



*The purpose of this toolkit is to assist school districts in the development of naloxone protocols.*

## **Questions to Consider in Development of Naloxone Protocol in Missouri School Programs**

### *What is naloxone?*

Naloxone hydrochloride (naloxone), also known by the brand name NARCAN<sup>®</sup>, is an opioid antagonist used for the emergency treatment of a known or suspected opioid overdose. Naloxone is not a new drug; it has been used by medical professionals for over 40 years. It can be administered through muscular injection or a nasal spray. Opioids are opium-based drugs, both legal and illegal, and include morphine, methadone, buprenorphine, hydrocodone, oxycodone, heroin and fentanyl, a particularly dangerous drug. There are generic forms of NARCAN<sup>®</sup>.

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***Naloxone is a safe medicine. It only reverses overdoses in people with opioids in their systems.***

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### *What precautions are needed when giving naloxone?*

Naloxone works to reverse opioid overdose in the body for only 30 to 90 minutes. But many opioids remain in the body longer than that. Because of this, it is possible for a person to still experience the effects of an overdose after a dose of naloxone wears off. Also, some opioids are stronger and might require multiple doses of naloxone. Therefore, one of the most important steps to take is to call 911 so the individual can receive immediate medical attention.

People who are given naloxone should be observed constantly until emergency care arrives. They should be monitored for another 2 hours after the last dose of naloxone is given to make sure breathing does not slow or stop. People with physical dependence on opioids may have withdrawal symptoms within minutes after they are given naloxone. Withdrawal symptoms might include headaches, changes in blood pressure, rapid heart rate, sweating, nausea, vomiting and tremors. While this is uncomfortable, it is usually not life threatening. The risk of death for someone overdosing on opioids is worse than the risk of experiencing withdrawal symptoms as a result of naloxone administration. Clinicians in emergency room settings are being trained to offer patients immediate relief and referral to treatment for opioid use disorder with effective medications after an opioid overdose is reversed.

### *How does naloxone work and what are the side effects?*

Side effects from naloxone are rare and minimal. Overall, naloxone is a safe medicine. But it only reverses an overdose in people with opioids in their systems and will not reverse overdoses from other drugs like cocaine or methamphetamine. Missouri law allows for the distribution of Naloxone without prescription.

## Summary of Missouri Naloxone Law

Pursuant to section 195.206, RSMo.,

- Any licensed pharmacist may sell and dispense naloxone.
- It is permissible for any person to possess naloxone.
- Any person who administers naloxone to another person who the person believes is suffering from an opioid overdose, who acts with good faith and reasonable care and who contacts emergency personnel immediately after administering the drug, is immune from criminal prosecution and civil liability and is not subject to disciplinary action from his or her professional licensing board based on the administration of the drug.

Pursuant to section 338.205, RSMo., any person or organization acting under a standing order from a health care professional licensed to prescribe naloxone may store naloxone without being subject to the usual licensing requirements and may dispense the drug as long as the person or organization collects no fee.

It is not clear whether these statutes were intended to apply to school districts. Neither “person” nor “organization” are further defined or explained and, in the past, other emergency medications such as epinephrine were specifically authorized by statute for use in schools. However, epinephrine is a prescription medication, and naloxone is available without a prescription.

### *Does Missouri have a Good Samaritan law?*

Yes, see link below for more information.

<https://health.mo.gov/safety/ems/more/pdf/good-samaritan-brochure.pdf>

## District Policy/Procedure

### *Does your school board have a policy in place for a stock naloxone program?*

A district that chooses to stock naloxone for emergency use should modify the emergency medications section of their policy. In addition, school districts should consider or determine if policies for medical emergencies involving staff and visitors to district property are addressed. If a district chooses to make naloxone available for emergency use for staff members or members of the public, other policies may need modification accordingly.

