Kentucky Department for Public Health

Clinical Protocol-Medically Approved Guideline for Naloxone Use in the School Setting

Our mission is to improve the health and safety of people in Kentucky through prevention, promotion and

TEAM KENTUCKY®

CABINET FOR HEALTH AND FAMILY SERVICES

Revised: 2026

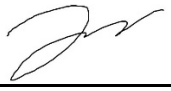
Kentucky Public Health

Prevent. Promote. Protect.

Kentucky regulations state that the Kentucky Department for Public Health (KDPH) must develop clinical protocols for the use of stock medications in schools—including supplies of naloxone such as over-the-counter nasal spray—and that these school-specific protocols or medically approved guidelines must be kept in the school health section of the Clinical Service Guide maintained by the local health department. These protocols shall be developed in collaboration with local health departments or local clinical providers, local schools and school districts.

Each school electing to keep naloxone shall implement policies and procedures for managing opioid overdose, developed and approved by the local school board.

This protocol-medically approved guideline has been approved and adopted by the Kentucky Department for Public Health.



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Date

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Public Health Authority for School Health

The KDPH serves as Kentucky's statewide public health authority for school health, providing expertise, standards and clinical guidance to help schools deliver safe, consistent and medically sound services to students. Its work spans several core areas.

Public-health leadership in school health

KDPH develops and shares evidence-based health guidance that supports schools in managing everyday student health needs and responding to emergencies. This includes shaping clinical expectations for managing chronic conditions, addressing communicable disease concerns and promoting preventive health practices that reduce risks for students and staff.

Partnership with the education system

KDPH works closely with the Kentucky Department of Education (KDE) to align school health practices with public health principles. This collaboration ensures that school districts have access to medically accurate standards, training expectations and resources that support safe delivery of health services by nurses and trained school personnel.

Emergency preparedness and response

KDPH provides the clinical direction schools rely on during health emergencies, including anaphylaxis, asthma attacks, severe hypoglycemia and suspected opioid overdoses. By offering medically grounded protocols and training support, the department helps ensure that school staff can respond quickly and appropriately while maintaining student safety.

Support for healthier school environments

KDPH contributes to statewide efforts to promote healthier school environments, including initiatives in disease prevention, environmental health and student wellness. Its guidance helps schools adopt practices that support attendance, learning and overall well-being.

Statewide consistency and public-health alignment

Through its expertise, KDPH helps create uniform expectations for school health across Kentucky, reducing variation among districts and ensuring that student health services reflect current public health knowledge. While schools and the education system manage day-to-day operations, KDPH provides the medical foundation that underpins safe and effective school-health practice.

Purpose

This protocol-medically approved guideline establishes standardized procedures for recognizing a suspected opioid overdose and administering naloxone in the school setting. It also provides guidance on recognizing and responding to a student believed to be experiencing an opioid overdose and on safely administering or assisting in administering this medication to any student believed in good faith to be experiencing an overdose. The goal is to reduce morbidity and mortality by enabling trained school personnel to respond rapidly and safely during an opioid-related medical emergency.

This protocol-medically approved guideline was developed in collaboration with the KDE, local school districts, local health departments, local clinical providers and pharmacists to provide advice on the clinical administration of naloxone and to address its use in the school setting and is available for download from our website.

Scope

This protocol-medically approved guideline applies to:

- Schools and school districts that maintain naloxone.
- Trained school personnel are authorized to administer naloxone.
- Any individual on school property or at a school-sponsored event who is reasonably believed to be experiencing an opioid overdose, regardless of known drug use.

Definitions

- Naloxone: A medication that can temporarily reverse the effects of an opioid overdose by blocking opioid receptors.
- Opioid Overdose: A life-threatening condition caused by excessive opioid exposure, leading to slowed or stopped breathing.
- Standing Order: Written authorization from a licensed healthcare practitioner permitting trained personnel to administer naloxone.
- Trained School Personnel: Employees who have completed district-approved naloxone training and are authorized to administer medication under KRS 156.502.

