



School Training Overdose Preparedness and Intelligence Taskforce

SCHOOL FENTANYL AND OPIOID RESPONSE TOOLKIT



ARIZONA DEPARTMENT OF
EDUCATION

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Dear School Professionals,

The School Training Overdose Preparedness and Intelligence Taskforce (STOP-IT) is pleased to partner with the Arizona Department of Education (ADE) to offer this School Fentanyl & Opioid Response Toolkit to aid in combating the opioid crisis impacting our communities. This toolkit is designed to support school staff, students and families in addressing the critical public health challenge of opioid overdoses and fatalities.

The increase in opioid overdose deaths represents a severe public health crisis. According to the Centers for Disease Control and Prevention (CDC), overdoses claimed more than 107,000 lives in 2023. A significant portion of these deaths—more than 70%—were due to synthetic opioids, including illicitly manufactured fentanyl. More than 50% of the US illicit fentanyl supply is trafficked directly through Arizona fueling the national crisis. Our state averages five overdose deaths per day and experiences almost 4000 nonfatal overdoses annually. More than 80 overdose deaths between 2021 and 2022 were in children. Fentanyl is commonly pressed into counterfeit pills resembling prescription medications such as oxycodone, benzodiazepines like Xanax®, or legal stimulants like Ritalin®. A more recent trend has been to disguise fentanyl as candy with color and flavor additives. These counterfeit drugs are increasingly available through social media platforms, recruiting younger, less informed users who may lack opioid tolerance and knowledge about overdose prevention.

Naloxone, an opioid antagonist, can rapidly and temporarily reverse the effects of an opioid overdose. The drug may be administered by anyone, even without formal training, and is safe to use if given to a person not experiencing an overdose. It carries no risk of addiction or misuse. Despite this, a state-wide survey identified that only 60% of Arizona public schools currently stock naloxone and that schools which do carry it often lack sufficient supplies to offer a rapid response time.

Schools are community pillars, and it is crucial that they are equipped to respond effectively to opioid-related emergencies. This toolkit aims to prepare Arizona schools with the policies, procedures, tools and community resources necessary to prevent and respond to potential opioid overdoses on campus. We strongly urge schools to implement this toolkit for the safe and effective management of opioid-related emergencies. Schools are also encouraged to partner with community organizations collaboratively offering education and prevention programming to grow awareness.

STOP-IT is committed to comprehensively addressing the opioid crisis within our state education system. With your school's partnership, this mission can be fulfilled. Please visit www.azed.gov/stopit or reach us at stopit@azed.gov to learn more about this important initiative. Thank you for your support and partnership.

Sincerely,

Superintendent Tom Horne

Arizona Department of Education

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UNDERSTANDING OPIOIDS AND OPIOID OVERDOSES

Understanding the opioid epidemic and its specific impact on schools is critical due to the pervasive presence of fentanyl and other illicit substances in our communities. Children are targets within the illicit drug market and schools are an emerging scene for overdoses. Opioid overdoses can happen to anyone, regardless of age or background, and can occur rapidly and without warning. Naloxone (Narcan®), an opioid reversal agent, is a key tool in addressing this crisis. It is safe, easy to administer, and can effectively reverse the effects of an opioid overdose if given promptly. Furthermore, legislation supports the availability and use of naloxone in schools, underscoring its importance. By understanding the epidemic's reach and preparing schools to respond with naloxone and other preventive measures, we can reduce the risk of fatal overdoses and create safer, more informed school environments.

What is the opioid epidemic?

The opioid epidemic is a critical public health emergency faced by Arizonans. The Centers for Disease Control and Prevention (CDC) reported that overdoses resulted in over 107,000 fatalities in 2023, with more than 70% of these deaths attributed to synthetic opioids, including illicitly manufactured fentanyl. Arizona is a central hub for this crisis as over 50% of the U.S. illicit fentanyl supply is trafficked through the state. Maricopa County is identified among the top three U.S. counties for adolescent overdose deaths. Between 2021 and 2022, more than 80 of these deaths involved children. The opioid epidemic continues to evolve as the illicit market changes tactics. Recent changes in drug formulations and recruitment strategies have made it clear that adolescents are a rapidly emerging consumer base in the illicit market.

What are opioids?

Opioids are a class of prescription and illicit drugs. They are commonly prescribed to alleviate pain but use can also lead to life-threatening overdoses and addiction. Illegal opioids include heroin and non-pharmaceutical fentanyl. Opioids come in a variety of forms including pill, capsule, powder, liquid, and film, that can be swallowed, smoked, snorted, injected, or absorbed through the skin or mucous membranes.

What is the difference between prescription and illicit opioids?

Prescribed opioids and illicit opioids differ in their source, legality, and intended use. Prescribed opioids, such as oxycodone, morphine, and hydrocodone, are legally dispensed by healthcare professionals to manage pain and are used under medical supervision. They are manufactured by regulated pharmaceutical companies and come with clear dosing instructions to minimize risk. In contrast, illicit opioids, like heroin and illicitly manufactured fentanyl, are illegal and typically produced in unregulated environments with no quality control. They are frequently adulterated with other harmful substances, increasing the risk of overdose and adverse effects. While prescribed opioids are intended for legitimate medical purposes, illicit opioids are associated with high rates of misuse and addiction. Illicit opioids currently drive the number one cause of drug-related deaths in the US.

What is fentanyl?

Fentanyl is a synthetic opioid that is 50 times more potent than morphine. It is often mixed with other drugs, such as heroin, cocaine, methamphetamine, or online supplements without the user's knowledge, increasing the risk of overdose and death. Fentanyl can be found in various forms, such as powder, pills, patches, nasal sprays, and lollipops. Recent trends to press fentanyl into pills resembling common prescription opioids such as oxycodone, Oxycontin®, and Xanax® have made illicit purchase of these drugs particularly dangerous. Fentanyl is also now distributed with color and flavor additives to have it resemble candy, increasing its enticement to children.

What is an opioid overdose?

An opioid overdose is a life-threatening condition that occurs when too much opioid is taken or when opioids are combined with other drugs or alcohol. An opioid overdose can cause the following signs and symptoms:

- Slow or shallow breathing
- Discolored lips and fingernails
- Pale and clammy skin
- Pinpoint pupils
- Low blood pressure and slow pulse
- Limp body and loss of muscle tone
- Loss of consciousness and unresponsiveness

An opioid overdose can lead to brain damage, organ failure, or death if not treated promptly. If an opioid overdose is suspected, contact 9-1-1 and deliver naloxone immediately.

What is naloxone?

Naloxone is a medication that can rapidly reverse the effects of an opioid overdose. Now available in both prescription and over-the-counter form, it works by displacing the opioids from the receptors in the brain, restoring normal breathing and consciousness. Naloxone is safe and has no potential for abuse. It will not harm the person it is delivered to, even if they are not experiencing an opioid overdose. It only affects people who have opioids in their system and has no effect on people who do not use opioids. It can be used by individuals of all ages from infants to adults. Deliver naloxone to anyone suspected of experiencing an opioid overdose. Naloxone can be administered by injection or nasal spray. The drug can be obtained from pharmacies, health care providers, or community organizations. Naloxone has a short duration of action, so **repeated doses may be needed until medical help arrives. Emergency services should always be activated for cases of opioid overdose.**

What is opioid addiction?

