

# **\*SAMPLE Agency Policies and Procedure**

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## **Basic Life Support Intranasal Naloxone Program**

**Agency Name:** \_\_\_\_\_ **Effective Date:** \_\_\_\_\_

*BEMS Policy Statement 10-13 requires agencies develop written policies and procedures for BLS Naloxone use that are consistent with state and local protocol. Agencies may use this sample policy or create their own policy to comply with this requirement.*

1. Policies and procedures for the EMS training, credentialing and continuing education:
  - a. In order to meet the Training Requirement provider must:
    - i. View the State Training video or Attend a Live In-service
    - ii. Review the written material
    - iii. Attend a brief supervised practice session
  - b. In order to meet the credentialing requirements, providers must:
    - i. Complete the training requirements
    - ii. Have a valid CFR, EMT-B or AEMT certification
    - iii. Meet all EMSTAR provider credentialing requirements
  - c. In order to ensure our providers maintain their competency, continuing education will be provided by: \_\_\_\_\_
2. The agency will maintain a roster of credentialed users, and their training.
3. The agency will ensure an appropriate patient care record is completed for all administrations.
4. For the first 6 months, the agency will internally QA 100% of BLS Naloxone administration, using the QA form, and forward to their Medical Director to review including appropriateness.
5. Naloxone kits will be kept in the following location:  
\_\_\_\_\_
6. Additional Naloxone will be kept in the following location:  
\_\_\_\_\_
7. Naloxone will be stored and secured in the following manner:  
\_\_\_\_\_
8. Medication and administration devices will be disposed of in a sharps container after use.
9. All medications should be checked at least monthly to ensure they have not expires. Expired medications should be replaced immediately.
10. Members who do not meet the credentialing requirements for naloxone use (BLS or ALS), may not store, handle or administer naloxone.