

Guidelines for the Administration of an Opioid Antagonist for Students Suspected of a Drug Overdose

These guidelines will be included in the *Guidelines for Use of Health Care Professionals and Health Care Procedures in a School Setting* produced by the Department of Education and the Department of Health.

H2. Management of drug overdose and use of opioid antagonists

H2a. Background information on Opioids and Opioid Overdose

Opioids are substances derived from the opium poppy. Examples of opioids include illegal drugs such as heroin and prescription medications used to treat pain, such as oxycodone and methadone. Opioids bind to specific sites in the brain that affect breathing. Due to their effect on the brain, an opioid overdose can cause a person to stop breathing and can result in death. Signs of an overdose include:

- Unresponsiveness to shouting or pain;
- Unconsciousness;
- Slow and shallow breathing or not breathing;
- Pale, clammy skin or loss of color;
- Blue, purple or gray face, especially around lips and fingernails;
- Faint or no pulse; and / or
- Extremely small “pinpoint” pupils.

H2b. Naloxone and Indications for Use

Naloxone, an opioid antagonist, is to be used when there is suspicion of an opioid overdose. It displaces the opioid from the receptors in the brain to reverse the overdose. Naloxone has minimal side effects. If naloxone is administered to someone who is not suffering from an opioid overdose, it is not harmful. Naloxone is available as an auto-injector or an intranasal spray. Each LEA may decide which form of naloxone will be kept in schools.

H2b. Training Requirements

School nurses and other employees expected to provide emergency care to students must complete the Tennessee Department of Health training on Naloxone administration. A certificate is provided upon completion of the training.

H2c. Location and Storage of Naloxone

Each school within an LEA and each nonpublic school is authorized to maintain Naloxone in at least two unlocked, secure locations to be determined by each school. Naloxone should be stored according to the manufacturer’s instructions. Each LEA should develop a procedure for maintaining an inventory documenting the quantities, locations, and expirations of Naloxone, proper storage, and documentation of replacement units.

H2d. What to do during an overdose

In the case of a suspected opioid overdose, school nurses or other trained staff shall follow the protocols outlined in the Naloxone training and the instructions in the Naloxone kit. It is recommended that each LEA develop a procedure for use of naloxone that includes, but is not limited to, the following steps:

Step 1: Try to Maintain Responsiveness

1. Call the person's name
2. Shake the person
3. Utilize sternal rub (make a fist and rub knuckles over a person's sternum)

Step 2: Dial 911 and Begin CPR

1. If an individual is not responsive, alert someone to call 911 and get an AED
2. If an individual is not breathing, begin CPR per training

Step 3: Administer a Naloxone product per package insert instructions.

When administering intranasal Naloxone (Brand name: Narcan):

1. Lay the person on his or her back.
2. Remove the spray from the box.
3. Peel back the tab with the circle to open.
4. Hold the spray with your thumb over the bottom of the plunger and your fist and middle fingers on either side of the nozzle.
5. Tilt the person's head back and provide support under the neck with your other hand.
6. Gently insert the tip of the nozzle into one nostril until your fingers on the nozzle are against the bottom of the person's nose.
7. Press the plunger firmly to deliver the dose.
8. Remove spray nozzle out of the nostril after the dose is given.
9. If the person's symptoms return after the initial dose of Naloxone, an additional dose may be given after 2-3 minutes. If another dose needs to be given, a new nasal spray must be used.

When administering Naloxone auto-injector (Brand name: Evzio):

Evzio® is an auto-injector that gives voice instructions for each of the steps. A practice or “trainer” device is included. As part of preparation for opioid overdose, practice using the Trainer for EVZIO.

1. Pull Evzio from outer case.
2. Pull off the red safety guard. Pull firmly (the red safety guard is made to fit securely). Do not replace the red safety card after it is removed. 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.
3. Place the black end of the product on the outer thigh. In children under 1 year of age, the person giving Evzio should pinch the thigh muscle while administering the dose. Evzio® can be given through clothing.
4. A distinct “click and hiss” sound will be heard. This is normal and means that it is working correctly.
5. Keep firmly pressed on the thigh for 5 seconds after you hear the click and hiss sound. The needle will inject and then retract back into the auto-injector and is not visible after use.
6. After use, place the auto-injector back into its outer case. The black base will lock into place. The voice instruction system will state that Evzio has been used and the LED will blink red. The red safety guard cannot be replaced. The viewing window will no longer be clear. You will see a red indicator.
7. If the person’s symptoms return after the first dose of Naloxone, an additional dose may be given after 2 to 3 minutes. If another dose needs to be given, a new auto-injector must be used.

Step 4: Post-Naloxone Administration Support

1. Check for breathing. If the person is not breathing, continue to perform CPR until Naloxone starts working or EMS arrives.
2. If the person is breathing, place person on his or her side. This position will help prevent the individual from inhaling vomit.

Step 5: Stay and Watch the Individual

1. Explain to the individual that you’ve just given them Naloxone.
2. Comfort the person being treated, especially since withdrawal symptoms triggered by Naloxone can be unpleasant.
3. Help the person remain calm.

Step 6: Inform Paramedics

1. Inform EMS personnel about treatment given and condition of the individual.

H2de. Records and Reporting

It is recommended that each LEA develop a Naloxone receipt form with storage information as well as a use reporting form which should be completed after any incident involving the use of Naloxone.