

# Naloxone for Law Enforcement

## History

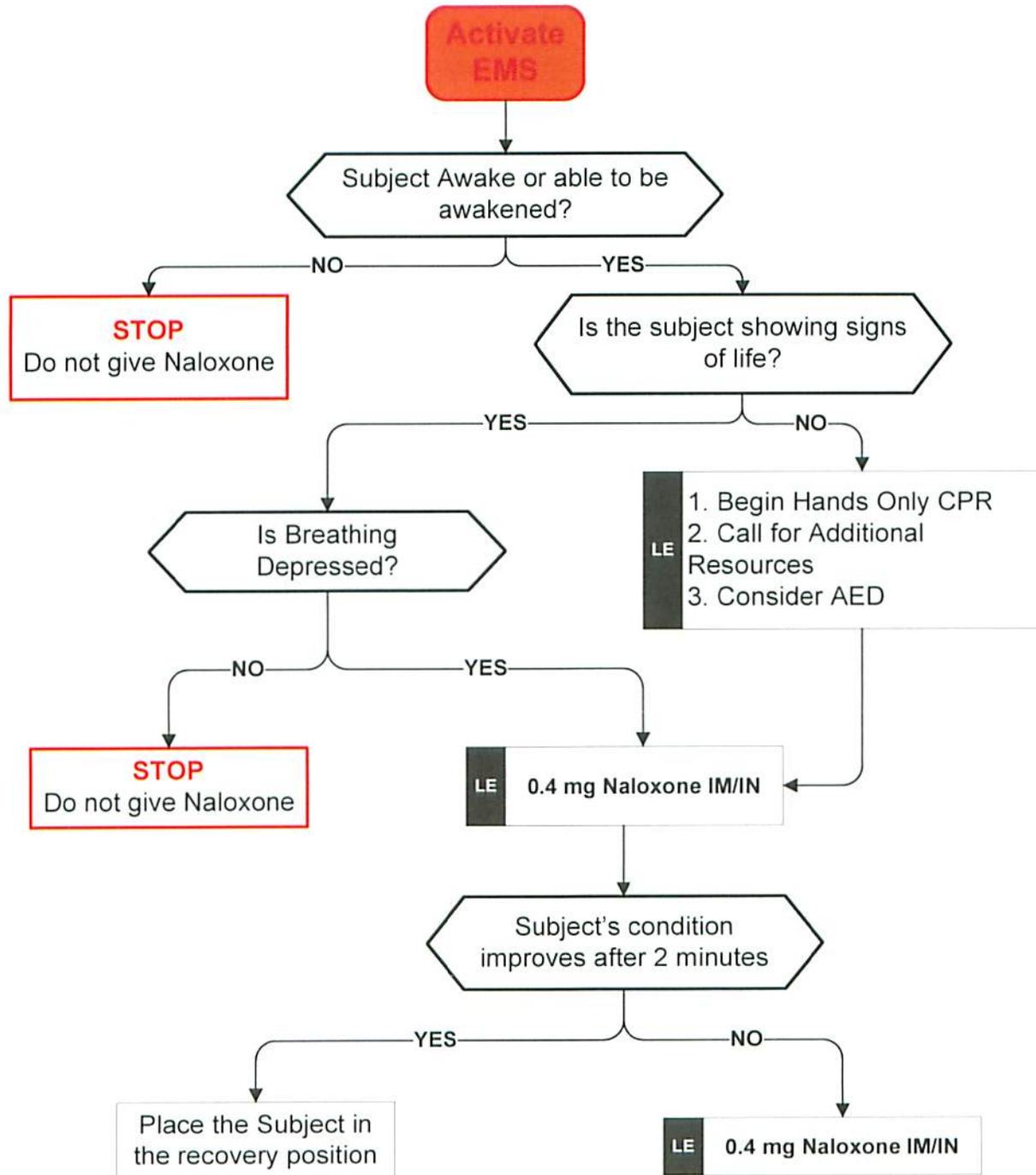
- Previous Drug History
- Paraphernalia
- Known Access to Narcotics

## Signs and Symptoms

- Altered Mental Status
- Unconscious
- Depressed Breathing
- Pin Point Pupils
- Blue Lips
- Pale Skin
- Track Marks

## Differential

- Narcotic Overdose
- Trauma/Assault
- Mixed Overdose
- Alcohol Intoxication
- Obvious Death



# Naloxone for Law Enforcement

5



## How to Use EVZIO

### Visual and voice instructions help guide the way

EVZIO is designed to be easy to use for family members, friends, and other caregivers who don't have medical training.<sup>1</sup> It is user actuated and may be administered using either hand.



**1** Pull EVZIO from the outer case.

Do not go to Step 2 (do not remove the red safety guard) until you are ready to use EVZIO. If you are not ready to use EVZIO, put it back in the outer case for later use.



**2** Pull off the red safety guard.

To reduce the chance of an accidental injection, do not touch the black base of the auto-injector, which is where the needle comes out. If an accidental injection happens, get medical help right away.

**Note:** The red safety guard is made to fit tightly. Pull firmly to remove.

Do not replace the red safety guard after it is removed.

### IMPORTANT SAFETY INFORMATION (continued)

- Additional supportive and/or resuscitative measures may be helpful while awaiting emergency medical assistance.
- Reversal of respiratory depression by partial agonists or mixed agonists/antagonists, such as buprenorphine and pentazocine, may be incomplete.
- Use in patients who are opioid dependent may precipitate acute abstinence syndrome.



