GENERAL ORDER



DISTRICT OF COLUMBIA

Title Naloxone Program Topic Series Number OPS 307 02 Effective Date November 24, 2021 Replaces: GO-OPS-307.02 (Naloxone Program), Effective Date May 16, 2019 Related to: GO-OPS-302.01 (Calls for Service) GO-OPS-304.08 (Interacting with Mental Health Consumers) GO-SPT-401.01 (Field Reporting System)

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I. PURPOSE

It is the policy of the Metropolitan Police Department (MPD) to take steps to preserve the life of those experiencing opioid overdose. Naloxone is issued to trained members to treat opioid overdoses and reduce fatal overdoses in the District of Columbia. The purpose of this order is to establish guidelines and procedures governing the use of the naloxone nasal spray device.

II. PROCEDURES

A. General

- 1. Naloxone nasal spray reverses the effects of an opioid overdose within moments of being dispensed. Trained members may administer naloxone to subjects believed to be suffering from an opioid overdose, including department members and department canines exposed to opioids that appear to be suffering from an opioid overdose. If naloxone is administered to a subject who is not experiencing an opioid-related overdose, no adverse effects are anticipated. Naloxone has no harmful effect on the individual administering it.
- 2. Naloxone is issued to trained members for the treatment of opioid overdose victims. Members assigned to the units listed in Attachment A (Mandatory Carry List) shall be required to carry naloxone nasal spray devices and Department of Behavioral Health (DBH) overdose pocket cards while on

duty. Naloxone-equipped members shall provide immediate assistance to overdose victims in accordance with department training.

- 3. In the event that a civil action is brought against an authorized member who administers naloxone consistent with MPD policy and training while acting in a law enforcement capacity, the member will be afforded legal representation by the Office of the Attorney General.
- B. Coordination and Distribution
 - 1. The deployment of naloxone shall be restricted to members who have completed online training in the use of the department-issued nasal spray device. Only department-issued naloxone shall be used.
 - 2. Naloxone-equipped members are responsible for the storage and maintenance of the nasal spray devices and for ensuring that the devices are readily accessible while the member is working. Members shall ensure that they are always equipped with naloxone when on duty. Uniformed members equipped with the outer vest carrier shall store the naloxone nasal spray device in the department-issued outer vest pouch.
 - 3. Deployment of naloxone nasal spray devices shall be documented and distributed by the Metropolitan Police Academy (MPA).
 - 4. Members shall obtain DBH overdose pocket cards from their assigned district. Commanding officials shall ensure that their district is sufficiently stocked.
- C. Training
 - 1. Authorized members shall complete mandatory online training on how to recognize an opioid overdose, how to administer the naloxone nasal spray device, and what follow up actions are required. MPA shall ensure that all authorized members receive mandatory naloxone training.
 - 2. The commanding official of MPA shall ensure that members receive naloxone refresher training every two years.
- D. Use
 - 1. Naloxone-equipped members shall use naloxone only on affected persons or department canines believed to be suffering from an opioid overdose.
 - 2. Naloxone-equipped members who have reason to believe that an affected person or department canine is suffering from an opioid overdose shall proceed as follows:
 - a. Notify the Office of Unified Communications (OUC) to request Fire and Emergency Medical Services (FEMS) response to provide emergency medical treatment.

- b. Perform first responder treatment consistent with training. Remove the nasal spray device from its outer protective packaging and insert tip of the device into either of the subject's nostrils and press the plunger firmly. Additional doses should be administered, in accordance with training, if needed before FEMS arrives.
- c. When the subject begins returning to consciousness, notify the subject that naloxone was administered and that they might feel pain or withdrawal symptoms.
- d. Upon arrival of FEMS, report the subject's symptoms and all actions taken to facilitate appropriate emergency medical attention.
- e. Distribute the DBH overdose pocket card to the subject.
- 3. Whenever naloxone is administered by MPD, the administering member shall document the event in the records management system (RMS) by completing an RMS report and marking the "Naloxone (Narcan) deployed by MPD" check box found under "Incident Statistics". Members shall describe the circumstances surrounding MPD's use of the naloxone, to include the number of doses that were administered to each person by MPD and the number of doses that were administered by MPD, in the internal narrative of the report.
- 4. All naloxone uses shall be reported to the watch commander for inclusion in the watch commander's report.
- 5. If the subject is a department member, an official shall complete an injury report to document the exposure.
- E. Good Samaritan Law on Drug-Related Overdoses

DC Law § 19-243 (Good Samaritan Overdose Prevention Amendment Act of 2012) removes any criminal penalty and any civil liability, in the absence of gross negligence, against a member who administers naloxone in good faith to treat a person who he or she reasonably believes to be experiencing an overdose, outside of a hospital or medical office, without the expectation of receiving or intending to seek compensation for such service and acts. More information on the Good Samaritan Overdose Prevention Amendment Act of 2012 can be found in GO-OPS-302.01 (Calls for Service).

