

BLOOMINGTON POLICE DEPARTMENT

STANDARD OPERATING PROCEDURE

OPIOID ANTAGONIST

Reviewed by: Asst. Chief Clay Wheeler	Effective Date: February 22, 2016
Authorized by: Chief Brendan O. Heffner	Revision Date:

PURPOSE

The purpose of this Standard Operating Procedure is to provide for the use and maintenance of Opioid Antagonists for the purpose of preventing Opioid overdose related deaths.

POLICY

It is the policy of the Bloomington Police Department to make Opioid Antagonists available to Officers for use in the field to help prevent deaths related to Opioid overdoses.

DEFINITIONS

Opioid - Opioids are medications that relieve pain. They reduce the intensity of pain signals reaching the brain and affect those brain areas controlling emotion, which diminishes the effects of a painful stimulus. Medications that fall within this class include hydrocodone (e.g. Vicodin), oxycodone (e.g. OxyContin, Percocet) morphine (e.g. Kadian, Avinza), codeine, and related drugs. Illegal Street Drugs such as heroin are also opioids.

Opioid Antagonists or opioid receptor antagonist - Naloxone and naltrexone are commonly used opioid antagonist drugs which are competitive antagonists that bind to the opioid receptors with higher affinity than agonists but do not activate the receptors. This effectively blocks the receptor, preventing the body from responding to opioids and endorphins.

ADMINISTRATIVE PROCEDURE

The Training Lieutenant should ensure training is provided in the administration of opioid antagonist overdose medication.

Officers who are trained to administer opioid antagonists as an overdose medication, should handle, store and administer the medication consistent with their training regarding the manufacturer's recommendations as best practical considering officers and their equipment are exposed to various weather conditions.

Opioid antagonist overdose medication will be available to officers who choose to take out the department AED Pelican boxes. The dosage unit and administration equipment will be stored in the AED Pelican Box containers. The opioid antagonist overdose medication is being stored in the Pelican containers to help protect it from damage and to insulate the opioid antagonist overdose

medication from the extreme elements. AEDs are to be carried in and out of the building at the start or end of shifts not stored in the squad cars.

The Communication Center Manager, BPD's AED Program Manager, when completing the monthly AED checks will inspect the medication and associated administration equipment to ensure they are serviceable and not expired. Officers who discover any expired medication or unserviceable administration equipment should remove the item from service and give it to the Communications Center Manager for replacement.

PROCEDURES FOR DEPLOYMENT

1. Officers will use universal precautions and protections from blood borne pathogens and communicable diseases when administering opioid antagonists.
2. Officers shall administer the opioid antagonists following the established training guidelines following a patient assessment, which may include but may not be limited to determining unresponsiveness and other indications of an opiate induced overdose.
3. Officers should be cognizant of the presence of needles, sharp objects, drugs and drug paraphernalia near a possible drug overdose patient.
4. Officers shall inform the Communications Center that the patient is in a potential overdose state and request an ambulance if the Communications Center was not already aware and an ambulance had not been dispatched.
5. Officers shall follow the protocol and training guidelines when administering the medication.
6. Officers after administering the opioid antagonists will immediately, or as soon as practically possible, inform responding emergency medical personnel they have administered opioid antagonists and the number of doses used.
7. Officers will notify an on-duty supervisor opioid antagonists have been administered.
8. After the administration of opioid antagonists, the used syringe and vial will be collected and turned over to the EMS/Paramedics for disposal.

REPORTING

Following the administration of an opioid antagonist, the officer shall document in an EJS report details of the nature of the incident, the care the patient received and the fact that an opioid antagonist was administered.

Any officer who administers an opioid antagonist overdose medication should contact the Communication Center Manager to have the medication replaced in the AED Pelican Box.