**3** Place the black end against the middle of the patient's outer thigh, through clothing (pants, jeans, etc) if necessary, then press firmly and hold in place for 5 seconds.

If you give EVZIO to an infant less than 1 year old, pinch the middle of the outer thigh before you give EVZIO and continue to pinch while you give EVZIO.

**Note:** EVZIO makes a distinct sound (click and hiss) when it is pressed against the thigh. This is normal and means that EVZIO is working correctly. Keep EVZIO firmly pressed on the thigh for 5 seconds after you hear the click and hiss sound. The needle will inject and then retract back up into the EVZIO auto-injector and is not visible after use.



**4** After using EVZIO, the user should immediately seek emergency medical help.

If symptoms return after an injection with EVZIO, an additional injection using another EVZIO may be needed. Give additional injections using a new EVZIO auto-injector every 2 to 3 minutes and continue to closely watch the person until emergency help is received.

EVZIO cannot be reused. After use, place the auto-injector back into its outer case. Do not replace the red safety guard.

### IMPORTANT SAFETY INFORMATION (continued)

- Patients with pre-existing cardiac disease or patients who have received medications with potential adverse cardiovascular effects should be monitored in an appropriate healthcare setting.

Please see additional Important Safety Information on page 6 and enclosed full Prescribing Information.

## Pearls

- Subjects may become combative after naloxone administration
- Subjects may vomit after naloxone administration, be quick to move the subject to the left side if signs of improvement or vomiting
- Make sure subject is not carrying other medications
- Initial Training on Naloxone indications and intranasal administration must be conducted prior to naloxone administration
- All Naloxone administrators should attend annual refresher training for the administration of naloxone.

# Naloxone (Narcan) for Law Enforcement Officers

## Procedure for Intra-nasal Naloxone Administration:

1. Activate EMS.
2. Begin CPR if the patient has no signs of life.
3. Confirm the correct medication and dosage. Naloxone (Narcan) is typically packaged in 2mg / 2 ml prefilled syringe.
4. Attach the MAD (Mucosal Atomizer Device) nasal atomizer. (FIGURE 1)
5. Insert the atomizer in the nostril until you have a nice snug fit. Make sure the syringe is pointing straight towards the back of the patients head (NOT pointing up towards the top of the head or top of the nose) AND compress the other nostril closed.
6. Very rapidly compress the syringe to administer  $\frac{1}{2}$  of the medication ( 1mL). If not administered rapidly, the medication does not aerosolize and is much less effective. (FIGURE 2)
7. After administration, remove the atomizer and squeeze the nostrils together gently (do NOT compress) and massage in the medication for 5-10 seconds.
8. May repeat the same dose in 2 minutes if no improvement (max is 2 doses).
9. Volumes greater than 1ml are too large to be absorbed and will lead to failure.
10. If no signs of life return despite Narcan, CPR, and/or AED use, continue CPR until relieved by Fire Department and/or EMS.
11. If the patient begins to breath and show signs of life, roll the subject into the recovery position (FIGURE 3). Be aware that the patient may vomit.
12. *BEEMS* will replace on a 1:1 exchange, Naloxone (Narcan) and MAD used by a Law Enforcement Officer (see FIGURE 1) on a suspected overdose.

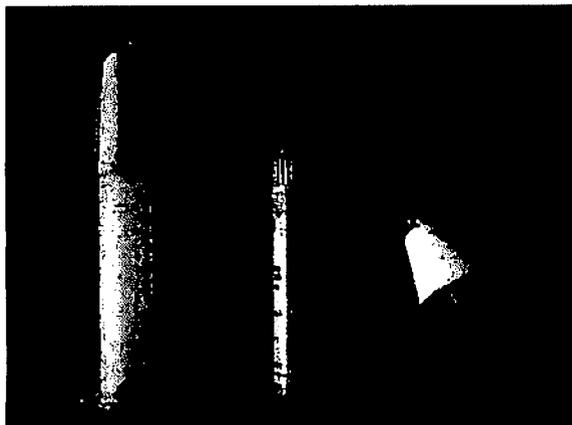


FIGURE 1: Naloxone (Narcan) as it appears from the package

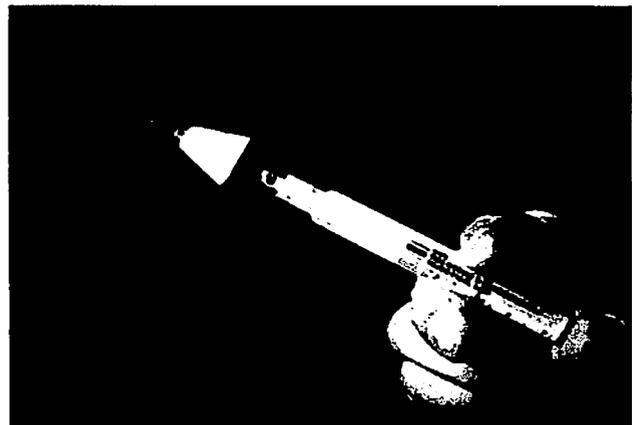


FIGURE 2: Naloxone (Narcan) as it appears when assembled



FIGURE 3: Recovery Position

### Pearls:

- Subjects may become combative after Naloxone (Narcan) administration.
- Subjects may vomit after Naloxone (Narcan) administration, be quick to roll them into the recovery position.
- The nostril can absorb 1 ml of fluid at a time.
- Factors that may negatively affect mucosal absorption of medication may include recent use of vasoconstrictors, i.e. cocaine or Afrin, nosebleeds, nasal congestion and/or discharge.