- F. Maintenance and Inspection
 - 1. Members shall not alter naloxone nasal spray devices in any way.
 - 2. Naloxone shall not be left in department vehicles after the end of the member's shift. Naloxone should not be exposed to extreme heat or cold due to the temperature sensitivity of the medication. In general, members shall store their naloxone at room temperature between 59°F to 77°F

(15°C to 25°C). Naloxone may be stored for short periods up to 104°F (40°C).

- 3. Naloxone-equipped members shall inspect naloxone nasal spray devices prior to the start of each shift to ensure that devices are intact and immediately report any loss or damage in accordance with GO-PER-110.11 (Uniform, Equipment, and Appearance Standards) according to the procedures set forth in Part II.F.1.
- G. Replacement
 - 1. Replacement naloxone devices are available at the following elements. Members may request replacement naloxone devices at any of these locations by reporting to the element's administrative office. Devices are also available at the Command Information Center (CIC), but only after normal business hours when administrative offices are closed.

Distributing Elements		
First District	Second District	
Third District	Fourth District	
Fifth District	Sixth District	
Seventh District	Special Operations Division (SOD)	
Narcotics and Special Investigations Division (NSID)	Metropolitan Police Academy (MPA)	

2. Prior to issuing replacement naloxone devices, the issuing member shall verify the deployment of naloxone in the RMS report and complete the <u>Narcan - Individual Issuance</u> form which can be found at the following link using the issuing member's District government credentials.

https://forms.office.com/pages/responsepage.aspx?id=8Unkj5SLt0-ZBm-Tnagtc3NKfcT2pvdDsfASxFnzK9JUQjVDS0YyME44NjA2RDgxSUxUU1k4 U1paRi4u

3. Element commanding officials shall ensure that the Narcan – Monthly Inventory Report is submitted electronically no later than the fifth day of the month. The monthly report (linked below) notifies MPA of the need to replenish the element's naloxone stock.

https://forms.office.com/pages/responsepage.aspx?id=8Unkj5SLt0-ZBm-Tnagtc3NKfcT2pvdDsfASxFnzK9JUMjdVQ1hSMTVNVU1OMTJLM04wWk 5FUjFBVi4u

4. Additional overdose pocket cards can be ordered directly from DBH at <u>https://livelong.dc.gov/</u> using the "For Providers" link, under "Live. Long. DC. Materials."

III. DEFINITIONS

When used in this directive, the following terms shall have the meanings designated.

	Term	Definition
1.	Naloxone	Opioid antagonist used to reverse the effects of opioid overdose through the use of a nasal spray device. By administering naloxone, commonly known by the brand-name Narcan, an opioid overdose is reversed as it displaces opioids from receptors in the brain.
2.	Opioid	Class of drugs that include the illegal drug heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone, hydrocodone, codeine, morphine, and many others. These drugs are chemically related and interact with opioid receptors on nerve cells in the body and brain, and are often used in pain mitigation.

IV. ATTACHMENTS

Attachment A: Mandatory Carry List

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RJC:KDO:MOC:SMM

Mandatory Carry List

I. The following members **<u>shall</u>** carry their department-issued naloxone and DBH educational materials while on duty:

Bureau	Unit
Executive Office of the Chief of Police	Special Liaison Branch
Homeland Security Bureau	Special Operations Division
Investigative Services Bureau	 Crime Scene Investigation Division Narcotics and Special Investigations Division Gun Recovery Unit Criminal Apprehension Unit Criminal Interdiction Unit Narcotics Enforcement Unit Violence Reduction Unit Asset Forfeiture Unit Electronic Surveillance Unit
Youth and Family Engagement Bureau	 Youth and Family Services Division School Safety Division
Patrol Services North and South	Patrol Districts

A. **Officers and sergeants** assigned to the following units:

- B. <u>Plainclothes and casual clothes</u> personnel assigned to the Gun Recovery Unit and Narcotics Enforcement Unit.
- II. Any other member, whether in uniform or plainclothes, **<u>may</u>** carry department-issued naloxone while on duty, but <u>**must**</u> comply with all procedures set forth in this order.