Legal Authority

This protocol-medically approved guideline is developed in accordance with state laws permitting schools to maintain and administer emergency medication under a standing order or medically approved guidelines from a licensed healthcare provider and states that the Kentucky Department for Public Health (KDPH) shall develop clinical protocols to address the supply of naloxone, including over-the-counter nasal spray kept on school premises. These laws provide civil and criminal immunity for good-faith administration during emergency administration.

KRS 160.290 General powers and duties of the board, in summary, gives each local board of education broad authority to manage and oversee all public schools within its district. This includes the power to:

- Establish schools, courses and services that support education, student health and student welfare, if they align with Kentucky Board of Education regulations.

About Local Board Policies

- District policies created under this authority:
- Explain how the district will carry out state laws and regulations.
- Provide guidance, protocols and procedures for staff and schools.
- Help protect students, employees and the district by ensuring consistent practices.
- May be developed with support from the Kentucky School Boards Association (KSBA), which offers a policy-writing service to districts.

Each school electing to keep naloxone shall implement policies and procedures for managing any individual suffering from an apparent opiate-related overdose, developed and approved by the local school board.

KRS 217.186 Definition -- Provider prescribing or dispensing opioid antagonist -- states that the board of each local public school district and the governing body of each private and parochial school or school district may permit a school to keep naloxone on the premises and regulate the administration of naloxone to any individual suffering from an apparent opiate-related overdose.

- A person or agency, including a school employee authorized to administer medication under KRS 156.502 may:
  - Receive a prescription for the drug naloxone,
  - Possess naloxone pursuant to this subsection and any equipment needed for its administration, and
  - Administer naloxone to an individual suffering from an apparent opioid-related overdose.

201 KAR 2:360 Opioid antagonist dispensing. States that Naloxone may be purchased with a prescription from a medical provider or pharmacist who has met the requirements and received certification from the Kentucky Board of Pharmacy.

KRS 314.021 Policy states that “all individuals licensed or privileged under provisions of this chapter and administrative regulations of the board shall be responsible and accountable for making decisions that are based upon the individuals' educational preparation and experience and shall practice with reasonable skill and safety.”

Delegation

- KRS 314.021 Policy states that "all individuals licensed shall be responsible and accountable for making decisions that are based upon the individuals' educational preparation and experience and shall practice with reasonable skill and safety."
- Nurses who make delegatory decisions regarding the performance of acts/tasks by others are governed by 201 KAR 20:400 Delegation of nursing tasks.
- Kentucky Board of Nursing RN Supervision and Delegation - KBN.
    - AOS #15 Supervision and Delegation.
    - AOS #30 School Nursing Practice.

Over-the-Counter Naloxone Nasal Spray

The Kentucky Board of Nursing (KBN) KBN AOS #16 Scope of Nursing Practice in the Recommendation and Administration of Over-the-Counter (OTC) Medications states:

- When a nurse, as an employee or volunteer of a healthcare delivery system, provides non-prescription medication to an individual, the nurse should do so based on an order from a qualified healthcare provider or medically approved guidelines to supply the non-prescription medication.

Training Requirements

School staff must complete the approved Medication Administration Training Program prior to administering medication to students as required per KRS 156.502. Training must be provided annually, documented and retained by the school for 1 year.

Staff should review manufacturer instructions for naloxone as source material and, to the extent possible, utilize manufacturer training instructions, including available visuals and videos, with clarifications specific to the situation.

All school personnel authorized to administer naloxone, including those in extracurricular programs, should receive annual training that provides:

- Basic understanding of opioid overdose.
- How to recognize symptoms of an opioid overdose.
- How to respond to an emergency involving an opioid overdose.
- Understanding naloxone's purpose and limitations.
- Safe administration techniques.
- Emergency response procedures, including calling 911.
- Identification of the appropriate staff person(s) to contact immediately in case of an emergency.
- Post event monitoring and documentation.
- A test demonstrating competency of the knowledge required to an opioid overdose and administer naloxone.

Procedure

This section outlines the standardized steps required to safely prepare, administer and manage naloxone administration in the school setting in accordance with current regulations and clinical best practices.

