



ALBUQUERQUE POLICE DEPARTMENT
PROCEDURAL ORDERS

SOP 2-99

Effective: 03/06/19 Review: 03/06/20 Replaces: 06/23/17

2-99 Naloxone Policy

Related Policies: None

2-99-1 Purpose

The purpose of this policy is to establish and create guidelines and procedures for the administration of Naloxone to reverse the effects of opioids.

2-99-2 Policy

It is the policy of the Albuquerque Police Department that the officers who will be administering Nasal Naloxone are properly trained in the use and deployment of the Nasal Naloxone according to the laws of the State of New Mexico and the procedures of the department.

2-99-3 Definitions

A. Department

1. The Albuquerque Police Department

B. Naloxone Program Director

1. Albuquerque Police Department's designated director who manages the Naloxone program (Opioid Antagonist Administration Program) for Trained Targeted Responders.

C. Physician Medical Director

1. The physician with board certification in emergency medicine with further fellowship training in emergency medical services who, by law, oversees the training and practice of the Trained Targeted Responders via written treatment protocols, case reviews, direct observation, and other training as applicable.

D. Administration of Opioid Antagonist

1. The administration of an opioid antagonist by a person authorized pursuant to law or regulation.

E. Opioid



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1. Containing or derived from opium, including but not limited to morphine and heroin.

F. Opioid Antagonist

1. A drug that nullifies in whole or in part the administration of an opioid. The opioid antagonist is limited to Naloxone or other medications approved by the Department.

G. Opioid Antagonist Administration Program

1. A training program, which prepares a person to administer an opioid antagonist as shown by best practices or recommended by the Department for an Opioid Antagonist Administration Program.

H. Trained Targeted Responder

1. An officer who has completed an authorized Opioid Antagonist Training Program and who administer opioid antagonists.

I. Officer

1. A commissioned member of the Department.

2-99-4 Rules and Responsibilities

- A. Naloxone shall only be administered when it is safe to do by a Trained Targeted Responder. The primary role of the officer is to provide a safe environment for themselves, the public and emergency medical crews. The officer shall consider Naloxone administration as per the following guidelines:

1. A minimum of two officers shall be with the individual before administering Naloxone.
2. Assure the scene is safe.
3. Request EMS and advise that opioid antagonist was used.
4. The officer who is a Trained Targeted Responder shall be issued medical gloves, CPR Mask and Naloxone.
5. The officer shall use medical gloves.



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6. If the individual has no pulse, do NOT give Naloxone.
7. If the individual has a pulse but is not breathing, consider giving the Naloxone as prescribed.
8. Once the drug is given, the officer must be aware that the individual may soon wake up and be combative.
9. The officer must be prepared to protect themselves, if necessary.
10. EMS Personnel shall evaluate the individual.

B. The Physician Medical Director

1. The Physician Medical Director allows for the administration of opioid antagonists. This includes overseeing training, emergency medical services coordination, protocol approval, quality assurance and reporting. This includes; providing for and ensuring the medical control of trained targeted responders; the development, implementation and evaluation of medical protocols; oversight of quality assurance activities; and compliance with the New Mexico Board of Pharmacy requirements.

C. The Program Director

1. Shall be, or work with, the Physician Medical Director to oversee the Opioid Antagonist Administration Program.
2. Selects and identifies officers as Trained Targeted Responders.
3. Maintains Opioid Antagonist Administration Training records for all the Trained Targeted Responders while they are active in the program and for at least three years thereafter.
4. Maintains Opioid Antagonist Administration Program records including opioid antagonist inventory records, Trained Targeted Responder training records and Opioid Antagonist Administration Program usage records.
5. Ensures all Trained Targeted Responders are trained using an opioid antagonist.



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6. Provides evidence of coordination of the Opioid Antagonist Administration Program with local EMS Services and Emergency Dispatch Agencies including 911 Dispatch Agencies.
 7. Registers the Opioid Antagonist Administration Program with the New Mexico Department of Health.
 8. Reports all administrations of an opioid antagonist to the New Mexico Department of Health and the Physician Medical Director using the approved reporting format.
 9. Assists the Physician Medical Director with quality assurance review of all opioid antagonist administration.
 10. Ensures the opioid antagonist is maintained and stored in accordance with the manufacture's guidelines.
 11. Maintains a list of Trained Targeted Responders.
 12. Maintains dates of training for Trained Targeted Responders.
 13. Maintains copies of Physician Medical Director approved medical protocols.
 14. Maintains copies of the Physician Medical Director contract/agreement.
 15. Maintains copies of registration and EMS Service notification forms.
 16. Maintains copies of opioid antagonist usage reports/data collection forms.
 17. Maintains quality assurance review documentation.
 18. Maintains copies of opioid antagonist purchase and maintenance records.
- D. Trained Targeted Responders
1. Shall complete an initial Opioid Antagonist Administration Training Program with CPR Training.
 2. Shall, every two years, complete a refresher opioid antagonist administration-training course with CPR recertification.



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3. Shall comply with Physician Medical Director Protocols for response to suspected drug overdose.
4. Shall report all responses to suspected drug overdose to the Program Director and Physician Medical Director and complete a report on the approved DOH form.
5. Ensures that the opioid antagonist drugs and other supplies are used in accordance with the manufacturer's guidelines and inspect the opioid antagonist drug expiration date at least once a month.

E. After Administration

1. The officer shall fill out the administration sheet and contact the Physician Medical Director. Once the Physician Medical Director has been contacted, the Physician Medical Director will collect the form, restock Naloxone, gloves, and mask (if available based on funding).
2. Nothing in the policy shall be construed to impose civil or criminal liability on any Trained Targeted Responder pursuant to New Mexico statute 24-23-1.