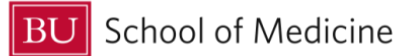




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 BOSTON PUBLIC HEALTH COMMISSION

# Overdose Prevention and Intranasal Naloxone Rescue Kits (NNRK) Distribution in the BMC Emergency Department: A City, State and Hospital Collaboration

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June 19, 2014

# Collaboration for Overdose Prevention

BMC-ED Project ASSERT

 BOSTON PUBLIC HEALTH COMMISSION

in 2006 passes a regulation that authorized a pilot overdose prevention program with intranasal naloxone distribution by trained, nonmedical public health and EMS workers under a standing order by EMS Director; and the City of Boston assumes liability for workers.



Provides ED patients with info, support, and referrals to primary care, drug treatment and other community services Starting in 2009, as part of the South End Healthy Boston Coalition, began OD Education and NNRKs distribution.



In 2007 DPH pilot program authorizes OEND distribution; takes the Boston program statewide—establishes a state medical director who

issues a standing order for NNRK training & distribution; DPH provides NN, atomizer and educational materials to approved agencies under a joint collaboration between commissioner's office, Office of HIV AIDS and BSAS; a Good Samaritan law passes in 2012 supports wide dissemination—MDs can prescribe and non medical and medical people can distribute and receive NN lawfully.



**ED Intranasal Naloxone Rescue Kit  
Discharge Order Protocol**

# Massachusetts Department of Public Health Community-Based Enrollments and Rescues: 2006-5/2/2014

- Enrollments
  - 24,637 individuals
  - 17 per day
- Rescues
  - 2,867 reported
  - 2.4 per day

In a time series analysis, Opioid-related overdose death rates in Massachusetts communities that implemented OEND were 27-46% lower than in those that had not, controlling for community factors

*Walley A, et al. BMJ. 2013;346:f174.*



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## Policy and Procedure Manual

<b>Policy #:</b>	13.09.45
<b>Issued:</b>	Sept. 2013
<b>Reviewed/ Revised:</b>	
<b>Section:</b>	Pharmacy

### Intranasal Naloxone Kit Discharge Order Protocol

#### **Purpose:**

To establish a Standing Discharge Order Protocol and dispensing procedure for Nasal Naloxone Kit Discharge Prescriptions in the BMC Emergency Department.

#### **Policy Statement:**

This protocol allows for Nasal Naloxone Kits to be ordered by licensed personnel for patients \*at risk for opioid overdose\* who are being discharged from the BMC Emergency Department. Under the protocol, BMC Inpatient Pharmacy is granted authority to dispense Nasal Naloxone Kits as a discharge prescription when the BMC Outpatient Pharmacies are closed. BMC waives the payment for these prescriptions.

#### **Application:**

All Pharmacy and Emergency Department (ED) staff

#### **Exceptions:**

None

#### **Procedure:**

##### **Background**

- The Massachusetts Department of Public Health (DPH) approves community programs to provide overdose education and naloxone distribution services and



# Nasal Naloxone Rescue Kit (NNRK): BMC Protocol



- This novel protocol augments existing services.
- An outpatient prescription for NNRK can be filled at BMC outpatient pharmacies during normal business hours
- When Project Assert is unavailable and the outpatient pharmacies are closed, an ED RN or MD may fax a Discharge Prescription for NNRK Standing Order to the inpatient pharmacy
- The Discharge Prescription form are placed in the patient's medical record.
- Under this protocol, prescriptions are considered to be signed by Alexander Walley, MD (the requirement for an actual signature is waived).

# STANDING ORDER FORM FOR NNRK



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**BMC EMERGENCY DEPARTMENT**  
850 Harrison Ave, Boston, MA 02118

**DISCHARGE STANDING ORDER FOR NASAL NALOXONE KIT**  
**FAX to Pharmacy and Place Original in Patient's CHART**

Patient Name: \_\_\_\_\_  
MRN: \_\_\_\_\_ (place patient sticker here)  
DOB and Age: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ TUBE to ED Station #: \_\_\_\_\_

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

Allergies: \_\_\_\_\_

**BMC Standing Order Protocol for Nasal Naloxone**

*Pursuant to the Nasal Naloxone Standing Order Protocol, approved by BMC Medical Executive Committee, September 13, 2013, Nasal Naloxone Kits will be dispensed from Inpatient Pharmacy to patients at risk for opioid overdose who are being discharged from the BMC Emergency Department when the BMC Outpatient Pharmacies are closed.*

**Dispense:**

ONE Nasal Naloxone Kit for reversal of opioid overdose in the setting of respiratory depression or unresponsiveness

Nasal naloxone kit contains:

- Two 2ml Luer-Jet™ luer-lock syringes prefilled with naloxone (concentration 1mg/ml)
- Two mucosal atomization devices
- DPH Opioid Overdose and Prevention Programs Information Sheets\*
- Step-by-step instructions for administration of nasal naloxone\*
- "Get the SKOOP" overdose prevention pamphlet

Administer as directed to a person suspected of an opioid overdose with respiratory depression or unresponsiveness.

