



Medical Directive

Title: Dispensing of Naloxone Kits

Number: Not Applicable

Activation Date: October 2019

Review due by: June 2022

Sponsoring/Contact Person(s)
(name, position, contact particulars):

Chief of Emergency
Chief of Psychiatry
Professional Practice Leader, Emergency Services
Professional Practice Leader, Mental Health
Director of Pharmacy

Order and/or Delegated Procedure:

Appendix Attached: ☐ Yes ☒ No **Title:**

Trained Registered Pharmacists in all areas, Registered Nurses (RN) and Registered Practical Nurses (RPN) of the Emergency Department (ED) and RNs, RPNs and Registered Social Workers (RSW) of the Outpatient Mental Health Department (OPMH), may dispense Naloxone Kit(s) (maximum of 3 kits to one client), as described below to any eligible client in the absence of a physician.

Recipient Patients:

Appendix Attached: ☐ Yes ☒ No **Title:**

Any eligible client presenting to the Emergency Department or Outpatient Mental Health Department, or who is being discharged from the hospital, who has the capacity to understand and appreciate the information and education being provided and meets the conditions identified in this directive.

Authorized Implementers:

Appendix Attached: ☒ Yes ☐ No **Title:**

All ED and OPMH Nurses and Pharmacists as authorized by the Regulated Health Professions Act and applicable College of Nurses or Ontario College of Pharmacists practice standards, and all OPMH Social Workers as permitted by the Social Work and Social Service Work Act and applicable Ontario College of Social Workers and Social Service Workers practice standards, who have completed Markham Stouffville Hospital Corporation (MSHC) training that includes education on this specific medical directive and internal policy titled Naloxone Kit Distribution and have demonstrated knowledge, skill and judgment in its usage to the departmental Professional Practice Leader or Director of Pharmacy.

Indications:

Appendix Attached: ☐ Yes ☒ No **Title:**

An authorized Pharmacist, Nurse or Social Worker may initiate this directive if the client is alert, conscious and presents with:

- Self-reported opioid use, at high risk of opioid overdose, or illicit drug use that could potentially contain opioids
OR
- Family, friends or other individuals known by the client is suspected or known to use opioids, or is at high risk of

opioid overdose, or uses illicit drugs that could potentially contain opioids

Contraindications:

- Client refusal to consent for procedure/treatment
- Client refusal to complete the Naloxone Kit Training
- Known allergy to any component of Naloxone, including benzalkonium chloride, disodium ethelenediaminetetraacetate, sodium chloride, or hydrochloric acid

Consent:

Appendix Attached: ☐ Yes ☒ No **Title:**

An authorized Pharmacist, Nurse or Social Worker implementing this directive will obtain consent where possible from the patient or substitute decision maker prior to implementing this Medical Directive in accordance with Markham Stouffville Hospital's Health Care Consent policy (#270.914.914.030), applicable College of Nurses, Ontario College of Pharmacists or Ontario College of Social Workers and Social Service Workers standards and Health Care Consent Act.

Guidelines for Implementing the Order / Procedure:

Appendix Attached: ☐ Yes ☒ No **Title:**

A Naloxone Kit, as provided from Ontario Public Health, may be dispensed once the ED and OPMH Nurse, Pharmacist or OPMH Social Worker has:

- Assessed the client to determine whether the specific indications outlined in the directive have been met
- Identified the risk(s) to the client of implementing the directive
- The knowledge, skill and judgment to safely implement the directive
- Provided the client with the Naloxone Kit Training as outlined in the internal policy titled Naloxone Kit Distribution
- Identified who the attending physician is if clarification or assistance is needed

Documentation and Communication:

Appendix Attached: ☐ Yes ☒ No **Title:**

The Pharmacist, Nurse or Social Worker will:

- Document the date and time the Naloxone Kit was dispensed, reference the use of this medical directive and include the signature of the implementer in the patient's record in one (1) of the following methods:
 - *Emergency Record*
 - *ED Paper MAR*
 - *Orders sheet* with patient's label
 - *eMAR in Meditech*
- A note in the patient's medical record regarding the distribution of the Naloxone Kit
- Complete the Naloxone Training Checklist
- Complete MSHC's Naloxone Kit Distribution Record, and forward to the Pharmacy Department

In the Emergency Department, the Emergency physician will sign off for the implementation of the medical directive on the *Emergency Record* (form# EDR) in the physician Signature section, which is equivalent to co-signing for the medical directive.

Review and Quality Monitoring Guidelines:

Appendix Attached: ☐ Yes ☒ No **Title:**

Staff identifying any untoward or unintended outcomes arising from implementation of orders under this directive, or any issues identified with it will report these to the following people as soon as possible for appropriate disposition:

- Attending Physician
- Patient Care Manager

- Quality and Risk Management (through I Report Incident reporting system)

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| Administrative Approvals (as applicable): | Appendix Attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Title: |
| Emergency Department Operations Committee – 21/05/2019 Outpatient Mental Health Operations Committee – 16/05/2019 Drugs & Therapeutics Committee – 12/06/2019 Medical Advisory Committee – 26/06/2019 | |
| Approving Physician(s) / Authorizer(s): | Appendix Attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Title: |
| All Emergency physicians and Psychiatric physicians at Markham Stouffville Hospital Corporation. | |

References:

- Emergency Nurses Association (2007). Emergency Nursing Core Curriculum, 6th Edition. St. Louis: Saunders Elsevier
- Howard, P. K, & Steinman, R. A. (2010). Sheehy's Emergency Nursing Principles and Practice, 6th Edition. St. Louis: Mosby. Ontario Hospital Association (2008). Emergency Department (ED) Medical Directives Implementation Kit: Wait Time Strategies. Retrieved from [http://www.oha.com/KnowledgeCentre/Library/Toolkits/Pages/EmergencyDepartment\(ED\)MedicalDirectivesImplementationKit.aspx](http://www.oha.com/KnowledgeCentre/Library/Toolkits/Pages/EmergencyDepartment(ED)MedicalDirectivesImplementationKit.aspx)
- Practice Guidelines for Medication Practices [Guidelines for Social Work and Social Service Work Members of the Ontario College of Social Workers and Social Service Workers]*. (2009, September 1). Ontario, Toronto. Retried from <http://www.ocswssw.org/wp-content/uploads/2015/01/OCSWSSW-Medication-Practices-Guide-2014-E.pdf>
- Strategies. Retrieved from [http://www.oha.com/KnowledgeCentre/Library/Toolkits/Pages/EmergencyDepartment\(ED\)MedicalDirectivesImplementationKit.aspx](http://www.oha.com/KnowledgeCentre/Library/Toolkits/Pages/EmergencyDepartment(ED)MedicalDirectivesImplementationKit.aspx)

APPENDICES:



v4A-Overdose_Prevention_Training_Manual

York Region Public Health Naloxone Distribution Training Manual



DRPH Overdose Basics.pdf

Durham Region Training Info

Authorizer Approval Form

Title and Number of Directive/Delegation:Dispensing of Naloxone Kits

| Name of Physicians or Authorizers | Signature | Date |
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