Opioid addiction, also known as Opioid Use Disorder (OUD), is a chronic disease that involves changes in the brain caused by repeated use of opioids. Opioid addiction can cause compulsive drug-seeking behavior, loss of control over drug use, and continued use despite negative consequences. Opioid addiction can affect anyone, regardless of age, gender, race, or socioeconomic status. Opioid addiction can impair physical and mental health, social and family relationships, work and school performance, and quality of life. Medications for Opioid Use Disorder (MOUD) including buprenorphine, methadone and naltrexone, are often first-line therapies and can reduce cravings and withdrawal symptoms. They are typically combined with behavioral therapies that address the psychological and social aspects of addiction.

How do you treat opioid addiction?

OUD is best treated through a comprehensive approach that combines Medications for Opioid Use Disorder (MOUD) with behavioral therapies and support services. MOUD utilizes medications such as methadone, buprenorphine, or naltrexone to help manage withdrawal symptoms, reduce cravings, and block the effects of opioids, thereby aiding individuals in maintaining recovery. Use of buprenorphine or methadone has been shown to reduce the risk of death six-fold. This pharmacological support is most effective when paired with counseling and behavioral therapies, which address the psychological and behavioral aspects of addiction. Additionally, integrating support services like social support networks, job training, and access to healthcare can further enhance the likelihood of successful long-term recovery. A holistic and individualized treatment plan tailored to each person's needs provides the best chance for overcoming opioid addiction.

IMPORTANT NALOXONE LAWS

The following laws discuss the requirements for schools to ensure student safety and legal compliance regarding naloxone use. To summarize, school boards must establish policies for the emergency administration of naloxone or other FDA-approved opioid antagonists by school employees. Individuals, including school staff, who administer naloxone in good faith during an opioid overdose are protected from civil liability, as long as they follow prescribed protocols and avoid gross negligence. Law enforcement, emergency medical services, and healthcare providers are required to report incidents involving naloxone administration, to ensure thorough tracking and oversight of opioid overdose responses. Collectively, these laws promote an effective response to opioid emergencies that occur in schools and protect those who administer naloxone.

Requirements for Naloxone in Schools

[Ariz. Rev. Stat. § 15-341\(A\)\(43\).](#)

A school board *shall*: Prescribe and enforce policies and procedures for the emergency administration by an employee of a school district pursuant to section 36-2267 of naloxone hydrochloride or any other opioid antagonist approved by the United States food and drug administration.

Requirements for Naloxone Administration

[Ariz. Rev. Stat. § 36-2267. Administration of opioid antagonist; exemption from civil liability; definition.](#)

A. A person may administer an opioid antagonist that is prescribed or dispensed pursuant to section 32-1979 or 36-2266 in accordance with the protocol specified by the physician, nurse practitioner, pharmacist or other health professional or that is received from a county health department pursuant to section 36-192 to a person who is experiencing an opioid-related overdose.

B. A person who in good faith and without compensation administers an opioid antagonist to a person who is experiencing an opioid-related overdose is not liable for any civil or other damages as the result of any act or omission by the person rendering the care or as the result of any act or failure to act to arrange for further medical treatment or care for the person experiencing the overdose, unless the person while rendering the care acts with gross negligence, willful misconduct or intentional wrongdoing.

C. For the purposes of this section, "person" includes an employee of a school district or charter school who is acting in the person's official capacity.

Requirements for Naloxone Reporting

[Ariz. Admin. Code Rule R 9-4-602](#)

Required reporters include law enforcement officers, emergency medical services/ambulance agencies, and healthcare facilities/providers.

School Nurse Standing Order Decision

The Arizona State Board of Nursing has confirmed that a standing order to administer naloxone from a provider is not required for school nurses to deliver the drug (Appendix A).

DEVELOPING A SCHOOL OVERDOSE POLICY & PROCEDURE

According to [Ariz. Rev. Stat. § 15-341\(A\)\(43\)](#), Arizona school boards are required by state law to establish policies and procedures for naloxone use to manage opioid overdoses. The STOP-IT taskforce, composed of more than 60 experts from medical, behavioral health, educational, and government sectors, has extensively reviewed medical and educational literature relevant to the topic and surveyed numerous school policies from across the nation to develop a sample policy for adaptation in Arizona schools. The policy below considers the best available evidence for preventing and managing opioid overdoses and promotes an effective response that minimizes the school's liability.

Evidence-based principles incorporated into this policy include:

1. Availability of naloxone on each school campus from kindergarten through 12th grade. For middle school and above, consider including naloxone in each building, at school-sponsored sporting events, and during school activity-related transportation
2. Ease of accessibility to naloxone within buildings such as placement with AEDs, in the front office) and in unlocked containers
3. The ability for anyone, independent of training or experience, to administer naloxone
4. Removal of disciplinary action for students carrying or administering naloxone
5. Annual, online training requirements for all staff on overdose policies and naloxone administration
6. Annual student training (grades 6-12) on the topics of opioids, fentanyl, addiction, and opioid overdose prevention and management
7. Scheduled surveys of stored naloxone to ensure product availability and assessment of expiration dates
8. Step-by-step instructions on the overdose response, naloxone delivery and after-action items
9. Use of a standardized recording form to document overdose events and report the event to Poison Control

Understanding the Principles

Opioid overdoses can be sudden and unexpected, occurring even in places where students and staff may not anticipate emergencies. Given the tremendous community rise in illicit opioid misuse and the increasing prevalence of potent drugs like fentanyl, schools must be fully prepared to respond with policies, protocols, tools and procedures that maximize response times and minimize barriers. The following principles should be considered when developing a school or district opioid overdose response policy.

1. Ensuring naloxone is widely available on school property and school-sponsored events

Opioid overdoses are life-threatening events that often require naloxone administration within **three minutes** to avert fatality. Across the country, overdoses have been documented in a variety of school settings and impact all age ranges. For this reason, it is important for schools to be prepared for an immediate response to an overdose.

Grades K-5 are less likely to experience overdoses but should still be prepared with at least one kit readily available on school campus. **Grades 7-12** and **post-secondary** environments are higher-risk environments and it is recommended that one kit of two products be maintained within each building for every 300 students. For instance, a school that has 600 students in a building would maintain two kits in that building. Naloxone should also be available for all school-sponsored events such as after-school sports activities. Consider creating a naloxone travel kit for off-campus events. Schools can also consider carrying naloxone on school buses, remaining mindful that naloxone is temperature sensitive and cannot be left in vehicles exposed to extreme heat. All naloxone kits should have one pair of nitrile gloves and step-by-step delivery instructions.

2. Guaranteeing stored naloxone is easy to access by all potential responders

To expedite response times, it is recommended that naloxone be stored in school locations that promote a response time within three minutes of the overdose. Naloxone should also be stored in an easy-to-identify location, accessible to all potential responders including students. Consider storing naloxone with each automatic external defibrillator (AED). Naloxone may also be stored in areas such as the front administrative desk and with the school nurse or the school resource officer. It is not recommended that naloxone be locked or kept in a location that only specific staff have access to.

