NOR-CAL EMS	05-0941	Skills: Narcan (Nasal Spray) Verification

Nor-Cal EMS Policy & Procedure Manual	BLS/ALS Protocols
Effective Date: 10/01/2020	Next Revision: 10/01/2023
Approval: Jeffrey Kepple MD – MEDICAL DIRECTOR	SIGNATURE ON FILE

Authority: Health and Safety Code Division 2.5, California Code of Regulations, Title 22, Division 9.

Provider Name: Provider's Signature:	Cert #: Provider Agency:
Validator's Name: Validator's Signature:	Date:

PERFORMANCE CRITERIA	MET (Initials)	NOT MET (Initials)	COMMENTS
1. States or demonstrates the use of appropriate PPE (eye protection, gloves, and mask).			
2. **Performs scene size up and initial patient assessment**: A. Assess and supports ABCs. B. Assess respiratory status, provides high flow oxygen (if available), manages the airway and assists ventilations as appropriate. C. Ensures ALS/LALS has been called. D. Assess vital signs including pulse oximetry (if available). E. Assess history and physical examination.			
3. **States indications for IN naloxone administration**: A. Adult and pediatric patients with suspected narcotic overdose and respiratory depression/failure. B. Patients must meet both criteria: a. Unconscious. b. Respiratory depression (RR less than 12 or inadequate respiratory effort).			
4. **States contraindications/warnings/precautions for administration of IN naloxone**: A. Patient hypersensitivity to naloxone (contraindication). B. Epistasis, nasal trauma, nasal septal abnormalities, nasal congestion/discharge. C. Patient is not a newborn. D. Do not administer if advanced airway is in place and patient is being adequately ventilated. E. Naloxone may induce opiate withdrawal in patients who are physically dependent F. Certain drugs (like Darvon etc.) may require multiple does. G. Less likely to be effective if patient is using/abusing inhaled vasoconstrictors (cocaine, neosynephrine, etc.).			
5. **Checks medications for**: A. Drug name. B. Integrity of container/medications. C. Concentration/dose. D. Clarity/Color. E. Expiration date.			
6. Nasal spray-remove from packaging.			

PERFORMANCE CRITERIA	MET (Initials)	NOT MET (Initials)	COMMENTS
7. Appropriately administers medication: A. Administer entire amount of nasal spray device. B. Administers appropriate dose of medication based on patients' size (adult: 2mg up to 4 mg, pediatric 0.1 mg/kg, max 2 mg).			
8. Properly handles and disposes of used administration device.			
9. Evaluates patient response to naloxone administration: Respiratory effort - A. Mental status. B. Initiates BLS procedures (assist ventilation, CPR, AED) as indicated based on patient response/condition. C. Considers additional does (every 2 to 3 minutes, max 3 doses) as necessary based on patient response/condition.			
10. Verbalizes appropriately PCR/Form documentation: A. Appropriate incident and patient demographics. B. Patient assessment findings vital sign etc. C. Medication administration details (name, dose, route, site, time, who administered the medication, etc.). D. Patient response to medication. E. ALS/LALS provider identification and patient care turnover time. F. Providers agency ensures that a copy of the completed PCR and/or appropriate form is submitted to Nor-Cal EMS within 7 days.			