Required Supplies

Each school that maintains naloxone must have the following supplies readily available for emergency use:

- Intranasal naloxone kits — prepackaged nasal spray units designed for layperson administration.
- Personal protective equipment — gloves, face shields and other barrier devices to support safe response.
- Emergency response materials — items such as a CPR mask (if available), disposable wipes and a small trash bag for contaminated materials.
- Incident documentation forms — district-approved forms for recording naloxone administration and emergency response details.
- Copies of this protocol-medically approved guideline kept with the naloxone kit or in an immediately accessible location.
- Optional supportive supplies — such as a pocket pulse oximeter or rescue breathing mask, if the district chooses to include them.

Storage, Security and Maintenance

Store naloxone in a secure but readily accessible location for emergency use.

- Maintain storage within recommended at controlled room temperature 15°C to 25°C (59°F to 77°F) and in a dark area.
- Conduct monthly checks for:
    - Expiration dates
    - Package integrity
- Replace naloxone immediately if used, expired, or damaged, by ordering from the FindNaloxoneNowKY.org website.
- School staff should be familiar with the type of naloxone maintained by their agency and its use.

School staff should refer to the naloxone package insert used at their facility and store naloxone hydrochloride as directed by the manufacturer.

Indications for Use

Naloxone may be administered when an individual is suspected of experiencing an opioid overdose, indicated by:

- Slow, irregular, or absent breathing
- Unresponsiveness or inability to wake
- Pale, bluish, or gray skin, lips, or fingernails
- Snoring, gurgling, or choking sounds
- Evidence or suspicion of opioid use

Naloxone may be given even if opioid exposure is uncertain. It has no effect on non-opioid conditions.

SIGNS AND SYMPTOMS OF OPIOID OVERDOSE

- Extreme sleepiness (inability to awaken verbally or upon tactile stimulation), slow (less than 5 breaths per minute), shallow respirations in a drowsy patient that cannot be awakened.
- Snoring or gurgling sounds (due to partial upper airway obstruction).
- Cyanosis of the lips/fingernails.
- Slow heart rate and/or low blood pressure.

SIGNS OF OVER MEDICATION (may progress to overdose)

- Unusual sleepiness.
- Drowsiness or difficulty staying awake with loud verbal stimulus or tactile stimulation.
- Mental confusion.
- Slurred speech.
- Intoxicated behavior.
- Slow or shallow respirations.
- Extremely small “pinpoint” pupils, although normal-sized pupils **do not** exclude opioid overdose.
- Slow heart rate.
- Low blood pressure.

It is important to note that not <u>all</u> signs and symptoms may be present during an opioid overdose. If the individual is not responsive to aggressive yelling or tactile stimulation:

- **Act promptly!!**
- **Call for help**
- **Check for breathing**
- **Have someone call 911 immediately**
- **Get the naloxone**

Contraindications

There are not any absolute contraindications in a suspected opioid overdose. Naloxone is safe to administer when the opioid overdose is uncertain.

Administration

Act Fast!! Always go with a distressed individual. Never send the individual to the health room/school nurse alone or leave them alone.

Initial Assessment

- Attempt to wake the individual by shaking them and calling their name.
- Assess breathing and responsiveness.
- Shout for help nearby.
- Call 911 immediately when an opioid overdose is suspected.
- Retrieve naloxone and prepare to administer.
- Retrieve an AED if available.

If the person is breathing adequately, you can prevent deterioration by doing the following:

- Attempt to wake the individual by shaking them and calling their name.
- Reposition.
- Consider naloxone.
- Continue until EMS arrives.

If the person is not breathing adequately (gasping, or shallow, infrequent breathing, less than one breath every five seconds), but has a pulse felt within 10 seconds and an opioid overdose is suspected:

- Administer naloxone per protocol-medically approved guideline.
- Provide rescue breathing, one breath every 6 seconds. Apply a rescue breathing barrier mask, if available.
- Check pulse every 2 minutes.
- If not breathing or only gasping and no pulse felt:
    - Start CPR.
    - Perform cycles of 30 compressions and 2 breaths.
    - Use an AED as soon as it is available.
    - Resume CPR until prompted by the AED to allow a rhythm check and continue until EMS arrives or the victim starts to move.

