

# *Indiana Statewide Naloxone Standing Order Toolkit for Naloxone Entities Indiana Code § 16-42-27 et seq.*

## *Introduction*

Individuals and entities that wish to obtain, administer or dispense naloxone under Indiana's Statewide Naloxone Standing Order must annually register as "Naloxone Entities" with the Indiana State Department of Health on the **OptIN** website found here: <https://optin.in.gov>. The Statewide Standing Order, authorized by I.C. § 16-42-27, is renewed each year. Naloxone Entities must at all times remain compliant with Indiana law to act under the Statewide Standing Order, and abide by the attestations made on the OptIN website.

This Toolkit includes: (1) drug addiction education; (2) training on drug overdose response and naloxone administration; and, (3) treatment and referral information. The Toolkit may be a helpful resource for Naloxone Entities seeking compliance with I.C. § 16-42-27.

Naloxone Entities will automatically receive renewed Standing Orders and other important communications as long as they maintain current contact information on OptIN. **Naloxone Entities are required by law to annually renew their registration, comply with reporting requirements, and to update their registration throughout the year as changes occur (e.g., input changes in address, contact information, etc.).**

***Note: Neither this Toolkit nor the Indiana Statewide Standing Order guarantees coverage or prior authorization under Medicaid or other insurance programs.***

## *Naloxone Overview*

Naloxone is an opioid antagonist indicated to reverse central nervous system depression in an individual suffering from an opioid-related over sedation, poisoning or overdose. Naloxone is the generic form of Narcan. Naloxone does not cause euphoric effects, is non-addictive, and is not a drug of abuse. Since 1971, naloxone has been successfully used to reverse opioid overdoses. Naloxone is a legend drug, but not a controlled substance.

## *Naloxone Entity Defined*

Naloxone Entities may include pharmacies, pharmacists or other non-pharmacy organizations, non-profit entities or individuals that are in a position to assist an individual who, there is reason to believe, is at risk of experiencing an opioid-related overdose. Naloxone Entities must, at all times, comply with the following criteria and all other conditions enumerated in Indiana Code §16-42-27 et seq.:

- (1) Obtain naloxone from a prescriber (physician, physician assistant or advanced practice nurse with authority to prescribe) either by virtue of the attached standing order or other standing order or prescription issued by a prescriber;
- (2) Annually register as a Naloxone Entity at <https://optin.in.gov/> in a manner prescribed by the Indiana State Department of Health (“ISDH”);
- (3) Provide education and training on drug overdose response and treatment, including the administration of an overdose intervention drug and the legal requirement to call **9-1-1** immediately before or after administering the drug; and
- (4) Provide drug addiction treatment information and referrals to drug treatment programs, including programs in the local area and programs that offer medication assisted treatment that includes a federal Food and Drug Administration approved long acting, non-addictive medication for the treatment of opioid or alcohol dependence.

### *NALOXONE EFFECTS*

Naloxone reverses opioid-related over sedation, poisoning or overdose by replacing and blocking agonists from attaching to the brain’s opioid receptors. Naloxone has a stronger affinity to the opioid receptors than do agonists. When administered to a person with opioids in their system, naloxone neutralizes the opioids’ effect, allowing the body to return to more normal function. Because the opioids remain in the person’s system, naloxone cannot be used to sabotage a urine screen. However, because many opioid overdoses are caused by high doses of opioid drugs or opioid drugs that are long-acting, rescuers may need to administer multiple doses of naloxone. For this reason and pursuant to Indiana Code §16-42-27, seeking immediate medical assistance (**calling 9-1-1**) is a required part of overdose response education.

Naloxone does not reverse drug overdoses in people without opioids in their system or produce any effect and does not interact with any medications other than opioids. The only contraindication to administering naloxone is if the recipient has a known sensitivity or allergy to naloxone or its components, which is rare.

The most common side effect of naloxone in someone who has taken opioids is the induction of opioid withdrawal symptoms, including tachycardia, increased blood pressure, body aches, diarrhea, fever, and irritability.

