

**EMS-related Frequently Asked Questions (FAQs) of  
Acting Secretary and Physician General on Updated Naloxone Standing Order DOH-001-2018**

**1. What is the Acting Secretary and Physician General’s updated Naloxone Standing Order?**

In October 2015 then Physician General Dr. Rachel Levine signed Standing Order DOH-002-2015. The standing order’s goal is to ensure that residents of the Commonwealth of Pennsylvania who are at-risk of experiencing an opioid-related overdose, or who are family members, friends or other persons who are in a position to assist a person at risk of experiencing an opioid-related overdose are able to obtain Naloxone.

The January 10, 2018 updated [Standing Order DOH-001-2018](#) added language for a naloxone leave-behind program. Specifically, Standing Order DOH-001-2018 states:

*“This standing order authorizes Department-certified EMS providers or Department-licensed EMS Agencies who have responded to an individual experiencing an opioid-related overdose (At-Risk Person), and who are therefore in a position to assist that At-Risk Person, to leave behind naloxone with the At-Risk Person or with family members, friends, or other persons who are in a position to assist the At-Risk Person, along with instructions to follow the naloxone package insert directions and the guidance provided in Standing Order DOH-002-2017, available on the Department’s website.”*

**2. Is an agency required/mandated to leave naloxone behind?**

As the opioid crisis continues to impact the Commonwealth of Pennsylvania, the Department of Health recommends agencies participate in the naloxone leave-behind program. However, it is not mandatory or required for agencies to participate.

**3. Is there funding available for EMS agencies to purchase naloxone for the leave-behind program?**

Naloxone kits are available for free through the Pennsylvania Commission on Crime and Delinquency (PCCD). PCCD serves as the lead agency to administer the \$5 million of state funds to support the Naloxone for First Responders program. To find your Centralized Coordinating Entity please visit PCCD’s website, with an interactive map found at:

[http://www.pccd.pa.gov/criminaljustice/advisory\\_boards/Pages/Naloxone-for-First-Responders.aspx](http://www.pccd.pa.gov/criminaljustice/advisory_boards/Pages/Naloxone-for-First-Responders.aspx)

**4. How can I get more of the naloxone kits from PCCD through the CCEs?**

EMS agencies who choose to participate can obtain more naloxone kits by completing the procurement process established by your CCE.

**5. I didn't apply by November 6, 2017, can my EMS agency still obtain naloxone kits?**

Yes, EMS agencies can still obtain naloxone kits through PCCD by contacting their CCE. To find the CCE for your respective county please visit:

[http://www.pccd.pa.gov/criminaljustice/advisory\\_boards/Pages/Naloxone-for-First-Responders.aspx](http://www.pccd.pa.gov/criminaljustice/advisory_boards/Pages/Naloxone-for-First-Responders.aspx)

**6. How many doses should be left behind?**

Agencies who elect to participate in the leave behind program should leave a single kit provided by PCCD or a single dose of naloxone behind if the agency has not received a kit.

**7. Should EMS leave a dose with an At-Risk-Person if there is no other person (family or friend) present?**

An EMS agency who elects to participate in the leave-behind program should consult with their agency's medical director and create a policy for the leave-behind program.

**8. Is leaving naloxone behind covered under an EMS practitioners' scope of practice?**

Yes, as noted in [EMS Information Bulletin 2018-02](#) the Department of Health considers EMS agencies and EMS providers participating in the naloxone leave-behind program to be operating within the scope and under the authority of the Emergency Medical Services System Act, 35 Pa. C.S. §§ 8101-8157, and the department's corresponding regulations, 28 Pa. Code §§ 1001-1033.

**9. Can the EMS Agency utilize a mobile integrated healthcare program to deliver the instructions for use after naloxone is left behind?**

The EMS agency should provide initial instructions at time of leave behind. However, the agency may utilize their mobile integrated healthcare program to provide referral services or follow-up utilizing their normal processes.

**10. Is there additional required reporting to the Department of Health?**

Yes, while EMS agencies must continue to complete an electronic patient care record (PCR), the Bureau of EMS is requiring those agencies participating in the naloxone leave-behind program to complete the following survey at time of PCR completion. The survey can be found at <https://www.surveymonkey.com/r/R56LSKR>.