3. Empowering anyone to deliver the drug

Naloxone is safe to deliver, even in the person it is given to is not experiencing an opioid overdose. The intranasal version of naloxone is simple to use and requires minimal skills to deliver. A scientific study found that 98% of bystanders administer naloxone correctly during a mock overdose. For these reasons, it is recommended that school policies offer empowering language that promotes naloxone usage independent of the training background of the person delivering it. All naloxone should be stored with the National Association of School Nurses (NASN) step-by-step visual delivery guide. Per the Arizona State Board of Nursing, school nurses do not need a standing order to administer the drug in order to provide treatment (Appendix A).

4. Protecting students that intervene during an overdose

Drug overdoses can happen anywhere and at any time. Students may be the first to identify a potential overdose and should be empowered to offer life-saving treatment with naloxone. Students that deliver naloxone are protected by state statute under Good-Samaritan laws that are recognized federally and within Arizona. High prevalence of naloxone in communities correlates closely with lower rates of fatal overdoses, in part because it improves response times. For these reasons, it is recommended that schools avoid penalizing students from carrying the drug or administering it.

5. Promoting education on opioid overdose prevention and management for all staff

Although naloxone is safe to deliver to individuals not experiencing an overdose, it is best practice to be prepared with the knowledge on how to deliver the drug and the steps needed to engage emergency services and document the event. All school staff should be familiar with the policies and procedures related to school overdose response plans. For this reason, it is recommended that all staff undergo annual training on the topic of school overdose policies and procedures, including naloxone administration. For legal purposes, it is recommended that schools keep a log of staff that have completed the training. An [opioid overdose training video](#) can be found on the STOP-IT website and may be used for both staff and student training purposes.

6. Supporting student education on opioid-related topics

Overdoses are a leading cause of death in youth and in some Arizona counties, the top cause. Teaching students about the illicit opioids such as fentanyl, opioid addiction, the evolving illicit market, and how to respond to an overdose with naloxone is crucial for their safety and awareness in today's society. Fentanyl's presence in counterfeit pills, now easily purchased on social media platforms and often disguised as legitimate pharmaceutical drugs, has drastically increased overdose deaths, making it essential for students to understand the risks associated with non-prescription therapeutics. Educating students empowers them to make informed decisions, recognize the dangers of the illicit drug market, and potentially intervene in life-threatening situations.

The STOP-IT initiative recommends that students grades 6-12 be offered this education at a minimum, annually, and preferably with refresher courses intermittently throughout the year. Schools are encouraged to use the educational resource list within this toolkit to identify curriculum available both in-person and online.

7. Regular surveillance of naloxone supplies

Policies and procedures should be in place to ensure regular assessment of naloxone stored on school property. It is recommended that schools create a log identifying the stored locations of all naloxone kits and their expiration dates. Schools should document monthly that they have checked to ensure the product is available and has not expired.

8. Providing clear instructions on the pre- and post-management of an overdose

Every overdose should be treated as a life-threatening emergency. School policies should clearly outline the steps to be taken during an overdose including:

- a. Activation of Emergency Services (EMS) at the time of the event.
- b. Documentation of all activities surrounding the event including naloxone administration. Review of the overdose event by school administration, parents and potentially law enforcement to identify opportunities for response improvement, at-risk student behaviors, illicit supply chain concerns and other factors that may improve future response and prevention efforts.
- c. Reporting the overdose to AZ Poison Control.

9. Ensuring standardized reporting and recording of an overdose

Overdoses are life-threatening emergencies that often mimic other medical conditions. Accurate documentation of the time naloxone was administered, the number of doses administered, and the person's response can offer critical information to first responders. In addition, school management of life-threatening emergencies can inherently pose legal risks to the institution. For these reasons, it is strongly recommended that schools integrate recording tools such as the **Naloxone Administration Monitoring Form** provided in this toolkit to record overdose response efforts. All overdoses should be promptly reported to Poison Control for state recording and evaluation of other potential contributors to the overdose.

For schools that elect to design and implement their own Overdose and Naloxone Administration Policies, the **National Association of School Nurses** recommends that a comprehensive school policy should address the following elements:

1. Indication that the purpose of the policy is to establish a unified response to suspected opioid overdose cases not limited to students, but to include staff and visitors.
 - a. Example: It is the policy of the _____ to provide assistance to any person(s) who may be experiencing an opioid overdose following protocols and procedures of the school district. Staff members trained in accordance with the policy shall make every reasonable effort to include the use of Naloxone, combined with rescue breaths, to revive a person experiencing a drug overdose that may involve opioids.
2. School programs and environments covered by the policy
3. Annual education/training of all staff
 - a. Opioid overdose recognition and management training
 - i. Signs and symptoms.

- ii. 5 Rs of Emergency Response to Opioid Overdose.
 1. Recognize
 2. Respond
 3. Reverse
 4. Respirations
 5. Refer
- b. Emergency Medication Training
 - i. Who can administer Naloxone in the absence of a school nurse (according to state law and local policy)
 - ii. Location/storage of Naloxone
 - iii. Expiration date
 - iv. Position of the patient when giving Naloxone
 - v. How to administer as dictated by the type of delivery method for the medication provided. (Injectable or nasal spray)
 - vi. Calling 911 or local EMS
 - vii. Disposal of used medication device
 - viii. Monitoring/follow-up care until passed off to EMS
 - ix. School communication protocol
 - x. Good Samaritan Law
4. Obtaining and using stock Medication (Injectable or nasal spray)
 - a. School prescription and standing order.
 - b. Procurement of stock medication (i.e., MD, PA, NP, school medical consultant).
 - c. Multiple storage locations, ideally with secure access
 - d. Stock supply dosages, number of doses
 - e. Disposal-after use and expiration
 - f. Administration and documentation.
 - g. Document according to school policy, protocols, and procedures to include medications administered and the person's response.
 - h. Follow-up and updates to policy/protocol for improvement

Schools are encouraged to use the sample policy below as a comprehensive model. The policy may be adapted in part or whole to suit each school's unique needs. Please note that these policies expand upon the limited relevant legal statutes and the toolkit's content represents best practices as determined by the STOP-IT literature review. By aligning with these guidelines, schools can ensure they are implementing effective strategies for preventing and managing opioid overdoses and limiting negative legal impact.

STOP-IT Sample School Overdose Policy & Procedure

PURPOSE

The purpose of this policy is to establish guidelines and procedures for the management of suspected overdoses with opioid antagonists by members of the XXX School Department.

POLICY

In accordance with **Ariz. Rev. Stat. § 15-341(A)(43)** and **Ariz. Rev. Stat. § 36-2267** and [Ariz. Admin. Code Rule R 9-4-602](#), it is the policy of the XXX School District that all grade schools, junior high schools, and high schools will provide and maintain on-site opioid antagonists in the form of intranasal naloxone 4 mg. Procurement of naloxone is the responsibility of the school district or charter holder or other delegate specified by school procedures.

Naloxone may be administered by any member of the school staff. Training on the delivery of naloxone is encouraged but not required prior to administration. No school nurse or staff member shall be held liable for professional or civil damages resulting from acts or omissions related to the use of an opioid antagonist, provided such actions do not constitute gross negligence or willful misconduct. Additionally, school personnel will not face criminal prosecution for acts or omissions made in good faith while administering an opioid antagonist. However, this immunity does not extend to cases involving gross negligence or intentional misconduct. Furthermore, no school nurse or teacher or other school personnel shall be penalized or subjected to disciplinary action for declining to undergo training in the administration of an opioid antagonist.