### **Questions to consider regarding district procedure:**

- *Does your district medical advisor support a stock naloxone program?*
- *Does your district allow the delegation of naloxone? If so, to whom?*

## Education for Administration of Naloxone

### Questions to consider regarding Education for Administration of Naloxone:

- *Does your training include:*
  - *Current legislation regarding naloxone?*
  - *Signs and symptoms of overdose?*
  - *How to respond to an overdose?*
  - *When to administer naloxone?*
  - *How to administer naloxone?*
  - *Supportive care to be provided before and after naloxone has been administered?*
  - *Documentation of the event?*
- *How often will education and training be provided?*
- *How will you document the education and training provided for administration of naloxone?*
- *Will the staff trained to administer naloxone also be required to be certified in CPR?*

## Examples of Naloxone Administration Training Videos and Material to Use

<https://www.youtube.com/watch?v=KEOq6fUWNtA> (9 min 11 sec)

<https://www.youtube.com/watch?v=nurz9qPGKws> (11min 30 sec)

[https://health.mo.gov/safety/ems/more/pdf/od-infographic\\_more.pdf](https://health.mo.gov/safety/ems/more/pdf/od-infographic_more.pdf)

## Medication and Storage

### Questions to consider regarding Medication and Storage:

- *Who will be responsible for procuring and maintaining naloxone in your district?*
- *Where do I obtain Naloxone?*

Check with your local health department to see if free Narcan is available in your area.

The Missouri State Board of Pharmacy has announced that any pharmacy in the state may dispense naloxone without a prescription. In addition, it may be purchased online. Prices vary. The shelf life for naloxone is 18-24 months.

#### **Other resources include:**

Missouri Overdose Rescue and Education (MORE) Project

<https://health.mo.gov/safety/ems/more/index.php#:~:text=Emergent%20Devicess%2C%20the%20manufacturer%20of,year%20institutions%20at%20no%20cost>

Narcan.com

<https://www.narcan.com/wp-content/uploads/2021/12/Public-Interest-Post-Card-Be-the-One-Final.pdf>

NEXT Distro <https://nextdistro.org/missouri>

- *How many doses of naloxone should the district stock and how should it be distributed throughout the district?*

This is completely up to the district. As with any emergency drug, the number of doses that will be needed is difficult to predict. While there is a significant amount of data about opioid use and overdose in Missouri, MSBA did not find any data specific to schools. Since emergency response personnel usually carry naloxone, a district might factor in response time when determining how many doses to stock in each building. If a district has access to local statistics about opioid use levels, this should be considered as well. The local health department may have such information. Naloxone only works in the body for 30 to 90 minutes. It is possible for a person to still experience the effects of an overdose after naloxone wears off or need multiple doses if a potent opioid is in a person's system.

- *Where will naloxone be stored?*
- *Where do I obtain a standing order?*

Missouri has a standing order for every school in the state (see link below). Section 192.206. RSMo, authorizes the Director of the Department of Health and Senior Services to authorize a Missouri licensed physician to issue a statewide standing order for an opioid antagonist. <https://health.mo.gov/data/opioids/pdf/naloxone-standing-order.pdf>

A standing order may also be written from your district's physician or medical director.

- *How will the district fund further supplies of naloxone?*
- *Will the continued procuring and maintenance of naloxone be cost prohibitive for the school district?*
- *Will the stock naloxone be available for before/after school events and school sponsored events?*
- *Will the stock naloxone be available for community groups using the building for non-school sponsored events?*
- *Will the standing order for naloxone allow the administration of the medication to staff and visitors?*

## Community Need

### Questions to consider regarding community need:

- *What is the average response time in the community for emergency medical services (EMS)?*
- *Do local EMS, fire department and/or law enforcement personnel carry naloxone?*
- *Have EMS had to administer naloxone in a school setting or school sponsored activity before?*
- *Do school police officers or safety resource officers carry naloxone?*
- *Are there other groups/individuals working on naloxone access and administration issues in your community?*
  - *Have you connected with them to collaborate efforts?*
- *Is there a heroin/opioid task force within your community or state?*
  - *Have you connected with them to collaborate efforts?*

**SAMPLE**  
**Naloxone (Narcan) Policy**  
(add School District Name)

This document sets forth the policy for the administration of Naloxone (Narcan) by (add school district name) school nurses and Safety and Security personnel. In accordance with Missouri House Bill 1568 and Revised Statute of Missouri 195.206, X Public Schools shall provide and maintain opioid antagonists (naloxone) for all schools with students in grades 6-12. School nurses and trained safety personnel may administer an opioid antagonist during an emergency to treat a suspected case opioid overdose to any student or staff suspected of having an opioid-related drug overdose regardless of previous history of opioid abuse.

