**Hospital Emergency Department**

**Naloxone Distribution**

**Frequently Asked Questions**

**Q: How should naloxone be obtained for dispensing in the emergency department (ED)?**

A: Naloxone may be obtained through several routes:

* Grant funding [currently University of Charleston School of Pharmacy (UCSOP) is facilitating the State Targeted Response (STR) grant]
* Local health departments (health departments may obtain grant funded naloxone to be used in the ED)
* Direct purchase (the hospital may directly purchase naloxone for distribution in the ED)

**Q: What forms are needed to be complete before requesting grant-funded naloxone?**

A: The STR and Prescription Drug Overdose (PDO) Grant Agreement must be signed and returned to UCSOP prior to receiving naloxone.

Once naloxone is received, the STR and PDO Product Verification Form, along with images of the product (lot and expiration must be visible), must be emailed to UCSOP (contact info below).

**Q: Can the hospital bill for naloxone (when dispensing)?**

A: If the naloxone is obtained through grant funding (through direct shipment or obtained from the local health department), the hospital cannot bill for naloxone or for the training/counseling related to dispensing.

If the naloxone is purchased by the hospital for the purpose of dispensing in the ED, the hospital may bill for dispensing (typically through the outpatient pharmacy).

* This requires the physician offer a prescription (paper or electronic) to be sent to another pharmacy if the patient wishes.

**Q: What type of training or counseling is required for individuals receiving naloxone?**

A: West Virginia Department of Health and Human Resources (DHHR), Office of Emergency Medical Services (OEMS) in conjunction with Office of Drug Control Policy (ODCP) has created an End User Naloxone training that meets the requirements of counseling/training that may be used. This training could be loaded onto an iPad, tablet, bedside computer, or other electronic device.

* To obtain a Train-the-Trainer course, please contact UCSOP or OEMS.

If using a training other than the OEMS training course, please refer to the Naloxone Protocol to review education requirements.

If counseling is provided by a pharmacist or physician, the information contained on the Checklist (Appendix E) MUST be discussed with the individual receiving naloxone.

**Q: May grant funded naloxone be used for administration in the ED (kept in crash cart or in emergency kit)?**

A: Naloxone purchased through the STR or PDO grants is only to be used for dispensing or distributing to high-risk individuals or individuals that may be in the position to assist someone that is at risk for an opioid overdose.

**Q: If obtaining naloxone through grant funding, how can additional kits be ordered?**

A: If naloxone is obtained through UCSOP, the individual responsible for naloxone (ordering, inventory, reporting, etc.) should be able to request additional kits through NarcanDirect online. After the first shipment, the individual will receive a sign-in for NarcanDirect. If kits are no longer available (all funding has been exhausted), the individual will be notified by email.

**Q: Does the naloxone have to be labeled in the ED?**

A: Yes. Labeling is required prior to dispensing. Label template provided. Patient name, address, and date dispensed must be written on the label prior to dispensing.

**Q: What reporting is required for naloxone dispensing?**

A: HB 4102, passed in March 2020, changes reporting requirements for naloxone. Any hospital that has the ability to report naloxone automatically to the West Virginia Board of Pharmacy (WVBOP) through the Controlled Substance Monitoring Program (CSAPP) should continue to do so. Any entity that cannot automatically report to the WVBOP will report data to ODCP. Reports must be generated and reported by the 10th of each month. The following data is required to be included in the report per W. Va. Code § 16-46-6:

* The name and address of the entity dispensing or distributing the opioid antagonist.
* The name and national drug code for each formulation of opioid antagonist dispensed or distributed.
* The total quantity of each formulation of opioid antagonist dispensed or distributed.

If you automatically report to the WVBOP, that data will be compiled by the WVBOP and reported to ODCP.

If naloxone is obtained through grant funding, additional reporting is needed (see attached DHHR PDO/STR Naloxone Distribution Survey – Appendix I). The information from these forms needs to be collected in some way and be reportable. If you have a method to pull this data from your EHR system and report monthly to UCSOP, that is sufficient.

* [lindsayacree@ucwv.edu](mailto:lindsayacree@ucwv.edu)
* University of Charleston School of Pharmacy

c/o Lindsay Acree

2300 MacCorkle Avenue SE

Charleston, WV 25304

**Q: Why are there so many documents?**

A: The protocol was originally created to use across any entity dispensing or distributing naloxone. All documents that may be needed have been provided. Please refer to Naloxone Protocol for explanation of each document.

**Q: What must be completed when dispensing to a patient?**

A: Document either in the electronic health record (EHR), Automated Dispensing Cabinet, or through use of Naloxone Distribution Form. If audited at any point, you should be able to pull a report of patients that have received naloxone (dispensed not administered).

Obtain needed data from Appendix I either through data collected in the EHR OR through asking patient to complete Appendix I. ONLY TO BE COMPLETED IF DISTRIBUTING NALOXONE OBTAINED FROM UCSOP.

The information regarding whether this is a first-time receiving naloxone or if this is considered a refill may be waived for hospitals (expired, used, gave away, etc. does not need to be obtained) that are incorporating this data into the EHR.

Information regarding understanding of the information (5 questions at the end of the survey) may be waived for hospitals that are incorporating this data into the EHR.

* Train or counsel the patient based upon standards from the End User Naloxone training or Naloxone Protocol.
* Complete information on the labeled naloxone product.
* Provide the 2 brochures required by legislation.
  + Links provided in the Policy and Procedure Template.

**Q: May the hospital incorporate these forms electronically in the system or document in the EHR rather than have multiple forms to complete?**

A: Absolutely! As long as you comply with legislation (reporting to ODCP as previously described) AND you can report the information requested by the grant funding institution (UCSOP), you can incorporate this into your existing system to make it work for your institution.

**Contact information**

**University of Charleston School of Pharmacy**

Lindsay Acree

2300 MacCorkle Avenue SE

Charleston, WV 25304

[lindsayacree@ucwv.edu](mailto:lindsayacree@ucwv.edu)

**WV Department of Health and Human Resources  
Office of Emergency Medical Services**

Jerry Mullins

350 Capitol Street, Room 425

Charleston, WV 25301

[Jerry.L.Mullins@wv.gov](mailto:Jerry.L.Mullins@wv.gov)