Students found to have naloxone on their person and students who administer naloxone shall not be penalized by school personnel.

STAFF TRAINING

All school site personnel should receive annual training on the recognition of an opioid overdose and procedures to follow when opioid overdose occurs or is suspected.

Annual training should be completed by reviewing the STOP-IT Overdose Training Video or by engaging an external organization that provides virtual or in-person opioid overdose response training. School policies and procedures on overdose management will be provided to staff in written form at the beginning of each year.

STUDENT TRAINING

Beginning in grade 6 and annually thereafter, all students in School District XXX will receive annual education on the topic of opioids, fentanyl, addiction, opioid overdose prevention and management.

PROCUREMENT OF NALOXONE

Nasally administered naloxone hydrochloride that is needed for a school to comply with ARS § 15-341(A)(43) may be acquired using the following methods:

- Donations from an approved source such as the Arizona Department of Education, the state or county Department of Health, a pharmaceutical company, or other authorized distributor
- Over-the-counter purchase.
- Purchase from an approved pharmaceutical distributor

The following language can be considered in policy if the school procures naloxone via purchase:

School District XXX has a standing order for obtaining intranasal naloxone 4 mg by the (Medical Director of the Department of Health, the designated school district physician or charter school physician who is a doctor of medicine licensed pursuant to title 32, chapter 13, a doctor of osteopathic medicine licensed pursuant to title 32, chapter 17, a nurse practitioner licensed pursuant to title 32, chapter 15 or a physician assistant licensed pursuant to title 32, chapter 25). Schools may use this standing order to procure prescription naloxone.

STORAGE

Each school will maintain a supply of naloxone on the school campus. Schools should consider keeping one kit of two naloxone doses for every 300 students plus one kit for use during transportation to off-site school-sponsored events.

- Products should be kept in each building on campus and in an easily accessible, unlocked location (such as with an AED) to ensure a delivery response time of less than 3 minutes.
- One kit will be kept in the medical aid office.
- An extra naloxone kit should be available for all school activities such as field trips, sporting events and other activities.
- Schools may elect to keep naloxone on buses and other forms of student transportation.
- Naloxone kits should have 1 pair of nitrile gloves and step-by-step delivery instructions.

Each school should document monthly that they have checked to ensure that the nasally administered naloxone hydrochloride is being properly stored, and that the product expiration date has not passed. Replacement doses should be ordered in accordance with the amount used to ensure total naloxone available on campus meets school policy requirements.

Naloxone must be discarded before its expiration date. As shelf-life and manufacturer instructions for naloxone storage may differ by manufacturer, refer to product instructions on storage and replacement. If instructions are not available, the Centers for Disease Control & Prevention (CDC)

recommends naloxone be kept in its original box, away from sunlight and at room temperature (59-77 degrees) until ready to use.

USE OF NALOXONE

In case of a suspected opioid overdose, school nurses, teachers or other trained staff shall follow the protocols outlined in the naloxone training.

OVERDOSE PROTOCOL

1. Evaluate the person for evidence of shallow breathing, respiratory distress, sleepiness, drowsiness, difficulty staying awake despite loud verbal stimulus or sternal rubbing (rubbing chest bone with knuckles), confusion, slurred speech, intoxicated behaviors, vomiting, pinpoint pupils, limp body, nail discoloration or slow heart rate
2. If any signs are present, call 911 and send for an AED
3. Check for a pulse
 - a. If no pulse, begin CPR per algorithm
 - b. If pulse, continue as per below
4. Prepare and administer intranasal naloxone 4 mg
 - a. If no response, offer rescue breathing if barrier device available and repeat naloxone 4 mg in 2-3 minutes
5. If person responds to naloxone, roll them to their side (recovery position) and await discharge to EMS
 - a. Naloxone wears off in 30-90 minutes, which necessitates definitive medical care. If overdose symptoms reoccur, additional doses of naloxone may be administered while awaiting emergency service response.
6. Comfort the victim; withdrawal can be unpleasant.
 - a. The person who receives naloxone hydrochloride nasal spray may have the following reactions/side effects: violent behaviors, agitation, anxiety, irritability, rapid heart rate, sweating, nausea, vomiting and tremors, runny nose, stuffiness, sneezing, muscle/joint pain or headache
7. Once the emergency responders have arrived, inform them about the incident, the reasons for giving naloxone, the total naloxone dose administered, and the person's response to the naloxone.
8. Contact Poison Control and debrief the incident
9. Record the event on the Naloxone Administration Monitoring Form

The following procedures should be followed to administer naloxone:

HOW TO ADMINISTER NALOXONE

1. Remove the nasal spray from the box. Peel back the tab with the circle to open it.
2. Do not prime or test the nasal spray. It contains a single dose of naloxone and cannot be reused.
3. Hold the nasal spray with the thumb on the bottom of the plunger and the first and middle fingers on either side of the nozzle.
4. Lay the patient on their back. Support the patient's neck with the responder's hand and allow the head to tilt back before giving this medicine.
5. Gently insert the tip of the nozzle into one nostril of the patient, until fingers on either side of the nozzle are against the bottom of the patient's nose.
6. Press the plunger firmly to give the dose. Remove the nasal spray from the patient's nostril after giving the dose.
7. Move the patient to their side (recovery position) after giving the medicine

FOLLOW-UP

Following naloxone administration, the school nurse teacher, or other staff, will follow the _____ School District reporting protocols.

The school nurse, teacher or other staff will:

1. Ensure and document that the overdose victim was transported with emergency services
2. **Verify** all controlled substances are removed by law enforcement
3. Inform school health personnel and school administration of the incident.
4. Complete the 'Naloxone Administration Monitoring Form and keep a copy on file.
5. Order a replacement dose(s) of intranasal naloxone

The school and school district should evaluate the response to the naloxone emergency to determine if it was adequate. Review the incident involving emergency administration of naloxone to determine the adequacy of response.

1. Immediately notify parent or legal guardian regarding the required use of naloxone.
2. Provide an after-action review with the family, school administration, school resource officer, student and school nurse and offer behavioral health treatment resources as appropriate.
3. Follow school policy and procedures regarding the evaluation and management of controlled substances on school property.

SAMPLE PARENT COMMUNICATION

Consider sending the following communication in letter or email format to parents to increase awareness about the dangers of opioid overdose and to communicate your school's response to this issue. The aim is to help families understand the steps school leaders are taking to protect and support students, as well as direct them to resources for additional support and information.

Subject: Important Information About the Risks of Fentanyl and Fake Pills

Dear Students and Families,

At our school, the safety and well-being of our students are our highest priorities. We are writing to address the critical issue of fentanyl and other opioid drugs which are having a severe impact on our community. Our aim is to provide essential information that will help protect our students and guide our collective efforts to combat this crisis. We ask that you review this document and the Drug Enforcement Agency (DEA) resources provided and engage in an open and honest conversation about the risk with your child.