School nurses and/or safety personnel who, acting in good faith and with reasonable care, administers an opioid antagonist to another person whom the person believes to be suffering an opioid-related overdose shall be immune from criminal prosecution, disciplinary actions from her or her professional licensing board and civil liability due to the administration of the opioid antagonist.

**Medical Direction**

Medical direction for naloxone in schools will be provided by (insert name of school physician). Responsibilities will include:

- Provide medical direction for the use of the naloxone (Narcan).
- Review and approve documentation forms and protocols for the procurement and administration of naloxone annually.
- Review all event documentation and identify problems or concerns regarding the administration of naloxone. Develop a plan of action to alleviate identified problems.
- Provide post-event debriefing support and education.

**Training and Oversight**

School nurses and safety personnel shall be trained in the use of naloxone. Key components of the training may include completion of a written and/or practical exam regarding knowledge of naloxone, administration technique, monitoring after naloxone administration and documentation. Training records will be stored with Health Services. The Health Services Coordinator will be responsible for:

- Purchase and/or receipt of naloxone and related supplies
- Coordination of training
- Communication with the medical director on issues related to naloxone policy
- Review and storage of training records, event data and related supplies

**Storage**

- Naloxone will be clearly marked and stored in an accessible place at the discretion of the school nurse.
- Naloxone will be stored in accordance with manufacturer's instructions to avoid extreme cold, heat and direct sunlight.
- Inspection of naloxone shall be conducted regularly for expiration date.

**Use of Naloxone**

In the case of a suspected opioid overdose, the school nurse or safety personnel shall follow the protocols outlined in the training and instructions in the naloxone kit:

- Call 911
- Administer rescue breathing
- Prepare and administer naloxone
- Alert school administration and Health Services Coordinator
- Continue rescue breathing
- Provide comfort as withdrawal can be unpleasant
- Transport person via EMS for follow-up and treatment
- Document administration of naloxone using Naloxone Administration Form

**Content of Naloxone Kit:**

1 pair of vinyl gloves  
1 non-rebreather CPR mask

\_\_\_\_\_  
(insert name), MD, Naloxone Medical Director

\_\_\_\_\_  
Date



## NALOXONE ADMINISTRATION PROTOCOL

### RECOGNIZE

Observe student for signs and symptoms of opioid overdose

Suspected or confirmed opioid overdose consists of:

- Respiratory depression evidenced by slow respirations or no breathing (apnea)
- Unresponsiveness to stimuli (such as calling name, shaking, sternal rub)

Suspicion of opioid overdose can be based on:

- Presenting symptoms
- History
- Report from bystanders
- School nurse or staff prior knowledge of student
- Nearby medications, illicit drugs or drug paraphernalia

Opioid High	Opioid Overdose
Relaxed muscles	Pale, clammy skin
Speech slowed, slurred, breathing	Speech infrequent, no breathing or shallow breathing
Appears sleepy, nodding off	Deep snorting or gurgling
Responds to stimuli	Unresponsive to stimuli (calling name, shaking or sternal rub)
Normal heart beat/pulse	Slowed heart beat/pulse
Normal skin color	Cyanotic skin coloration (blue lips, fingertips)
	Pinpoint pupils

### RESPOND

Immediately call for help

- Call for help- 911
- Assess breathing: Perform rescue breathing if needed.
  - Place student on their back
  - Tilt the chin up to open the airway
  - Check to see if there is anything in the mouth blocking the airway, such a gum, toothpick, undissolved pills, syringe cap, checked Fentanyl patch
    - Remove if present
  - If using a mask, place and hold mask over mouth and nose
  - If not using a mask, pinch the nose with one hand and place your mouth over the student's mouth
  - Give 2 even, regular sized breaths
  - Blow enough air into the lungs to make the chest rise
    - If using a mask and the chest does not rise, tilt the head back more and make sure the seal around the mouth and nose is secure
    - If not using a mask and the chest does not rise, tilt the head back more and make sure you are pinching the nose
  - Breathe again. Give one breath every 5 seconds.

