OKLAHOMA DEPARTMENT OF CORRECTIONS
Probation and Parole Officer (PPO) and Office of Inspector General (OIG) Agent Administration and Access to Naloxone (Narcan)

PPOs and OIG agents will complete intranasal Naloxone (Narcan) administration training provided by Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) staff, ODOC training officers, or trained ODOC medical staff before they are eligible to administer intranasal Naloxone (Narcan).

Naloxone (Narcan) is indicated for emergency treatment of known or suspected opioid overdose, as manifested by respiratory and/or Central Nervous System depression

A. If opioid overdose is suspected, the following steps are initiated.

1. Stimulate — stimulate the person with a sternal rub. If person does not arouse, arouses but is delirious or has altered consciousness continue to step two

2. Administer Naloxone —

   a. PEEL the back of package to remove the device.

   b. PLACE tip of container in patient's nostril.

   c. PRESS firmly on the device plunger to release the dose.

3. Emergency Medical Services (EMS) Support — if no response, the patient is delirious or has altered consciousness, correctional facility staff will contact EMS and medical staff.

4. Rescue Breathing — if the person is not breathing or has slow breathing begin rescue breathing. If the person has no pulse, begin CPR. Give rescue breaths utilizing proper safety equipment, one breath every five seconds until the person can breathe on their own.

5. After 3-5 minutes — if the person responds and then lapses back into respiratory depression, remains unresponsive, delirious or has altered consciousness repeat another dose of Narcan, continue rescue breathing if breathing is slow or no breathing and CPR if no pulse.

6. Recovery Position — place person on their side with hand supporting their head once breathing is restored. Narcan can induce vomiting.

7. Disposal — used Naloxone kits will be placed in a biohazard (sharps) container.

B. All individuals receiving Naloxone will be assessed by EMS for appropriate medical follow-up.

C. Storage/Maintenance/Replacement

1. Naloxone kits will be stored in a manner consistent with manufacturer guidelines.

2. Naloxone kits will be protected from direct sunlight and stored in an area between 59-86 degrees Fahrenheit.

3. Naloxone kits will be kept in the office first aid kits and in the emergency kits assigned to each state vehicle and will be accessible to all trained PPOs and OIG agents.

4. Naloxone kits will be inspected monthly in accordance with OP-130107 entitled "Standards for Inspections." Damaged or expired kits will be reported to the appropriate Probation and Parole Services Administrator or the Inspector General who will ensure that kits are replaced as outlined in number 6 of this attachment.

5. Notification, per OP-050108 "Use of Force Standard and Reportable Incidents," will be made when Naloxone is administered.

6. The "Overdose Prevention Program Report-Back Form" (MSRM 140118.03A) will be completed by the ADS if the Naloxone is used, damaged or expired. The form will be sent to the ODMHSAS at LEOForms@odmhsas.org and to the ODOC Medical Services Manager. The "Overdose Prevention Program Report-Back Form" (MSRM 140118.03 A) will be electronically maintained by the Probation and Parole Services Administrator and the Inspector General. ODMHSAS will mail replacement kits to the Probation and Parole Services region. OIG agents will request replacement kits through Health Services who will maintain and provide replacement kits from ODMHSAS.

(R 01/26)