What is the Danger? In Arizona, approximately five people die each day from drug overdoses, with synthetic opioids like fentanyl being a major contributor. In 2024 alone, Arizona recorded over 1,200 opioid-related deaths and almost 4,000 overdoses. Tragically, between 2021 and 2022, 80 children in our state lost their lives to overdoses. **Maricopa County has ranked among the top three counties in the U.S. for adolescent overdose deaths, highlighting the urgent need for awareness and action.**

Understanding Opioids Opioids are substances that depress the central nervous system, causing slowed breathing, drowsiness and in some cases, death. This group includes drugs such as morphine, oxycodone, fentanyl, hydromorphone, and heroin. Illicit fentanyl, a particularly potent opioid, can be fatal even in tiny amounts, equivalent to that needed to cover the tip of a pencil. Opioids are now frequently found contaminating other illicit drugs and are covertly pressed into pill shapes resembling common prescription drugs such as oxycodone, Xanax® and stimulants like Ritalin®.

Why Are Opioids Used? While opioids are often prescribed for pain management, some individuals, especially young people, may misuse these drugs out of curiosity or to cope with difficult emotions. Opioids are highly addictive, which makes them both dangerous and challenging to stop using once dependence has developed.

What is Naloxone? Naloxone (commonly known as Narcan®) is a life-saving medication available as a nasal spray or injection that can quickly reverse the effects of an opioid overdose. It typically acts within 2-3 minutes and can last between 30 to 90 minutes. A second dose may be needed if overdose symptoms return. Naloxone does not cause dependency and can be given safely to someone not experiencing an overdose. Naloxone should be stocked in every house that has opioids. It can be purchased over the counter and through your pharmacy without a prescription.

How Can We Help? We encourage you to discuss these important issues with your children and others in your community. This letter contains crucial information, guidance for responding to an overdose, and resource links. Please share it with anyone who might benefit from this information.

Attached are resources from the DEA to help better describe trends in the illicit market and the importance of avoiding fake pills. These resources also demonstrate common trends in how youth purchase illicit drugs on the internet and covert emoji-based drug transaction tools you should be aware of. These resources can also be accessed on the DEA's '[One Pill Can Kill](#)' website and through the links below:

- [What every parent needs to know about fake pills](#)
- [Fake Pills Fact Sheet](#)
- [Emoji Drug Code Decoded](#)
- [Social Media Drug Trafficking Threat](#)

Our commitment to the safety and health of every student is unwavering. Should you have any questions or need further assistance, please contact: _____ (Insert School Contact).

Warm regards,

(Insert Principal/School Superintendent/School Health Services Administrator)

What Every Parent and Caregiver Needs to Know About **FAKE PILLS**

DRUG ENFORCEMENT ADMINISTRATION • Public Safety Alert

What is fentanyl?

- It is a deadly synthetic opioid that is being pressed into fake pills or cut into heroin, cocaine, and other street drugs to drive addiction.

FENTANYL IS
50x
MORE POTENT
THAN HEROIN

What are fake pills?

- The Sinaloa Cartel and Cartel de Jalisco Nueva Generacion are making fentanyl and pressing it into fake pills. Fake pills are made to look like OxyContin®, Xanax®, Adderall®, and other pharmaceuticals. These fake pills contain no legitimate medicine.
- Fentanyl is also made in a rainbow of colors so it looks like candy.



***FAKE**
rainbow oxycodone M30 tablets containing fentanyl

Why is fentanyl so dangerous?

- DEA lab testing reveals that seven out of every ten fake pills with fentanyl contain a potentially lethal dose.



What are the physical and mental effects of fentanyl?

- Fentanyl use can cause confusion, drowsiness, dizziness, nausea, vomiting, changes in pupil size, cold and clammy skin, coma, and respiratory failure leading to death.

Visit www.dea.gov/onepill for more information and resources for parents and caregivers

*Photos of fake pills do not represent all available fake pills.

**ONE
PILL CAN
KILL**

Data as of September 2023



EMOJI DRUG CODE | DECODED

COMMON EMOJI CODES

FAKE PRESCRIPTION DRUGS

PERCOCET & OXYCODONE



XANAX



ADDERALL



DEALER SIGNALS

DEALER ADVERTISING



HIGH POTENCY



UNIVERSAL FOR DRUGS



LARGE BATCH



OTHER DRUGS

METH



HEROIN



COCAINE



MDMA & MOLLIES



MUSHROOMS



COUGH SYRUP



MARIJUANA



This reference guide is intended to give parents, caregivers, educators, and other influencers a better sense of how emojis are being used in conjunction with illegal drugs. Fake prescription pills, commonly laced with deadly fentanyl and methamphetamine, are often sold on social media and e-commerce platforms – making them available to anyone with a smartphone.

#ONEPILLCANKILL

dea.gov/onepill



NALOXONE FORMULATIONS AND STORAGE

How should naloxone be given?




Naloxone can be given through the nostrils (intranasal) or into the muscle (intramuscular). Because it is easier and safer to administer naloxone through the nostrils, the information found in this toolkit will focus on the intranasal formulation.




Intranasal naloxone comes in a pre-packaged nasal spray. It may be called by its brand names, Narcan® or Kloxxado®, but it is best known as naloxone nasal spray (generic name). Due to its proven safety profile and availability through current procurement mechanisms, **STOP-IT recommends schools use naloxone or Narcan® for stock supply.**

Naloxone Accessibility in Schools






Consider keeping naloxone in easy to access locations throughout the school to ensure a response time within three minutes. Naloxone may be stored with Automated External Defibrillators (AEDs) or placed in an independent, unlocked storage container. Below is a sample list of storage options for naloxone. Each container should contain a pair of nitrile gloves and an instruction guide such as that offered by the National School Nurses Association or the one enclosed with the product.

Below are naloxone storage devices schools can consider purchasing to house the product.

Product	Image	Estimated Cost	Additional Information
Illinois Supply Company- Naloxone		\$31	Access the catalog here .
NaloxBox		\$27	Access the catalog here .
Naloxonebox		\$300	For more information, visit the site here .

Narstop		\$698	For more information, visit the site here .
ONEBox Technologies		<p>\$150 - ONEbox Classic</p> <p>\$100 – ONEbox Flex</p> <p>\$50 – ONEbox Co-location</p>	<p>View the catalog here. View the sample video here.</p> <p>ONEbox Classic features: mountable/transportable box; 3 PPE; high resolution video screen with bi-lingual emergency instruction; tagging system: installation/maintenance SOP; charging cord.</p> <p>ONEbox Flex features: mountable/transportable box; 3 PPE; QR code and written instructions that go to ONEbox emergency video; tagging system: installation/maintenance SOP.</p> <p>ONEbox co-location features: high resolution video screen with bilingual emergency instructions’ 5+ minute training video; 2 PPE; charging cord; double stick tape for easy application/installation; intended to be used in vending machines, AEDs, first aid kits, and fire extinguishers for added instruction.</p>
School Health Naloxone Kit		\$345	For more information, visit the site here .