### *SYMPTOMS OF OPIOID OVERDOSE*

A person suffering an opioid overdose may present with some or all of the following symptoms:

- Decreased level of consciousness,
- Pinpoint pupils,
- Gurgling or choking noises,

- Body is limp,
- Breathing slows or stops,
- Heart rate slows or stops,
- Blue lips and/or nail beds,
- Clammy skin, or
- Cannot be woken or cannot speak, even after:
  - Shaken, or
  - Sternal rub.

### *ENVIRONMENTAL SIGNS OF AN OPIOID OVERDOSE*

In addition to the physical symptoms indicating an opioid overdose, the following items may indicate an opioid overdose:

- Needles,
- Spoons (especially bent spoons) or other cookers,
- Lighters,
- Tourniquets,
- Balloons or baggies,
- Pill bottles, or
- Pills (whole or crushed).

### *NALOXONE ADMINISTRATION*

If you believe that a person is suffering from an opioid overdose:

- (1) Confirm your belief by checking for the symptoms and signs of opioid overdose found herein,
- (2) Call 9-1-1,**
- (3) Administer naloxone,
- (4) If the person has no pulse, give CPR if you know how and are comfortable doing so,
- (5) If there is no change in 3-5 minutes after giving naloxone, administer another dose, and
- (6) Stay with the person until first responders arrive.

When administering naloxone, an individual may not be considered to be practicing medicine without a license in violation of I.C. § 25-22.5-8-2, if the individual, acting in good faith, does the following:

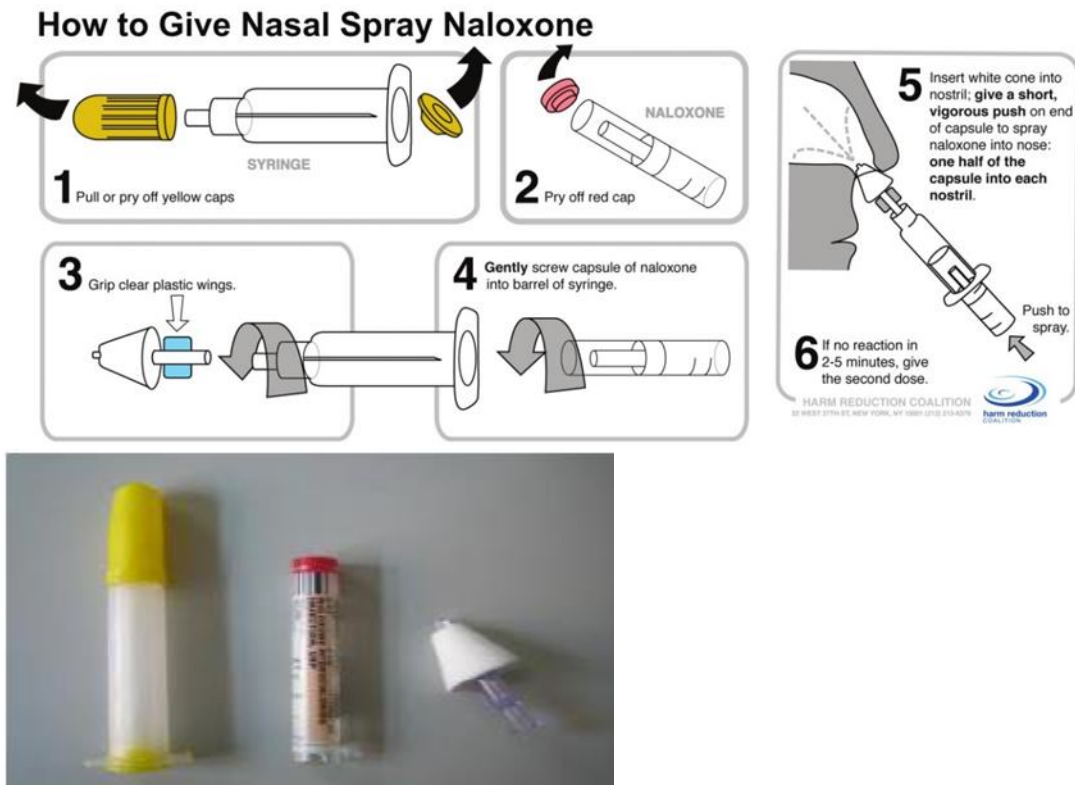
- (1) Obtains naloxone from a prescriber (such as by participating in the Indiana Statewide Naloxone Standing Order);
- (2) Administers naloxone to an individual who is experiencing an apparent opioid-related overdose; and
- (3) Attempts to summon emergency services (**calls 9-1-1**) either immediately before or immediately after administering the naloxone.