Note: For adult and adolescent victims, trained responders should perform compressions and rescue breaths for opioid associated emergencies and untrained responders should perform only the compression part of CPR. For infants and children, CPR should include compressions with rescue breaths.

Naloxone Administration

1. Remove blister packs from carton.
2. Peel back the foil on one blister pack.
3. Remove the nasal spray device from the blister pack.
4. Hold the nasal spray device with your index and middle fingers on either side of the nozzle. Be careful not to press the plunger yet.
5. Insert the nasal spray device into a nostril. The index and middle fingers should touch the bottom of the nostrils.
6. Press the plunger all the way in until it clicks.
7. Remove the nasal spray device from the nostril.
8. Assure that 911 has been called.
9. Begin rescue breathing.
10. Repeat every 2-3 minutes until the person begins breathing effectively or EMS arrives. Follow each dose with rescue breathing. If the person begins breathing effectively, wakes up, or vomits, place the person on their side in the recovery position. Allow space between you and the individual to protect yourself.

Monitoring

- Stay with the individual until EMS arrives.
- If breathing improves, place the person in the recovery position.
- Be aware that symptoms may return as naloxone wears off.
- If there is no breathing or breathing continues to be slow (less than 5 breaths per minute) or shallow, continue to administer doses of naloxone every 2-3 minutes. Between doses, continue performing rescue breathing until an effective breathing pattern returns or EMS arrives. If they are breathing effectively on their own, place them in the recovery position, on their side and support the body with one bent knee, with the face turned to the side.
- Repeat naloxone administration if opioid overdose symptoms are present again.
    - The duration of action of most opioids may exceed 30-90 minutes during which naloxone will be effective, resulting in a return of respiratory and/or central nervous system depression, even after an initial improvement in symptoms. If the desired response is not obtained after 2 or 3 minutes, another dose of naloxone may be administered if available.

A person may remain unconscious if non-opioid drugs have been taken or if they have experienced another medical emergency, such as:

- Traumatic brain Injury
- Stroke
- Diabetes
- Infection
- Heart attack

- Seizures

Post-Event

- Notify school administration and the school nurse.
- Notify parent/guardian if the individual is a student.
- Provide EMS with all known information about the event.
- Replace used naloxone kits promptly.
- Complete required documentation within 24 hours.

Documentation Requirements

Documentation must include:

- Date, time and location of the incident.
- Observed symptoms and circumstances.
- Naloxone administration details.
- Response to naloxone.
- EMS involvement.
- Names of staff involved.
- Parent/guardian notification (if applicable).
- Name, date, time and route the naloxone was administered.
  - Give this information to EMS so that the information will accompany the individual to the hospital's emergency department.
  - All documentation must be submitted to the school nurse or designated administrator.
  - Complete the school incident report.
  - Replace naloxone in-stock medication as appropriate as soon as possible.

Quality Assurance

The district will:

- Review all naloxone administration reports annually.
- Maintain inventory and expiration logs.
- Monitor staff training compliance.
- Update this protocol-medically approved guideline annually in collaboration with the prescribing healthcare provider.

Resources

KDPH:

- Harm Reduction Program - Cabinet for Health and Family Services (ky.gov)
  - Harm Reduction: Outreach Services
  - You Can Reverse Overdose: Naloxone and Rescue Breathing - YouTube 4:15 (ENG)
  - You Can Reverse Overdose: Naloxone and Rescue Breathing - YouTube 4:15 (SPN)
  - KDPH EHP From Crisis to Care: Overdose Interventions for First Responders ID: 1121200 - Kentucky TRAIN - an affiliate of the TRAIN Learning Network powered by the Public Health Foundation (ENG)
  - KDPH EHP From Crisis to Care: Overdose Interventions for First Responders ID: 1121200 - Kentucky TRAIN - an affiliate of the TRAIN Learning Network powered by the Public Health Foundation (SPN)
  - Fentanyl and Xylazine Test Strips
- Find Naloxone Now Kentucky
  - What are Opioids? - FINDNALOXONE
  - What is Naloxone? - FINDNALOXONE
  - How Do I Use Naloxone? - FINDNALOXONE
    - Nasal Spray - Generic - Opioid Overdose Recognition and Response
      - KLOXXADO® (naloxone HCl) Nasal Spray
      - NARCAN® Nasal Spray
      - Rivive - Harm Reduction Therapeutics
    - IM - Generic - Opioid Overdose Recognition and Response
      - ZIMHI® for Opioid Overdose Emergency Rescue
  - Opioid Overdose Prevention - FINDNALOXONE