Other Options: Products Available on Amazon

 <p>Naloxone Case for Opioid Overdose Kits Custom Designed Hardshell Case Holds All...</p> <p>10 Count (Pack of 1)</p> <p>★★★★☆ 11</p> <p>\$114⁹⁹ (\$114.99/Count)</p> <p>Save more with Subscribe & Save</p> <p>✓prime Overnight 4 AM - 8 AM</p> <p>Small Business</p>	 <p>Plastic Indoor/Outdoor 3D Signage For Co-location Naloxone Opioid Overdose Kits in AED Boxes (1)</p> <p>See options</p> <p>No featured offers available</p> <p>\$29.99 (1 new offer)</p>	 <p>Naloxone Overdose Emergency Kit Cabinet - Does Not Include Alarm or Lock Designed for Wall Mount & Public Access (Metal, Black - No... Metal)</p> <p>★★★★☆ 5</p> <p>\$139⁹⁰</p> <p>✓prime One-Day FREE delivery Tomorrow, Jun 14</p> <p>Arrives before Father's Day</p> <p>Only 2 left in stock - order soon.</p> <p>Small Business</p> <p>Add to cart</p>	 <p>RescueShotCase® Bag for Naloxone Opioid Overdose Kit Community Distribution Bag Only Does No... 1 Count (Pack of 1)</p> <p>★★★★☆ 82</p> <p>50+ bought in past month</p> <p>\$7⁹⁹ (\$7.99/Count)</p> <p>FREE delivery Jun 20 - 26</p> <p>Or fastest delivery Fri, Jun 21</p> <p>Small Business</p> <p>Add to cart</p>	 <p>Non-Locking OD Cabinet High Visibility Cabinet for Emergency Supplies (OD Kit Not Included)</p> <p>★★★★☆ 14</p> <p>50+ bought in past month</p> <p>\$66⁴⁵</p> <p>✓prime Overnight FREE delivery Overnight 4 AM - 8 AM</p> <p>Arrives before Father's Day</p> <p>Small Business</p> <p>Add to cart</p> <p>More Buying Choices</p> <p>\$53.16 (3 used & new offers)</p>
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Best Practices for Storage and Expiration Monitoring

Naloxone should be stored away from direct sunlight and at room temperature. Avoid freezing the product. Use the following best practices for naloxone storage and expiration monitoring:

1. Assign personnel to monitor storage temperatures and expiration dating.
2. Maintain a list of naloxone products available in the school by building. Add a descriptor of location on your list or use a map. Use this list to maintain a monthly inspection.

Example:

Location	Building	Expiration Date	Last Inspected Date	Initials
First floor, School Nurse Office	Building A	12/31/2026	7/15/2024	ADE
Fifth Floor, Hallway	Building H	12/31/2026	7/15/2024	ADE
Third Floor, Room 304	Building J	12/31/2025	7/15/2024	ADE

3. For each location, check the expiration of each product.
 - a. If the product only has month and year (MM/YYYY), use the last day of the month to add to the expiration date monitoring.
 - i. Example: 12/2025 is entered as 12/31/2025.
 - b. A product is pulled from the storage location if it expires within the next 30 days.
 - i. Example: If inspection occurred on 11/15/2024 and a product is set to expire on 12/31/2024, you will pull this product from storage and replace it with a new product.
4. For temperature excursions, see storage requirements for each product.

RESOURCES FOR OVERDOSE REPORTING AND RECORDING

Overdose Recording Procedures

It is essential schools maintain detailed records on the events leading up to, during, and after a response to an opioid overdose. These records should document the individual's condition when first discovered, the time taken to administer naloxone, the victim's response to the medication, and whether additional doses were required. Comprehensive documentation is essential for emergency medical services (EMS) to assess the effectiveness of the intervention and provide appropriate follow-up care. Additionally, accurate records are invaluable for after-action reviews, allowing schools to evaluate and improve their emergency response protocols.

From a legal standpoint, detailed records also offer protection for the institution by demonstrating adherence to established procedures and providing evidence of responsible care, which can be vital in defending against potential liability claims.

Schools are encouraged to use the *Naloxone Administration Monitoring Form* in this link and exemplified below to record overdose events. The form may also be accessed through the STOP-IT webpage. School policies and procedures should specify who is responsible for the recording of overdoses.

Overdose Reporting Procedures

All overdoses should be reported to Arizona Poison Control. This step helps schools identify other potential contributors to the overdose and ensures that each case receives appropriate and tailored review by field experts. Furthermore, reporting ensures systematic record of these events as a part of statewide monitoring efforts.

First responders are also required to report these events to the state of Arizona through a different mechanism. According to Ariz. Admin. Code Rule R 9-4-602, required reporters of naloxone administration include law enforcement officers, emergency medical services/ambulance agencies and healthcare facilities/providers. Staff responding to an overdose are encouraged to discuss details surrounding the school's response with the reporting authority to ensure accurate data is captured.

NALOXONE ADMINISTRATION MONITORING FORM

Student Demographics and Health History

Client Name: _____ DOB: _____
 School District: _____ Name of School: _____
 Age: _____ Type of Person: Student Staff Visitor Gender: Male Female Other
 Ethnicity: Spanish/Hispanic/Latino: Yes No
 Race: American Indian/Alaskan Native Black/African American Asian/Asian Indian
 Native Hawaiian/other Pacific Islander White/Caucasian Other

Signs of Overdose Present

Blue lips Breathing slowly Shallow breathing Slow pulse Unresponsive
 Weak pulse Other (specify) _____

What Type of Substance is Suspected? (This list does not account for drug adulterations where opioids may be present)

Heroin Benzodiazepines/Barbiturates Cocaine/Crack Alcohol Fentanyl
 Methadone Suboxone Don't Know Other (specify) _____

Naloxone Administration Incident Reporting

Date of occurrence: _____ Time of administration: _____
 Vital signs: BP _____ / _____ Temp _____ Pulse _____ Respiration _____
 Location where person experiencing an overdose was found:
 Classroom Cafeteria Health Office Athletic Field/Outdoors Bus Other (specify): _____
 How was the naloxone administered: Injected into muscle Sprayed into nose
 Naloxone lot #: _____ Expiration date: _____
 Naloxone administered by: (Name) _____
 Was this person formally trained? Yes No Don't know
 Parent notified of naloxone administration: (time) _____
 Was a second dose of naloxone administered? Yes No Unknown
 If yes, was that dose administered at the school prior to arrival of EMS? Yes No Unknown
 Approximate time between the first and second dose _____
 Naloxone lot #: _____ Expiration date: _____

Person's Response to Naloxone
<input type="checkbox"/> Combative <input type="checkbox"/> Responsive/Angry <input type="checkbox"/> Responsive but sedated <input type="checkbox"/> Responsive and Alert <input type="checkbox"/> No response to naloxone
Post-Naloxone Observations (Check all that apply)
<input type="checkbox"/> None <input type="checkbox"/> Seizure <input type="checkbox"/> Vomiting <input type="checkbox"/> Difficulty breathing <input type="checkbox"/> Other (specify): _____
Other Actions Taken
<input type="checkbox"/> Sternal rub <input type="checkbox"/> Recovery position <input type="checkbox"/> Rescue breathing <input type="checkbox"/> Chest compressions <input type="checkbox"/> Automatic defibrillator <input type="checkbox"/> Yelled <input type="checkbox"/> Shook the person <input type="checkbox"/> Oxygen <input type="checkbox"/> Other: _____
Naloxone Administration Incident Reporting
EMS notified at: (time) _____ By whom _____ Transferred to ER: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown If yes, transferred via: <input type="checkbox"/> Ambulance <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Other: _____ Parent: <input type="checkbox"/> At school <input type="checkbox"/> Will come to school <input type="checkbox"/> Will meet student at hospital <input type="checkbox"/> Other: _____ Hospitalized: <input type="checkbox"/> Yes <input type="checkbox"/> If yes, discharged after _____ days <input type="checkbox"/> No Name of hospital: _____ Student/Staff/Visitor outcome: _____
School Follow-up
Did a debriefing meeting occur? <input type="checkbox"/> Yes <input type="checkbox"/> No Postvention services offered: _____ Recommendation for changes: <input type="checkbox"/> Protocol change <input type="checkbox"/> Policy change <input type="checkbox"/> Educational change <input type="checkbox"/> Information sharing <input type="checkbox"/> None
Comments (include names of school staff, parent, others who attend debriefing): _____ _____ _____
Student Demographics and Health History
Form completed by: _____ Date: _____ Title: _____ Phone number: (____) _____ - _____ Ext.: _____ School name/address: _____