No Refills

Under this protocol, prescriptions are considered to be signed by Alexander Walley, MD and the requirement for an actual signature is waived.

Alexander Y. Walley                      Mass Lic #221133  
Physician's Name (Print)              Physician's License Number

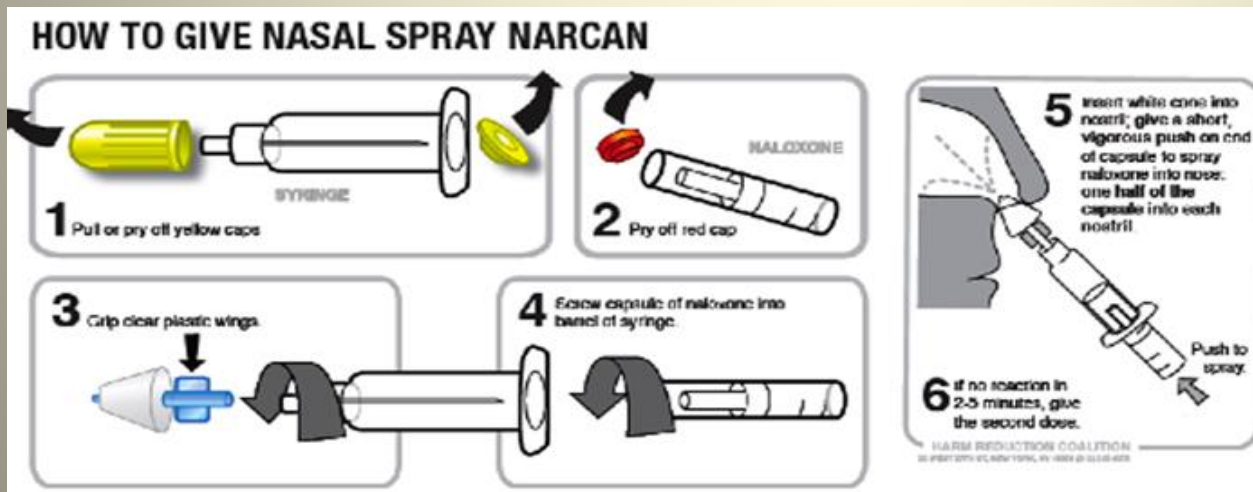
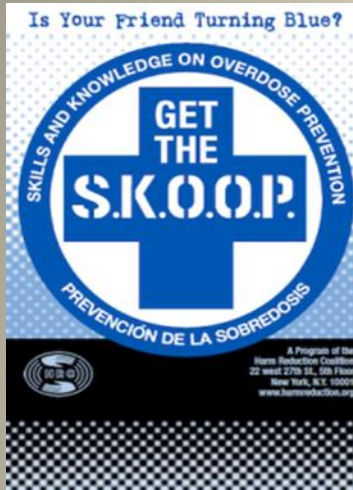
\* DPH Opioid Overdose and Prevention Programs Information Sheets and Step-by-step instructions are available for download from the Pharmacy Department website.

# BMC NNRK Policy– Who was important to collaborate with when writing the policy?

Long process requiring encouragement and advocacy

- First, got buy-in from the top, with the help of agency partners
- *Director* of Boston Public Health Commission (BPHC) met 11/2013 with the BMC hospital president and key leaders (nursing, pharmacy, physicians, social workers) to enlist support to combat Boston's Opioid OD Epidemic
- Stakeholders charged with drafting the new policy
- 1 year later, Medical Executive Committee approved & pharmacy disseminated the policy

