


Sierra – Sacramento Valley EMS Agency Program Policy

**EMS Naloxone Leave-Behind Program**

	Effective: 04/01/2025	Next Review: 01/2028	<b>809</b>
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**PURPOSE:**

To establish guidelines for EMS personnel to provide intra-nasal (IN) naloxone delivery devices intended for layperson use to individuals deemed to be at risk of an opioid overdose or individuals who are considered likely to encounter and assist a person experiencing an opioid overdose.

**AUTHORITY:**

HSC, Div. 2.5. § 1797.220 & 1798.

**POLICY:**

- A. Suspected opioid overdoses shall be treated according to S-SV EMS Agency protocols.
- B. EMS providers may stock IN naloxone delivery devices intended for layperson use. These devices may be obtained through the following mechanisms:
  - 1. The California DHCS Naloxone Distribution Project (NDP):  
[https://www.dhcs.ca.gov/individuals/Pages/Naloxone\\_Distribution\\_Project.aspx](https://www.dhcs.ca.gov/individuals/Pages/Naloxone_Distribution_Project.aspx)
  - 2. Local public health department or other community organization naloxone distribution programs that exist within the EMS providers’ service area.
  - 3. Purchasing through the EMS providers’ normal supply chain.
- C. EMS personnel are authorized to provide an IN naloxone delivery device intended for layperson use to any individual who is deemed to be at risk of an opioid overdose or individuals who are considered likely to encounter and assist a person experiencing an opioid overdose.
- D. EMS personnel may consider offering leave-behind IN naloxone delivery devices to lay persons who request it on a scene or in the following situations:
  - 1. A reversed overdose regardless of further treatment or transport disposition.

2. Prescription opioids, drug paraphernalia, or suspected opioid use are found on a scene, including bystanders who may have been using opioids.
  3. An individual who self-identifies as a person who uses illicit substances or prescription opioids.
  4. An individual who states that they have close contacts who use illicit substances or prescription opioids.
- E. Providers may consider offering leave-behind IN naloxone delivery devices regardless of the nature of the contact between EMS personnel and the subject(s) receiving the device. Leave-behind naloxone distribution is not limited to 911/emergency calls for service for a suspected opioid overdose.

**PROCEDURE:**

- A. EMS personnel shall provide the following brief instructions, at a minimum, to any recipient of a leave-behind IN naloxone delivery device:
1. Encourage/remind to never use opiates alone, as appropriate.
  2. Recognition of opiate overdose and activation of 911.
  3. Signs and Symptoms of opiate overdose.
  4. Lay-person rescue breathing.
  5. Administration of IN naloxone.
  6. Post-overdose care.
- B. Any EMS provider agency stocking/distribution IN naloxone delivery devices intended for layperson use shall implement and maintain appropriate methods to adequately track the distribution of such devices. This information shall be made available upon request to the S-SV EMS Agency or any organization providing such IN naloxone delivery devices.