RESOURCES FOR NALOXONE PROCUREMENT

As a result of collaborative efforts between the Arizona Department of Health Services and the Arizona Health Care Cost Containment System (AHCCCS), STOP-IT is pleased to provide all Arizona schools with replenishable free supplies of Narcan®. Kits are available for schools grades K-12. Schools and districts receiving Narcan® kits should complete the [Narcan® Request – District/Charter Information Form](#). The form may also be accessed through the STOP-IT webpage.

The identified district or charter school representative will receive an Adobe Sign workflow requesting completion of the Narcan® for Arizona Schools Request Form on behalf of all campuses under the education agency’s control. The maximum number of kits made available to each requesting entity will be based on estimated needs as outlined in the STOP-IT Sample School Overdose Policy and Procedure in this Toolkit.

Schools should estimate the total amount of naloxone needed based on policies and procedures stipulating the locations naloxone is required in. **The STOP-IT initiative recommends the following policy be considered:**

Each school will maintain one kit of two products for every 300 students.

- Products should be kept in each building on campus and in an easily accessible, unlocked location (such as with an AED) to ensure a delivery response time of less than 3 minutes
- One kit will be kept within the medical aid office
- Naloxone be available for school-sponsored outdoor sporting activities
- Schools may elect to keep naloxone on busses and other forms of student transportation

Alternative Steps for procuring naloxone:

Schools that wish to obtain additional naloxone supplies beyond what is offered through STOP-IT may consider using the following options below:

Source	Shelf Life	Additional Information
Emergent Biosolutions	12 months	Request free naloxone for your school by emailing emergentgives@ebsi.com . EBSI will provide 2-6 naloxone boxes per school.
Teva Naloxone	24 months	Prescription (Rx) only
HIDTA Naloxone via Arizona Poison Control	Varies	Through the Teva Settlement Agreement, the State of Arizona receives 27,700 units of naloxone per year. For more information, visit the webpage .
Over the Counter (OTC) Narcan®	4 years	In Arizona, laypeople may self-purchase naloxone over the counter from most retail pharmacies.
Medea Reduced Rate for Purchase	Varies by product	To order, contact Dana Amato at Damato@medeamp.com or call 317-506-6733

RESOURCES FOR OVERDOSE PREVENTION AND SUD TREATMENT

It is imperative that individuals struggling with substance use disorder (SUD) receive prompt referrals to evidence-based treatments. Each overdose scenario should be carefully analyzed to determine if a substance use disorder contributed to the event. Schools play a crucial role in identifying students who may need support and connecting them with appropriate community resources. The list below includes both local and national resources designed to assist schools as they collaborate with families in the referral process.

<i>Substance Use Treatment Resources</i>		
Resource	Organization	Description
Mental and Substance Use Disorders Treatment Locator	SAMHSA	This webpage is a confidential and anonymous resource for persons seeking treatment for mental and substance use disorders in the United States and its territories.
Opioid Assistance + Referral Line	AZ Poison and Drug Information Center (APDIC)	<u>The OARLine: Opioid Assistance + Referral Line</u> (1-888-688-4222) is available for health care clinicians to call for free consultation on patients with complex pain or opioid use disorder, provides information and referrals to the public, and conducts follow-up with people experiencing overdoses.
Accessing and Locating Opioid Treatment Services	AHCCCS	Information on <u>AHCCCS 24/7</u> locations providing opioid treatment services.
Buprenorphine Practitioner Locator	SAMHSA	Find practitioners authorized to treat opioid dependency with buprenorphine by state.
Emergency Substance Abuse Hotline	SAMHSA	For substance abuse treatment and mental health referrals, contact the Substance Abuse and Mental Health Services Administration's (SAMHSA) National Helpline at 1-800-662-HELP (4357) or 1-800-487-4889 (TDD, for hearing impaired)

Medications for Opioid Overdose, Withdrawal, & Addiction Infographic	NIDA	Infographic of the different types of medications approved by the U.S. Food and Drug Administration for opioid overdose, withdrawal, and addiction.
State Opioid Treatment Authorities Contact List	SAMHSA	Contact Information for Arizona's Opioid Treatment Authority.
Arizona SUBG Contacts	SAMHSA	Contact Information for Arizona Substance Use Prevention, Treatment, and Recovery Services Block Grant.
Substance Use Prevention and Screening Resources		
Resource	Organization	Description
Best Practices for Adolescent SUD Services	Natl. Council for Mental Wellbeing	This resource guide offers information about evidence-based best practices tailored for adolescents experiencing SUDs. Emphasizing a holistic approach, this resource provides tools to support adolescents through every stage of recovery and toward a healthier future.
School and Behavioral Health Partnerships: A Resource Guide	ADE, AHCCCS	This resource is intended to assist school districts and behavioral health providers in creating seamless partnerships that support Arizona's youth and families.
Screening Tools for Adolescent Substance Use	NIDA	NIDA has launched two brief online screening tools that providers can use to assess for substance use disorder (SUD) risk among adolescents 12-17 years old. These tools help pediatric providers introduce brief, evidence-based screenings into their clinical practices.
Substance Abuse AZ	APDIC	This webpage houses Arizona prevention, treatment, and recovery resources.

Family Resources		
Resource	Organization	Description
<u>Nar-Anon</u>	Nar-Anon Family Groups	The Nar-Anon Family Groups are a worldwide fellowship for those affected by someone else's addiction. To find a meeting, visit the site.
<u>Parents of Addicted Loved Ones (PAL)</u>	PAL	Parents with children dealing with substance use disorder involving either drugs or alcohol find hope and support through Parents of Addicted Loved Ones (PAL). Visit their site to find a meeting.
Communication Resources		
Resource	Organization	Description
<u>Words Matter - Terms to Use and Avoid When Talking About Addiction</u>	NIDA	This document offers background information and tips for providers to keep in mind while using person-first language, as well as terms to avoid to reduce stigma and negative bias when discussing addiction.

RESOURCES FOR EDUCATION AND TRAINING

STOP-IT recommends all students grades 6-12 receive annual training on the topics of opioids, addiction, and overdose management. School staff should also complete annual training on school overdose policies and procedures, as well as overdose-reversal steps. A variety of online and in-person training options are available. Below are some suggested resources to help schools complete this education. This list is not comprehensive and schools are invited to explore other community groups and organizations that offer similar programming.