## Use Naloxone for a Drug Overdose

You should give naloxone to anyone who has taken drugs and may be overdosing. Someone who is overdosing may stop breathing or their breathing may be slow and labored. Act fast! An overdose is life threatening.

**Naloxone is a safe medicine. Give naloxone even if you do not know what kind of drug a person took. It only reverses overdoses in people with opioids in their systems.**

### 1. Check for a response

- Try to wake them up. Shake them and shout their name.
- Rub your knuckles hard on the center of their chest.
- Hold your ear close to their nose, listen and feel for signs of breathing.
- Look at their eyes, lips and fingernails – small “pinpoint pupils” and pale, blue or gray color are signs of overdose.

### 2. Call 9-1-1

- Tell the operator your exact location.
- Say you are with a person who is not breathing.
- Tell the operator you are going to give the person naloxone.
- Follow any instructions you get from the operator.

### 3. Give naloxone

- Follow the “How to Use” instructions on the right.

### 4. Start rescue breathing

- Someone who has overdosed needs oxygen. Naloxone may take a few minutes to start working. Check again if they are breathing.
- If you can’t hear them breathe or their breath sounds are shallow, provide rescue breaths. (See other side of this sheet.)
- Follow instructions of 9-1-1 operator until help arrives.

### 5. Give a second dose of naloxone

- Wait about 3 minutes for naloxone to take effect. If the person has not responded after 3 minutes, give a second dose.

### 6. Post care for overdose

- Stay with the person until help arrives. Remember, the Good Samaritan Law offers protections when you call 9-1-1 for an overdose.
- If the person starts breathing on their own, but they do not wake up, roll them to their side to a recovery position. (See the other side of this sheet.)
- When the person wakes up, they may not remember what happened. They may be scared, nervous or restless. Keep them calm until help arrives.

## MISSOURI’S GOOD SAMARITAN LAW

**Provides some protection when calling 9-1-1 to save a life – even if drugs are at the scene.**

*(RSMO 195.205)*

## SIGNS OF AN OPIOID OVERDOSE

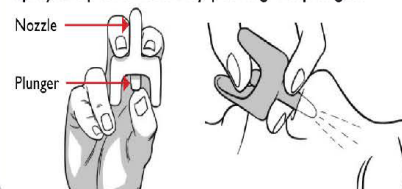
- Unresponsive
- Slow or shallow breathing
- Small “pinpoint pupils”
- Vomiting
- Cold, clammy skin
- Gurgling/snoring
- Blue or gray lips and nails

## HOW TO USE

### Nasal spray

DO NOT test the device. Each device works only once. You may need both devices.

This nasal spray needs no assembly and can be sprayed up one nostril by pushing the plunger.



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## BE PREPARED

**Learn** basic first aid skill from a trained instructor before you are in an emergency situation. If you are with a person who is unconscious and may be overdosing, you will need to perform these steps in order:

### Check breathing.



### Give rescue breaths.



1. Lay the person flat on their back.
2. Gently tilt their head.
3. Give 2 quick breaths into their mouth. The chest (not stomach) should rise.
4. Give 1 slow breath every 5 seconds until they start breathing or wake up.

### Roll to a recovery position.



If the person starts to breathe, but they do not wake up, roll them on their side to a recovery position.



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## Be Informed: Opioids and Naloxone

### What are opioids?

Opioids including drugs like prescription painkillers, heroin and fentanyl. These drugs can cause a person's breathing to slow or stop. When breathing stops or is too slow to support life, this is an overdose.

### What are the risks of an opioid overdose?

An overdose can happen to anyone who takes opioids. A person is more likely to overdose if they:

- Take opioids with other drugs or alcohol.
- Take opioids that are not prescribed to them, or they take more than prescribe.
- Stop taking opioids for a while, then start taking them again.
- Have heart or lung disease.

