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| **Opioid Overdose Management** |
| *Date Implemented:* |  | *Date Reviewed/ Revised:* |  | *Reviewed/ Revised By:* |  |

**Policy:**

It is the policy of this facility to recognize and treat opioid overdose per current standards of practice.

**Definitions:**

***“Medication Assisted Treatment”*** (MAT) is the use of medications, in combination with counseling and behavioral therapies, to provide a “whole-patient” approach to the treatment of substance abuse disorders.

***“Opioids”*** include prescription medications used to treat pain such as morphine, codeine, methadone, oxycodone, hydrocodone, fentanyl, hydromorphone, and buprenorphine, as well as illegal drugs such as heroin and illicit potent opioids such as fentanyl analogs (e.g., carfentanil).

***“Opioid Use Disorder”*** (OUD) is a problematic pattern of opioid use leading to clinically significant impairment or distress.

***“Overdose”*** refers to taking more than the normal or recommended amount of something, often a drug. It can result in serious, harmful symptoms, or death.

**Policy Explanation:**

Whether intentional, unintentional, or undetermined, opioid overdose continues to be a health crisis in the United States. Recognizing the signs of overdose and quickly responding can prevent brain injury and death.

**Compliance Guidelines:**

1. The facility will review the residents’ medications and history to determine if opioids are in use or they have a history of addiction, opioid use disorder (OUD), or are on a medication assisted treatment program for OUD.
2. The facility will keep naloxone (Narcan) readily available and located in a designated area to be administered as per facility protocol.
3. The facility will periodically check to ensure that naloxone (Narcan) is not expired or changed characteristics and will have the pharmacy replace as needed.
4. The facility will train all staff to recognize the signs of opioid overdose and respond to it according to facility policy.
5. If a resident exhibits any of the following overdose symptoms, the facility will call 911, initiate basic life support, if indicated, and administer naloxone as per facility protocol and manufacturer’s instructions:
6. Extremely pale face or clammy to the touch
7. Limp body
8. Blue or purplish color to fingernails or lips
9. Vomiting or making gurgling noises
10. Inability to awaken or speak
11. Breathing or heartbeat slows or stops.

**References:**

Centers for Medicare & Medicaid Services, Dept. of Health and Human Services. *State Operations Manual, Appendix PP: Guidance to Surveyors for Long Term Care Facilities* (October 2022). *F-697 Pain Management* 42 C.F.R. 483.25(k)

Substance Abuse and Mental Heath Services Administration. *SAMHSA Opioid Overdose Prevention Toolkit.* HHS Publication No. (SMA) 18-4742. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2018.