



TO: Local Health Department, Local EMSOP/EMS Medical Directors, and Local Law Enforcement

DATE: April 7, 2014

RE: Law Enforcement Administration of Naloxone for Overdose Patients

Opioid overdose is a serious and growing public health problem in Maryland. The Maryland Department of Health & Mental Hygiene (DHMH) and the Maryland Institute for Emergency Medical Services Systems (MIEMSS) are collaborating to broaden the ability of public safety personnel, including law enforcement, to respond to opioid overdoses by authorizing law enforcement personnel to administer Naloxone to individuals who experience an opioid overdose. Naloxone is a fast-acting opioid antagonist used in emergency medicine to rapidly reverse opioid-related sedation and respiratory depression. Naloxone is marketed under various trademarks including "Narcan," "Nalone," and "Narcanti."

There are two separate avenues by which law enforcement officers can be authorized to administer Naloxone in Maryland. Note that, in order to administer Naloxone legally, law enforcement officers must be authorized under one of these two options.

- 1. Participation by Law Enforcement in the DHMH Overdose Response Program.** DHMH's Alcohol and Drug Abuse Administration (ADAA) has instituted an Overdose Response Program that authorizes certain private or public entities to conduct educational and refresher training programs for individuals, such as police officers, who may be in a position to assist someone who is experiencing an opioid overdose. Individuals who successfully complete the training are issued a certificate that entitles them to obtain a prescription for naloxone and the supplies to administer it and authorizes them to possess and administer prescribed naloxone. The ADAA is working closely with interested local health departments to authorize them as training entities; 14 health departments have already been approved. Note that the Overdose Response Program does not enable law enforcement to be dispatched to provide medical response to an overdose; rather, the Program enables law enforcement to obtain and administer Naloxone should they arrive at an overdose scene before EMS.
- 2. Participation by Law Enforcement Through EMS Provider Certification.** Law enforcement officers who possess current Maryland certification from MIEMSS as Emergency Medical Responders (formerly known as "First Responders") or as Emergency Medical Technicians may be authorized to apply Naloxone if their jurisdiction has been approved to use a supplemental protocol for Maryland EMS Providers for the administration of Naloxone. Note that the Law Enforcement Emergency Medical Care Course ("LEEMCC") training does not qualify as MIEMSS licensure or certification, and LEEMCC trained officers may not be dispatched to provide EMS services.

MIEMSS and the ADAA encourage the local EMS Operational Program, EMS training resources and the EMS Medical Director to partner with their local health department and law enforcement to collaborate in the effort to reduce heroin and other opioid-related overdoses. There are multiple advantages to this joint strategy:



- 1) EMS providers and law enforcement officers frequently work collaboratively on the same scenes and the same patients.
- 2) The EMS Operational Program has expertise in training and re-training EMS providers in the administration of Naloxone.
- 3) The EMS Operational Program already has purchasing agreements for Naloxone and the intranasal atomizer administration equipment.
- 4) The EMS providers can ensure that law enforcement administration of Naloxone is documented in the patient's prehospital care record (eMEDS).
- 5) Local Health Officers and the EMS Medical Directors can collaborate on providing medical oversight, patient outcome identification, and quality assurance.
- 6) Local Health Officers will be tracking all law enforcement officers who are trained and certified through the Overdose Response Program.

For further information regarding the ADAA Overdose Response Program, or to apply for approval as an authorized training entity, please contact:

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Thank you.

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