SECTION: STUDENTS

TITLE: ADMINISTERING NALOXONE

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<th>1. Purpose</th>
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<td>Fatal and nonfatal overdose can result from the abuse of opiates such as morphine, heroin, fentanyl, oxycodone as found in OxyContin®, Percocet®, Percodan®, and hydrocodone as found in Vicodin®. Naloxone, commonly known by the brand-name Narcan®, is an opioid antagonist which means it displaces the opioid from receptors in the brain and can therefore reverse an opiate overdose. It is a scheduled drug, but has no euphoric properties and minimal side effects. If it is administered to a person who is not suffering an opiate overdose, it will do no harm. Naloxone had been available as an injectable since the 1960’s, but was recently developed as a nasal spray and auto-injector. In order to reduce the number of fatalities which can result from opiate overdoses, the Wilson Area School District will train its school nurses in the proper pre-hospital administration of nasal Naloxone. In order to implement a safe and responsible nasal Naloxone plan, HealthWorks of the Lehigh Valley Health Network will provide medical oversight over its use and administration. Physicians from HealthWorks may make recommendations regarding the policy, oversight, and administration of the nasal Naloxone program developed and implemented by the Wilson Area School District.</td>
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<th>2. Authority Act 139 of 2014</th>
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<td>Senate Bill 1164 was signed into law by Governor Tom Corbett as Act 139 in late September of 2014. This legislation allows first responders including law enforcement, fire fighters, EMS or other organizations the ability to administer Naloxone to individuals experiencing an opioid overdose. The law also allows individuals such as friends or family members that may be in a position to assist a person at risk of experiencing an opioid related overdose to obtain a prescription for Naloxone.</td>
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3. Definitions

**Opiate** – An opiate is a medication or drug that is derived from the opium poppy or that mimics the effect of an opiate (a synthetic opiate). Opiate drugs are narcotic sedatives that depress activity of the central nervous system, reduce pain, and induce sleep.

**Naloxone** – Naloxone is an opioid antagonist that can be used to counter the effects of opiate overdose. Specifically, it can displace opioids from the receptors in the brain that control the central nervous system and respiratory system. It is marketed under various trademarks including Narcan.

4. Guidelines

When a school nurse or HealthWorks suspects that a student is suffering from an opiate overdose, the nurse should administer either two milligrams of Naloxone to the patient by way of the nasal passages (one milligram should be administered to each nostril), or by HCL injection of 0.4 milligrams via an auto-injector.

A medical emergency response team (MERT) needs to respond.

The following steps shall be taken:

1. School nurse, or other authorized individual shall take universal precautions.
2. School nurse should conduct a medical assessment of the patient to the extent of First Responder/First Aid Training, including taking into account statements from witnesses and/or family member regarding drug use.
3. If the School nurse suspects that there has been an opiate overdose, the Naloxone kit should be utilized.
4. The School nurse shall use the nasal mist adapter that is pre-attached to the Naloxone to administer the prescribed dosage. Officials should be aware that a rapid reversal of an opiate overdose may cause projectile vomiting by the patient and/or violent behavior.
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| 5. Equipment | The patient should continue to be observed and treated as the situation dictates.  
6. Training | The School nurse or other MERT team member shall inform incoming EMS about the treatment and condition of the patient, and shall not relinquish care until EMS arrives.  
The School nurse or MERT team member shall communicate with the parent/guardian after EMS/First Responders have arrived and taken over treatment and care of the situation.  

5. Equipment |
School nurses are responsible for inspecting Naloxone kits in order to insure that the kits are intact. Damaged equipment shall be reported to the principal immediately. The nurse will maintain a written inventory, documenting the quantities and expirations of Naloxone replacement supplies, and a log documenting the issuance of replacement units. Extreme heat and extreme cold will nullify the properties of Naloxone, making Naloxone unusable, and as such, proper care shall be utilized to prevent exposure of the kits to extreme temperatures. The school shall immediately replace Naloxone kits that have been used during the course of a day. |

6. Training |
School nurses shall receive a standard course of training administered by HealthWorks, prior to being allowed to carry and use Naloxone. |

7. Prosecution |
MERT team members shall familiarize themselves with Act 139 with respect to specific immunities that attach to the “person experiencing a drug overdose” and the “person who transported or reported and remained with the person(s) experiencing an overdose” and any possible exception to this immunity. |