## INSTRUCTIONS ON HOW TO GIVE NALOXONE/NARCAN

Naloxone Rescue Kits may be designed for nasal or muscular administration. Follow the instructions below for the type of naloxone in your Naloxone Rescue Kit.

### ***Intranasal Naloxone:***

Follow steps 1, 2, 3, 4, 5 and 6 below for administering Naloxone Nasal Spray.



### ***Intranasal Narcan:***

Follow steps 1, 2 and 3 below for administering Narcan Nasal Spray and watch the on-line video instructions at [www.narcannasalspray.com](http://www.narcannasalspray.com) before encountering an overdose emergency.

## 3 Steps to Help Reverse Opioid Overdose

Using NARCAN® Nasal Spray involves 3 simple steps.

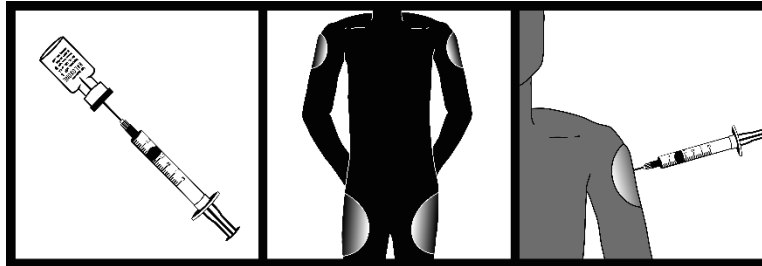
**1 PEEL** back the package to remove the device.

**2 PLACE** the tip of the nozzle in either nostril until your fingers touch the bottom of the patient's nose.

**3 PRESS** the plunger firmly to release the dose into the patient's nose.

### ***Intramuscular Naloxone via syringe (1 mL):***

Follow steps 1, 2 and 3 below for administering injectable intramuscular Naloxone.



1. Pop off orange top of vial and insert syringe,
2. Remove 1 cc of Naloxone by pulling down on the plunger, and
3. Insert syringe into a large muscle and push the plunger in.

### ***Intramuscular Naloxone via preloaded syringes:***

Follow steps 1, 2, 3 and 4 below for administering intramuscular Naloxone via preloaded syringes.

#### **Syringe Assembly Instructions**

1. Step 1 – Take the protective caps off the vial and injector
2. Step 2 – Thread the vial into the injector by using 3 half turns (or until the stopper is pierced by the metal cannula)
3. Step 3 – Remove the cover from the injection tip
4. Step 4 – Remove excess air before injecting the solution

### ***Intramuscular Naloxone via auto-injector:***

Follow steps 1, 2, 3 and 4 below for administering Naloxone via auto-injector and visit the Evzio site at <http://www.evzio.com/patient/about-evzio/how-to-use-evzio.php> for further information.



**1.** Pull EVZIO from the outer case.

**Do not** go to Step 2 (Do not remove the **red** safety guard.) until you are ready to use EVZIO. **If you are not ready to use EVZIO, put it back in the outer case for later use.**



**2.** Pull off the red safety guard.

To reduce the chance of an accidental injection, do not touch the **black** base of the auto-injector, which is where the needle comes out. If an accidental injection happens, get medical help right away.

**Note:** The **red** safety guard is made to fit tightly. **Pull firmly to remove.**

**Do not replace the red safety guard after it is removed.**



**3.** Place the black end against the middle of the outer thigh, through clothing (pants, jeans, etc) if necessary, then press firmly and hold in place for 5 seconds.

If you give EVZIO to an infant less than 1 year old, pinch the middle of the outer thigh before you give EVZIO and continue to pinch while you give EVZIO.

**Note:** EVZIO makes a distinct sound (click and hiss) when it is pressed against the thigh. This is normal and means that EVZIO is working correctly. Keep EVZIO firmly pressed on the thigh for 5 seconds after you hear the click and hiss sound. The needle will inject and then retract back up into the EVZIO auto-injector and is not visible after use.



