

OPTIONAL Naloxone Program for First Responder Agencies: A How-To

1. What does a first responder agency need if it chooses to have a naloxone program?

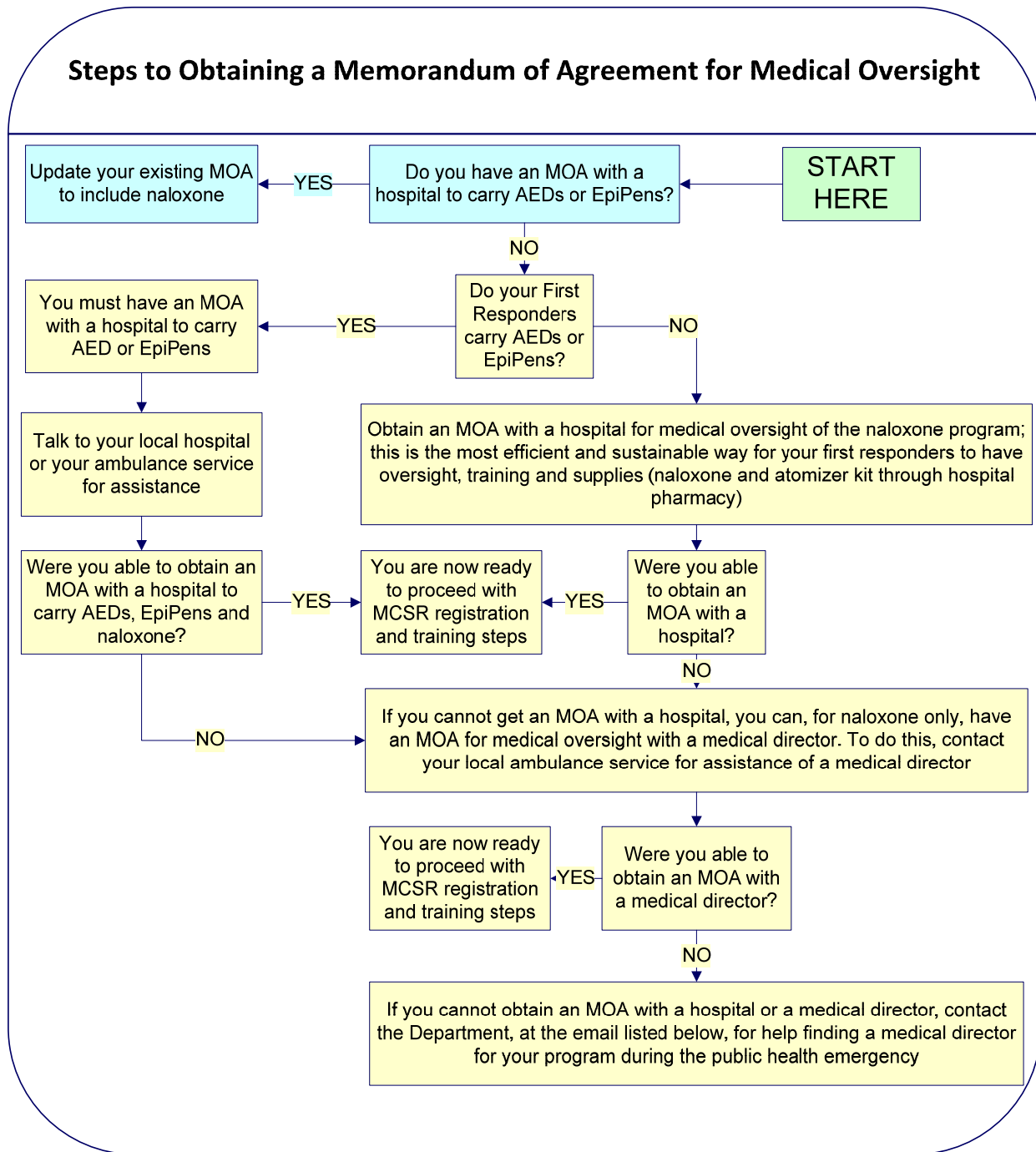
- A. Memorandum of agreement (MOA) for medical oversight
- B. Training for its first responders, meeting requirements of A/R 2-100
- C. Massachusetts Controlled Substances Registration
- D. Naloxone supply and atomizer kit for nasal administration, in accordance with Statewide Treatment Protocol 2.14 (which provides standing order)