CDC:

- Lifesaving Naloxone | Stop Overdose | CDC
- Naloxone Toolkit | Overdose Prevention | CDC
- Reverse Opioid Overdose to Prevent Death | Overdose Prevention | CDC

FDA:

- FDA Approves First Over-the-Counter Naloxone Nasal Spray | FDA
- OTC Naloxone.pdf (kphanet.org)
- Orange Book: Approved Drug Products with Therapeutic Equivalence Evaluations (fda.gov)

NIH:

- Naloxone Drug Facts | National Institute on Drug Abuse (NIDA) (nih.gov)

MedlinePlus:

- Naloxone Nasal Spray: MedlinePlus Drug Information

Naloxone in Kentucky at no cost:

- Find Naloxone Now Kentucky (Naloxone locator and map; schools can and should order here.)
- Next Distro: Free Naloxone Access for Impacted Communities — NEXT Distro
- Kentucky — NEXT Distro

References

American Heart Association

- Part 3: Adult Basic and Advanced Life Support | American Heart Association CPR & First Aid
- Opioid Education | American Heart Association CPR & First Aid

American Red Cross

- How to Perform CPR | Red Cross

Centers for Disease Control and Prevention (CDC)

- Drug Overdose | Injury Center | CDC
- Fentanyl: Emergency Responders at Risk | Substance Use | CDC
- Fentanyl Safety Recommendations for First Responders

Kentucky Board of Nursing (KBN)

- Overview - KBN (ky.gov)
- Advisory Opinion Statements - KBN

Kentucky Department of Education (KDE)

- Medication Administration Training Program - Kentucky Department of Education

Kentucky Department for Public Health (KDPH)

- Kentucky Department for Public Health HARM REDUCTION BRANCH
- Find Naloxone Now Kentucky - FINDNALOXONE

National Association of School Nurses

- Drugs of Abuse - National Association of School Nurses (nasn.org)
- Naloxone in the School Setting - National Association of School Nurses

National Harm Reduction Coalition

- Overdose Prevention Resources | National Harm Reduction Coalition

National Institute on Drug Abuse (NIDA)

- Commonly Used Drugs Charts | National Institute on Drug Abuse (NIDA) (nih.gov)
- Opioids | National Institute on Drug Abuse (NIDA)
- Naloxone Saves Lives in Opioid Overdose | National Institute on Drug Abuse (video 5:39 min)

Substance Abuse and Mental Health Services Administration (SAMHSA)

- SAMHSA Overdose Prevention and Response Toolkit (Revised 2024)
- Preventing, Recognizing and Treating Opioid Overdose | SAMHSA
- Evidence-Based Resources About Opioid Overdose | SAMHSA

- Substance Misuse Prevention for Young Adults | SAMHSA Publications and Digital Products
- Talk. They Hear You: What Educators Can Do to Help Prevent Underage Drinking and Other Drug Use Fact Sheet | SAMHSA Publications and Digital Products

U.S. Department of Health and Human Services (HHS)

- National Opioids Crisis: Help and Resources | HHS.gov
- U.S. Surgeon General's Advisory on Naloxone and Opioid Overdose | HHS.gov

Infographics for Printing

How Do I Use Naloxone?

Approval Signatures

School District Superintendent:

Name: _____

Signature

Date:

District School Health Coordinator:

Name: _____

Signature Date: