been trained in accordance with standards and protocols established by the Howard County Department of Fire and Rescue Services (HCDFRS) Medical Director and the Education and Training Division (E&T) may administer Naloxone.
- C. All training will be provided by E&T.

## **IV. EQUIPMENT**

- A. Carrying Naloxone
  - 1. Each sworn Naloxone-trained member will be issued one dose of Naloxone, a delivery device, and a storage container, and shall carry the medication with them, either on their person or in their assigned vehicle.
  - 2. Non-sworn members of the Crime Scene Unit shall carry Naloxone kits in their camera bags.
  - 3. Naloxone will be available in the Property and Evidence Section.

- B. Naloxone hydrochloride should be stored between 59 degrees Fahrenheit and 86 degrees Fahrenheit and protected from light. Naloxone shall not be left in any vehicle for extended periods of time in cold or hot weather or when off duty.
- C. Monthly inspection of the Naloxone kit by the member's supervisor will be documented on the appropriate inspection report.
  - 1. HCPD Form 1016a for sworn personnel;
  - 2. HCPD 1015 for Crime Scene Unit members; and
  - 3. HCPD Form 7000 for Property and Evidence Section members.

**V. PROCEDURES**

- A. When a trained member arrives on the scene of a medical emergency prior to the arrival of HCDFRS personnel, the following steps should be taken:
  - 1. Non-sworn members may, but are not required to, treat private citizens.
  - 2. Universal precautions shall be utilized.
  - 3. Members shall conduct a medical assessment of the person including assessment of breathing and pulse and statements made by witnesses regarding drug use or known or suspected accidental overdose. Rescue breathing/CPR should be administered without delay when a patient experiences inadequate respirations secondary to opiate overdose.
  - 4. Once it is determined to be an apparent opiate overdose, the Naloxone kit shall be utilized.
    - a. After Naloxone has been administered and the subject has improved and regained breathing, the subject may be placed in the recovery position.
    - b. Members should be cautious that the overdose may cause projectile vomiting and/or violent behavior.
  - 5. Notifications shall be made to:
    - a. Emergency medical personnel that Naloxone was administered and transfer care to EMS.
    - b. Communications that Naloxone was administered for CAD entry.
    - c. The on-call Vice and Narcotics Section Supervisor for response or follow-up.
- B. Disposal of used Naloxone atomizers
  - 1. Naloxone atomizers used in the field shall be placed in a biohazard bag and given to on-scene HCDFRS personnel for disposal or taken to the closest Howard County fire station and disposed of in a biohazard disposal bin.
  - 2. Naloxone atomizers used in the Property & Evidence section shall be placed in a biohazard bag and disposed of in a biohazard bin.
- C. Replacement
  - 1. The Quartermaster is responsible for ordering and maintaining an adequate inventory of Naloxone.

2. Members shall notify their supervisor when the medication needs to be replaced due to use or expiration.
  - a. Watch Commanders shall provide replacement Naloxone for sworn members after verifying the member is trained. A supply shall be maintained in the district office stations for this purpose.
  - b. Non-sworn members will receive replacement Naloxone from their supervisor.

**VI. REPORTING**

- A. An incident report will be completed by any sworn member or cadet who administers Naloxone. A copy of the report shall be forwarded to the Naloxone Program Coordinator at E&T for statistical tracking purposes.
- B. If Naloxone is administered by or to a member of the HCPD because of accidental overdose or exposure while on duty, a Howard County Employee Incident/Injury Form RM-1 shall be completed and submitted as per the instructions on the form. A copy of the RM-1 and a memo detailing the circumstances of the Naloxone administration shall be forwarded to the member's supervisor.
- C. Before the end of shift, the officer or a supervisor shall contact the Maryland Poison Control Center at 1-800-222-1222 to report the incident and the administration of Naloxone. An email shall be sent to the Naloxone Program Coordinator indicating that notification was made to Poison Control.
- D. The Naloxone Program Coordinator shall be responsible for compiling program data and providing reports as required under all applicable state laws and regulations.

**VII. CANCELLATION**

This General Order cancels and replaces Special Order SO 2015-01, Use of Naloxone, issued April 24, 2015.

AUTHORITY:



---

Gary L. Gardner  
Chief of Police