2. Steps to setting up a first responder agency optional naloxone program

- A. Memorandum of agreement for medical oversight (see diagram below)
 - i. If your first responder agency has an MOA with a hospital to carry AEDs or EpiPens, update that current MOA to include naloxone.
 - ii. If your first responder agency does not have an MOA and carries and uses AEDs and/or EpiPens please be advised that you must have such an MOA with a hospital, under the First Responder Training Regulations, at 105 CMR 171.225 (AED) and 105 CMR 171.225 (EpiPen). See: <http://www.mass.gov/eohhs/docs/dph/regs/105cmr171.pdf>.
 - iii. If you are going to now get an MOA with a hospital, to cover your current AED and/or EpiPen program, the Department recommends you have it cover naloxone use as well. To get an MOA with a hospital, approach your local hospital, or your local ambulance service, for assistance. Make sure the hospital knows that the MOA is for a first responder agency, and must address the requirements for such MOAs in the First Responder Training regulations, as cited above.
 - iv. If you do not carry AEDs or EpiPens, and do not have an MOA with a hospital:
 1. The Department recommends you attempt to obtain an MOA with a hospital for medical oversight of the naloxone program, because it is the most efficient and sustainable way in the long term, for your first responders to get appropriate medical oversight, training and your agency to get naloxone and atomizer kit (through hospital pharmacy). Follow the recommendations in 2.A. iii., above.
 2. If you have difficulty obtaining an MOA for medical oversight with a hospital, you have the option, during this public health emergency, for naloxone only, of obtaining an MOA for oversight with a medical director. See 105 CMR 171.227. To try this approach, contact your local ambulance service for a recommendation of a medical director with experience in EMS or first responder agency oversight.
 3. If you have difficulty obtaining an MOA with either a hospital or a medical director, contact the Department, at Tammy.Thomas@state.ma.us, for assistance with finding a medical director for your program during the public health emergency.
- B. Training for first responders – See 105 CMR 171.165
 - i. Training must be approved by your medical director.
 - ii. Training must meet the minimum curriculum requirements of Administrative Requirement 2-100, <http://www.mass.gov/eohhs/docs/dph/emergency-services/ar/2-100.pdf>
- C. Massachusetts Controlled Substances Registration – Required under 105 CMR 700.003(D), INSERT link to DCP amended regulations
 - i. Print out MCSR form for municipalities at: : <http://www.mass.gov/eohhs/docs/dph/quality/drugcontrol/naloxone-nerve-antidote-epi-form.pdf>
 - ii. Complete and send in with fee, if fee is applicable. During the pendency of the public health emergency, if a municipality is registering ONLY for naloxone – that is, your first responder agency does NOT carry nerve agents or EpiPens – the fee is waived. But if the application is to obtain a DCP registration for more than naloxone, as required by 105 CMR 700.003(D), the fee is still applicable.

D. Naloxone Supply and Atomizer Kit, for nasal administration per Statewide Treatment Protocol 2.14

- i. If you have an MOA with a hospital, your first responder agency obtains your supply of naloxone and atomizer kit from the hospital’s pharmacy.
- ii. If you have an MOA with a medical director, follow his or her instructions on which pharmacy to access for obtaining your supply of naloxone and atomizer kit.
- iii. First responders are authorized to administer nasal naloxone as a standing order, under Statewide Treatment Protocol 2.14. See: <http://www.mass.gov/eohhs/docs/dph/emergency-services/emergency-protocols-substance-abuse-overdose.pdf>. There is no need for a separate medical order from a physician.



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