



EMS Leave Behind Naloxone Sample Workflow Protocol

CA Bridge has created this protocol for EMS Agency Education or Training staff who are interested in starting Leave Behind Narcan programs. This sample protocol workflow for Leave Behind Narcan can be adapted for specific LEMSA/Agencies. More resources can be found at cabridge.org

Patient Assessment

Patients presenting with any one of the following conditions are eligible for naloxone Distribution:

- Opioid overdose (requiring naloxone administration or supportive care and monitoring)
- History or physical exam with evidence of illicit drug use or paraphernalia (e.g., history of intravenous drug use, track marks, needles present in belongings, etc.)
- History or physical exam with prescription opioid use (prescribed or recreational)
- Physical environment with multiple or high-dose prescription opioids present

Distribution

- Assess patient decision-making capacity
- Offer leave behind naloxone with just-in-time training to patient and/or appropriate bystander(s)
 - Perform teaching and direct recipient to visual aids on naloxone kit
 - Distribute naloxone kit
 - Register distribution with your local agency defined method. E.g., Distribution card, electronic record or written log

Training

- Non-certified first responders, coworkers, family members, friends
- Receive Leave Behind Naloxone kit and training:
 - Assess scene safety
 - Verbal/tactile stimulation
 - Administer naloxone
 - Call 911
 - Recovery position/CPR if no improvement
 - Stay with patient until EMS/Police arrives

Disposition

- Anyone with withdrawal symptoms should go to Emergency Department with MAT Resources. E.g., CA Bridge sites, OUD counselors, treatment programs
- Contact the Base Hospital if patient requesting to AMA
- Encourage safe use practices:
- Use with a friend, don't mix drugs, have naloxone ready, etc.

End of Shift Procedures

- Re-stock ambulance with naloxone kits
- Turn in /submit completed log of distribution