### How does naloxone work?

Naloxone reverses an opioid overdose by blocking the opioid receptors in the brain. This is a temporary effect and can last between 30 and 90 minutes. After giving some naloxone, it may take a few minutes to work. If a first dose of naloxone does not work after about 3 minutes, give a second dose.

### Is naloxone safe?

Yes, naloxone is a safe medication that works to reverse an opioid overdose. Use naloxone even if you're not sure what kind of drugs someone took.

### How and where do I store naloxone?

Store naloxone at room temperature, out of direct light. Keep it in a place where anyone who might witness an overdose can get to it quickly and easily.

**Make sure everyone knows where the naloxone is stored.**

### When do I need to get a refill?

You will need a refill of naloxone if:

- You use one or both of the doses.
- The naloxone is lost or damaged.
- The naloxone is expired, or near its expiration date.

### Where can I get more information?

For more information about common types of opioids, opioid overdoses, how to use naloxone, and where to get naloxone in Missouri, go to:

<https://dmh.mo.gov/opioid-crisis-response>

More information from the National Institute on Drug Abuse can be found at:

<https://nida.nih.gov/publications/drugfacts/naloxone>

*Some content from this publication is adapted from MO-HOPE Project and Washington State Department of Health. Naloxone nasal spray illustrations are adapted from Family Health Centers of San Diego.*



## NALOXONE ADMINISTRATION REPORT

Intra-nasal naloxone (Narcan) administration to reverse the effects of opioid overdose. Protocol was implemented as follows:

Date: \_\_\_\_\_ School: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M/F  
Student Name: \_\_\_\_\_ Student #: \_\_\_\_\_ Grade: \_\_\_\_\_  
Guardian #1: \_\_\_\_\_ Phone: \_\_\_\_\_  
Guardian #2: \_\_\_\_\_ Phone: \_\_\_\_\_

**Signs of Overdose Present:**

Blue lips     Slow breathing     Shallow Breathing     Slow Pulse  
 Weak pulse     Unresponsive     Other: \_\_\_\_\_

**Suspected Drug for Overdose (check all that apply):**

Heroin     Benzos/Barbituates     Cocaine/Crack     Alcohol  
 Methadone     Suboxone     Don't Know     Other (specify): \_\_\_\_\_

Location student was found: \_\_\_\_\_

Time Narcan administered: \_\_\_\_\_ am/pm  
Narcan lot #: \_\_\_\_\_ Expiration date: \_\_\_\_\_

911 notified: \_\_\_\_\_ am/pm    School administrator notified: \_\_\_\_\_ am/pm  
Name of guardian notified: \_\_\_\_\_ Time: \_\_\_\_\_ am/pm

Describe response to Narcan prior to transport:

Heart Rate: \_\_\_\_\_ Time: \_\_\_\_\_    O2 Saturation: \_\_\_\_\_ %    Time: \_\_\_\_\_  
Resp. Rate: \_\_\_\_\_ Time: \_\_\_\_\_    Blood Pressure: \_\_\_\_\_ / \_\_\_\_\_    Time: \_\_\_\_\_  
Physical complaints: \_\_\_\_\_

Narcan repeated by CPS:     yes time \_\_\_\_\_     no  
Narcan repeated by EMS:     yes time \_\_\_\_\_     no

Student transported to (Hospital): \_\_\_\_\_

Name: (print): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Resources

California Department of Public Health Video <https://www.youtube.com/watch?v=nurz9qPGKws>

Columbia Public Schools <https://www.cpsk12.org/>

Emergent Biosolutions (Narcan Nasal Spray Video) <https://www.youtube.com/watch?v=KEOq6fUWNtA>

Family Health Centers of San Diego <https://www.fhcsd.org/opioid-safety/>

Missouri School Board Association <https://www.mosba.org/>

MO-HOPE Project <https://MOHopeProject.org>

NASN <https://www.nasn.org/>

National Institute on Drug Abuse <https://nida.nih.gov/publications/drugfacts/naloxone>

Washington State Department of Health  
<https://doh.wa.gov/sites/default/files/legacy/Documents/Pubs//150-126-NaloxoneInstructions.pdf?uid=625a08f354d46>



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