

## Cobb County Police Department

### Policy 5.27

#### NALOXONE PROGRAM

<b>Effective Date:</b> August 11, 2022	<b>Issued By:</b> Chief E.S. VanHoozer
<b>Rescinds:</b>	<b>Page 1 of 2</b>
The words "he, his, him," which may appear in this policy, are used generically for clarity and ease of reading. These terms are not meant to imply gender and relate to all employees of the Department.	

The purpose of this policy is to establish guidelines and regulations governing the utilization of the Nasal Naloxone administered by the Cobb County Police Department.

#### I. POLICY

It is the policy of the Cobb County Police Department that all sworn officers trained in the use of Naloxone may administer Naloxone in accordance with the mandated guidelines set forth by Georgia law. All officers shall receive training in the use of Naloxone.

#### II. DEFINITIONS

- A. Naloxone:** A pure opioid antagonist that is used to completely or partially counter the effects of opioid overdose, such as heroin, morphine, fentanyl, or other narcotic painkillers.
- B. Naloxone Kit:** Includes two Naloxone nasal Spray cartridges and instructions for administering Naloxone.
- C. Program Coordinator:** The Academy Director will be the Department's representative in communication with officers and supplier of Naloxone.

#### III. TRAINING

The Program Coordinator shall be responsible that appropriate personnel receive up to date training based upon best medical practices and input from the Cobb County Medical Director. The Program Coordinator will ensure training records are maintained with the Training Unit.

#### IV. PROCEDURES

As available, Cobb County Police Department will issue Naloxone Kits to trained personnel. Naloxone may be used when an officer reasonably believes that a person is experiencing an opioid overdose. Officers shall notify Dispatch and have emergency medical responders respond anytime Naloxone has been administered. Officers should maintain universal precautions and render first aid until relieved by responding emergency medical responders.

**A. Indication**

Use of naloxone nasal spray is recommended for depressed/altered level of consciousness with or without respiratory depression (respiratory rate <12). Naloxone should not be utilized in suspected opioid overdose unless respiratory depression, altered level of consciousness, syncope (fainting), or other life-threatening symptoms are present.

**B. Contraindication**

In the absence of a known life-threatening allergy, the use of naloxone outweighs any possible harm resulting from any potential allergy and should be administered.

**C. Administration**

Administer one naloxone nasal spray (2-4 mg) into a single nostril. If no response in 3-5 mins, an additional naloxone nasal spray may be utilized. With the second administration, the opposite nostril is preferred but not required.

Naloxone shall not be administered to a conscious/responsive person. Officers shall administer Naloxone in accordance with the training received. When an officer deploys nasal Naloxone, and it results in a resuscitation of an overdose person, the officer should strongly recommend and/or encourage that person to get the appropriate follow-up medical care. If the person is taken into custody, refer to Policy 5.13 Prisoner Transports.

**V. DOCUMENTATION**

Upon the use of Naloxone, the officer shall complete an incident report along with a First Responder's Naloxone Usage Tracking Form. The officer shall include in the report the detailed nature of the incident, the care the person received, and the details by which Naloxone was administered conforming to the Naloxone training.

Officers shall ensure that the incident report and the First Responder's Naloxone Usage Tracking Form is forwarded to the Program Coordinator. The Program Coordinator shall maintain those reports, provide annual reports to the Chief of Police, and maintain statistical information on all instances when Naloxone is administered.