# ED staff trained in overdose education and instructions for kit assembly and use



1. Pop off two yellow caps and one red cap.

2. Screw medicine **gently** into delivery device

3. Hold spray device and screw it onto the top of the delivery device.

4. Spray half of the medicine up one side of the nose and half up the other side.

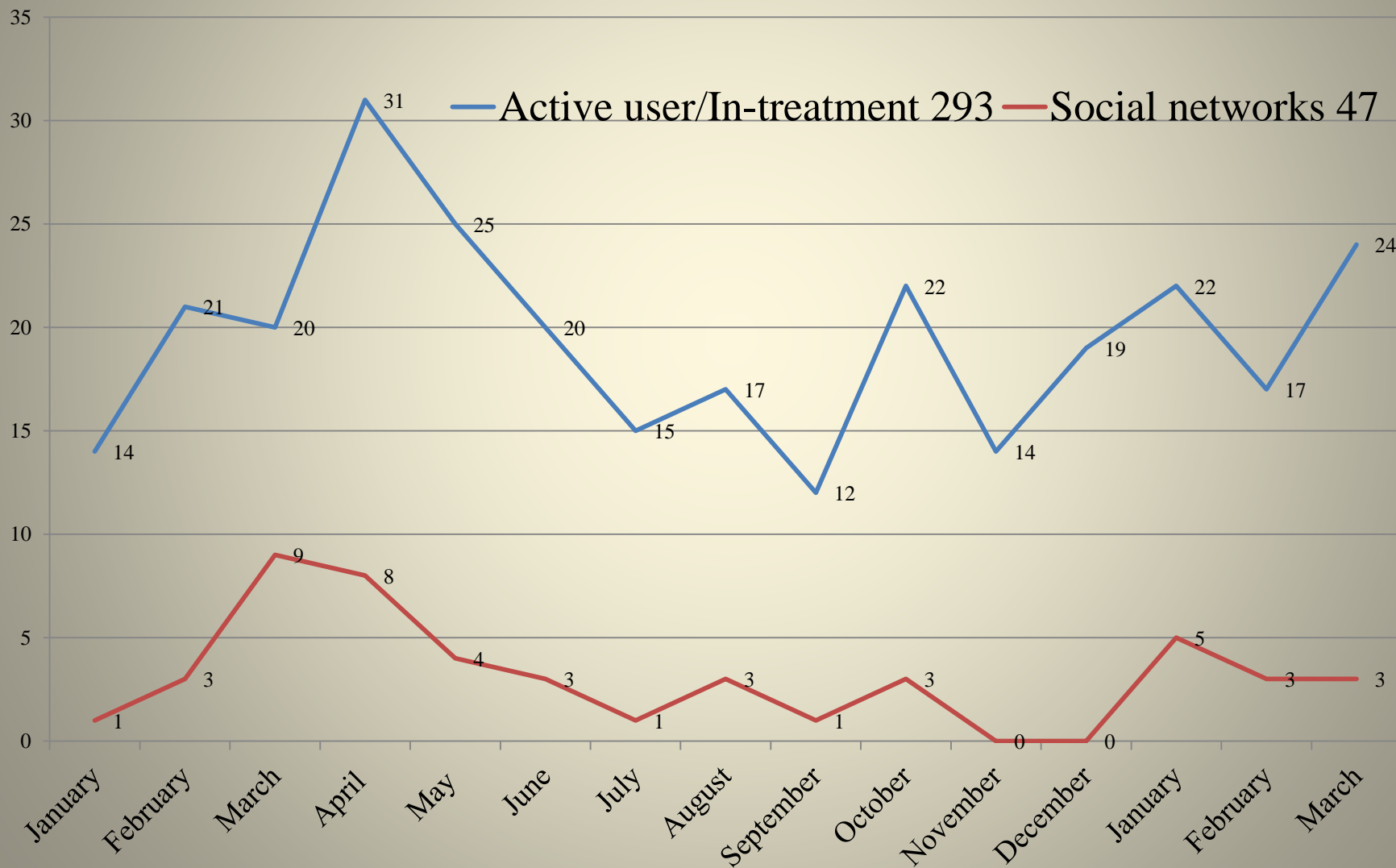
Acceptable, safe, and easily administered at low cost!



January 2013 – March 2014

992 Heroin/Opioid related ED visits/345 were ODs.

Project ASSERT distributed 340 NNRK



# Project Assert OEND, 2012

## 51 12-month follow-up phone interviews

### 37/51 received NNRK

*Overdose responses among those participants who witnessed an overdose*

	<b>Witnessed OD (n=27)</b>	<b>OEN (n=19)</b>	<b>OE Only (n=8)</b>
Called 911	63% (17)	74% (14)	38% (3)
Rescue breathing	26% (7)	26% (5)	25% (2)
Administered nasal naloxone	22% (6)	32% (6)	0
Stayed with the victim	93% (25)	95% (18)	88% (7)

□ Dwyer K, et al. Opioid Education and Nasal Naloxone Rescue Kit Distribution in the Emergency Department. ACEP Research Forum 2013 iposter 346  
<http://acep.posterview.com/>

# Resident and Faculty Survey on BMC Policy 4/23/14

N=40/81 Residents 64% Faculty 36%	YES	No
Are you aware of policy?	85%	15%
Have you reviewed policy?	57.5%	42.5%
Have you called Project ASSERT to provide NNRK and OE who had opioid overdose	77.5%	22.5%
Have you called Project ASSERT to provide NNRK and OE to patients with opioid related visits without OD?	57.5%	42.5%
Have you written an RX for NNRK	20%	80%
Have you ordered naloxone from IP Pharmacy after project ASSERT hours?	25%	75%

# Resident and Faculty Survey on BMC Policy 4/23/14

## RN/MD distributed 33 NNRK since 12/13

PERCEIVED BARRIERS	%	#
Not enough time	22.2%	8
Patients don't want to stay for education/kits	30.6%	11
Didn't think about it	61.1%	22
Didn't know how	27.8%	10
Disagree with the policy on moral grounds	0%	0
Don't understand why this is my responsibility	0%	0
I don't perceive there to be any barriers	13.9	5