**4.** Immediately call 911 or seek emergency medical assistance.

**After using EVZIO, get emergency medical help right away.** If symptoms return after an injection with EVZIO, an additional injection using another EVZIO may be needed. Give additional injections using a new EVZIO auto-injector every 2 to 3 minutes and continue to closely watch the person until emergency help is received.

EVZIO cannot be reused. After use, place the auto-injector back into its outer case. Do not replace the **red** safety guard.

## TREATMENT INFORMATION

Several resources exist for locating treatment information:

- Indiana's Community Mental Health Centers:  
[http://www.in.gov/fssa/dmha/files/DMHA\\_SOFs\\_and\\_CMHCs.pdf](http://www.in.gov/fssa/dmha/files/DMHA_SOFs_and_CMHCs.pdf)
- Substance Abuse and Mental Health Services Administration (SAMHSA) – See the Behavioral Health Treatment Services Locator and SAMHSA's National Helpline:  
<https://findtreatment.samhsa.gov>; 1-800-662-HELP (4357); 1-800-487-4889 (TDD)
- Indiana State Department of Health: <http://www.in.gov/isdh/>
- Indiana Governor's Task Force on Drug Enforcement, Treatment, and Prevention: <http://www.in.gov/gtfdetp/index.htm>
- Indiana Attorney General Prescription Drug Abuse Prevention Task Force:  
<http://www.in.gov/bitterpill/>
- *Prescription Drug Overdose: Prevention for States:*  
[http://www.cdc.gov/drugoverdose/states/state\\_prevention.html](http://www.cdc.gov/drugoverdose/states/state_prevention.html)
- Division of Mental Health and Addiction - Family and Social Services Administration:  
<http://www.in.gov/fssa/dmha/index.htm#>
- Connect 2 Help by dialing **2-1-1** or dial (317) 926-4357:  
<http://www.connect2help211.org/>



Addendum

*Indiana Statewide Naloxone Standing Order – **SAMPLE ONLY***  
*Indiana Code § 16-42-27 et seq.*

This standing order issued by [“Prescriber” as defined by § 16-42-27-1], effective on the date below, authorizes all Naloxone Entities to be dispensed, and to maintain and/or administer naloxone, mucosal atomizer devices (MADs), syringes, and other components of the **Naloxone Rescue Kits** for the purpose of assembling and distributing kits to those that may be in a position to assist an individual suffering an opioid-related overdose. This standing order conforms to Indiana Code § 16-42-27 *et seq.*

*Naloxone Rescue Kits*

The contents of **Nasal Naloxone Rescue Kits\*** should contain the following at a minimum:

- A prefilled 2 mL (1 mg/mL) vial of Naloxone and a needleless luer-lock syringe and a mucosal atomizer device,
- Or alternatively, a pre-filled, ready-to-use dose of Narcan Nasal Spray, and
- A quick guide of opioid overdose symptoms and assembly instructions.

The contents of **Intramuscular Naloxone Rescue Kits\*** (syringe) should contain the following at a minimum:

- A 1 mL (0.4 mg/mL) prefilled syringe or 2 mL (0.4 mg/mL or 1 mg/mL) pre-filled syringe or single dose vial (0.4 mg/mL) with syringe,
- Intramuscular needle (21 or 23 gauge, 1” or 1 ½” needle), and
- A quick guide of opioid overdose symptoms and assembly instructions.

The contents of **Intramuscular Naloxone Rescue Kits\*** (auto-injector) should contain the following at a minimum:

- A naloxone auto-injector, and
- A quick guide of opioid overdose symptoms and use instructions.

This order authorizes a dispenser and Naloxone Entity to dispense replacement Naloxone Rescue Kits.

\*This order authorizes each kit to include, at a minimum, one (1) dose of naloxone. Rescuers may require multiple doses to reverse an opioid-related overdose.

\_\_\_\_\_-SAMPLE ONLY-\_\_\_\_\_  
[Prescriber’s Signature & License No.]

\_\_\_\_\_-n/a-\_\_\_\_\_  
Order’s Effective Date

\_\_\_\_\_-SAMPLE ONLY\_\_\_\_\_  
Prescriber’s Name (Print)

\_\_\_\_\_-n/a-\_\_\_\_\_  
Order’s Expiration Date