Protocol for the Prescribing and Dispensing of Naloxone

Pharmacists shall follow this protocol when dispensing naloxone pursuant to an oral, written or standing order to a person to administer to another person believed to be experiencing or about to experience a life-threatening opiate overdose as authorized in §54.1-3408.

- 1) **Procedure:** When someone requests naloxone, or when a pharmacist in his or her professional judgment decides to advise of the availability and appropriateness of naloxone, the pharmacist shall:
 - a) Provide counseling in opioid overdose prevention, recognition, response, administration of naloxone, to include dosing, effectiveness, adverse effects, storage conditions, shelf-life, and safety. Recipient <u>cannot waive receipt of this counseling</u>, unless pharmacist is able to verify successful completion of REVIVE! training program.
 - b) The pharmacist shall provide the recipient with the current REVIVE! brochure available on the Department of Behavioral Health and Developmental Services website at http://www.dhp.virginia.gov/Pharmacy/docs/osas-revive-pharmacy-dispensing-brochure.pdf If the recipient indicates interest in addiction treatment, recovery services, or medication disposal resources at this time, the pharmacist may provide information or referrals to appropriate resources.
- 2) **Product Selection:** The pharmacist who dispenses naloxone pursuant to an oral, written or standing order shall dispense the drug and other items for the kit as prescribed and in accordance with this protocol.
- 3) Standing Order: In addition to dispensing naloxone pursuant to an oral or written order, a pharmacist may dispense naloxone pursuant to a standing order. A standing order shall be valid for no more than two years from the date of issuance and shall contain the following information at a minimum:
 - a) Name of pharmacy authorized to dispense naloxone pursuant to standing order;
 - **b)** Contents of kit to be dispensed for dispensing naloxone 2mg/2ml prefilled syringes for intranasal administration, to include quantity of drug and directions for administration;
 - c) Prescriber's signature; and
 - **d**) Date of issuance.

4)	Kit Contents for	Intranasal or	· Auto-Injector	Administration:
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Intranasal	Auto-Injector	Intranasal
Naloxone 2mg/2ml prefilled syringe, # 2 syringes	Naloxone 0.4 mg/0.4 ml #1 twin pack	Narcan Nasal Spray 4mg, #2
SIG: Spray one-half of the syringe into each nostril upon signs of opioid overdose. Call 911. May repeat x 1. Mucosal Atomization Device (MAD) # 2 SIG: Use as directed for naloxone administration. Kit must contain 2 prefilled syringes and 2 atomizers and instructions for administration.	SIG: Use one auto- injector upon signs of opioid overdose. Call 911. May repeat x 1. No kit is required. Product is commercially available.	SIG: Administer a single spray intranasally into one nostril. Administer additional doses using a new nasal spray with each dose, if patient does not respond or responds and then relapses into respiratory depression. Additional doses may be given every 2 to 3 minutes until emergency medical assistance arrives. No kit is required. Product is commercially available.

Optional items for the kits include rescue breathing masks, and latex-free gloves.

Pharmacies may obtain kits to have on-hand for dispensing naloxone 2mg/2ml prefilled syringes_for intranasal administration from the REVIVE! program at the Department of Behavioral Health and Developmental Services. To request kits, contact REVIVE@dbhds.virginia.gov

5) Labeling and Records:

Each vial or syringe of naloxone shall be dispensed and labeled in accordance with §54.1-3410 with the exception that the name of the patient does not have to appear on the label. The pharmacist shall maintain a record of dispensing in accordance with recordkeeping requirements of law and regulation.

Protocol for Dispensing to Law-Enforcement Officers and Firefighters

Alternatively, a pharmacy, wholesale distributor, third party logistics provider, or manufacturer may distribute naloxone via invoice to designated law enforcement officers or firefighters who have successfully completed a training program developed by the Department of Behavioral Health and Developmental Services in consultation with the Department of Criminal Justice Services or Department of Fire Programs, respectively, at the address of the law enforcement agency or fire department. Training shall be conducted in accordance with policies and procedures of the law enforcement agency or fire department.

6) Resources:

- a) REVIVE! Opioid Overdose Reversal for Virginia Training Curriculum "Understanding and Responding to Opioid Overdose Emergencies Using Naloxone", available at http://www.dhp.virginia.gov/pharmacy/docs/osas-revive-training-curriculum.pdf
- **b)** Substance Abuse Mental Health Services Administration's "Opioid Prevention Toolkit" (2014), available at http://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit-Updated-2014/SMA14-4742
- c) Prescribe to Prevent, http://prescribetoprevent.org/pharmacists
- **d)** Harm Reduction Coalition, http://harmreduction.org/issues/overdose-prevention/tools-best-practices/od-kit-materials