<i>Overdose-Reversal/Naloxone Training Services and Resources</i>		
Resource	Organization	Description
Opioid Overdose Reversal Training Video	STOP-IT	This training video developed by STOP-IT instructs laypeople how to administer naloxone in the event of a suspected opioid overdose.
How Naloxone Saves Lives in Opioid Overdose	NIDA	This short video explains what opioids are and how naloxone can be used to reverse an opioid overdose.
Key Steps to Administering NARCAN Nasal Spray: Quick Start Guide and Video	Emergent Devices Inc.	This infographic and short video explain the important actions to take with Narcan® in case of a suspected opioid emergency.
Lifesaving Naloxone	CDC	This webpage outlines frequently asked questions regarding naloxone.
Medications for Opioid Overdose, Withdrawal, & Addiction Infographic	NIDA	This infographic shows different types of medications approved by the U.S. Food and Drug Administration for opioid overdose, withdrawal, and addiction.
Medications for Opioid Use Disorder Video	NIDA	Medications for opioid use disorder are safe, effective, and save lives. This NIDA-produced video takes a closer look at these medications and how they work.

Naloxone Toolkit	CDC	This toolkit provides information on trainings, conversation starters, and fact sheets for naloxone.
NaloxoneAz	SACLAZ	This webpage helps you locate a local naloxone distribution site.
Overdose Prevention and Response Toolkit	SAMHSA	This toolkit provides guidance on the role of opioid overdose reversal medications, including naloxone and nalmefene, and how to respond to an overdose. It contains appendices for specific audiences, such as first responders and healthcare practitioners.
Overdose Prevention Strategy	HHS	This webpage provides an overview of the Nation's four-point strategy to preventing overdoses: primary prevention, harm reduction, evidence-based treatment, and recovery support.
Generic Naloxone Hydrochloride Injectable	Amphastar Pharmaceuticals Company	This document provides an overview of the generic naloxone injectable, as well as how to use it.
How to Use Zimhi	ZMI Pharma, Inc.	This video provides instructions on how to administer ZIMHI, the intramuscular naloxone injection.
Kloxxado® Quick Instructions for Use	Hikma Pharmaceuticals USA Inc.	This user guide explains the important actions to take with Kloxxado™ in case of a suspected opioid emergency.

Online Student/Parent Educational Curriculum		
Resource	Organization	Description
<u>DEA Fentanyl Awareness</u>	DEA	This webpage directs users to educational materials, recovery resources, and prevention-related events.
<u>Fentanyl Crisis Toolkit</u>	SACLAz	Developed by Arizona substance use prevention coalitions, this toolkit is a compilation of materials and resources to prevent and reduce overdoses and build healthier communities across Arizona.
<u>Fentanyl Education</u>	Sold Out Youth Foundation	This webpage features interactive modules for students to learn more about the dangers of fentanyl and how to keep their communities safe.
<u>Fentanyl Toolkit - Information and Resources</u>	Natural High	This toolkit provides lessons for youths about the dangers of fentanyl.
<u>One Pill Can Kill</u>	DEA	The One Pill Can Kill Campaign offers an opportunity for the media, parents, teachers, educators, and community organizations to raise awareness about counterfeit prescription drugs.
<u>Operation Prevention - Opioid and Prescription Drugs</u>	Discovery Education	Operation Prevention's school resources provide educators with engaging tools that educate students about the science behind addiction and its impacts on the body. Through hands-on investigations, students will explore the science behind substance misuse, and the resulting impacts on our brain and body.
<u>Prevention and Early Action</u>	Partnership to End Addiction	Not sure how to prevent drug or alcohol use? Or what to do if you suspect or have discovered substance use? This resource has the science- and research-backed information to help parents help their children.
<u>Prevention eResources</u>	AZ HIDTA	This webpage provides resources on prescription drugs, information for tribal communities, information for rural areas, and information for schools.

Song for Charlie School and Community Program	Song for Charlie	This webpage provides educators, school administrators, and community leaders with the tools and resources needed to help raise awareness among youth about the dangers of fake pills and fentanyl.
Talk Now AZ	SACLAZ	Parents and caregivers have a significant influence in their children’s decisions to experiment with alcohol and other drugs. This resource guides parents on how to talk to children about the dangers of drinking alcohol and using other drugs at a young age.

In-Person Educational Options

Resource	Organization	Description
AzCRH Naloxone Training Program	Arizona Center for Rural Health	The Arizona Center for Rural Health at the University of Arizona is working to prevent opioid-related deaths by building the capacity of Community Health Workers and Representatives, community leaders, and students to carry and use Naloxone through effective trainings.
Community Bridges Presentations and Workshops	Community Bridges	Community Bridges offers community education that supports health, wellness, and awareness. Specifically, they offer courses on opioid awareness, drug trends, and mental health awareness trainings.
Free NARCAN® Kit and Training	Terros Health	Terros Health offers free virtual and in-person trainings that cover the following: an overview of opioids, naloxone administration, and questions and answers. Adults will receive a free NARCAN® kit upon completion of the course.
HIDTA Training Resources	HIDTA	The Arizona HIDTA has a strong commitment to enhancing the effectiveness and efficiency of Arizona Initiatives and drug law enforcement in Arizona through its training program. View its upcoming trainings here .

MATForce School Presentations	MATFORCE	MATFORCE provides drug prevention education for students in K-12th grades. This resource guide provides a list of services that support schools, students, and staff.
Narcan4Life Education	Narcan4Life	This organization promotes community education and Narcan distribution through tabling at events, giving presentations, and working with leadership teams.
National Guard Counter Drug Task Force	Arizona National Guard	The National Guard Counterdrug Program conducts a full spectrum campaign that bridges the gap between and among DoD and Non-DoD institutions in the fight against illicit drugs and transnational threats to the Homeland
Sold Out Youth Foundation Programming	Sold Out Youth Foundation	Sold Out’s mission is to educate, encourage, and challenge students to live a life of alcohol and drug abstinence. It delivers dynamic presentations to public and private schools and offers a 100% online student video life skills training.
Sonoran Prevention Works Training and Consulting	Sonoran Prevention Works	SPW offers customized consultation and consulting, free online training modules, and free public trainings on popular topics such as drug trends, overdose recognition and response, and prevention efforts.
Tanner Community Development Corporation Initiatives	Tanner Community Development Corporation	TCDC’s youth outreach focuses on reducing substance misuse, addressing the challenges of peer pressure, and anti-bullying tactics.
Youth4Youth Programs	Youth4Youth	Youth4Youth offers two training programs for schools on character education, leadership principles, and empowering others.



References

1. Arizona Department of Health Services. Opioid prevention: naloxone. Accessed July 15, 2024. <https://www.azdhs.gov/opioid/naloxone/index.php>
2. National Institute on Drug Abuse. Naloxone Drug Facts. Accessed July 15, 2024. <https://nida.nih.gov/publications/drugfacts/naloxone>
3. Product Information: Naloxone HCl nasal spray, naloxone HCl nasal spray. Teva Pharmaceuticals USA Inc (per DailyMed), North Wales, PA, 2022.
4. OTC Product Information: Narcan[®], naloxone HCl nasal spray 4 mg. Emergent Devices Inc, Plymouth Meeting, PA, as posted to the FDA site 03/29/2023.
5. Product Information: KLOXXADO(TM) nasal spray, naloxone HCl nasal spray. Hikma Specialty USA Inc (per FDA), Columbus, OH, 2021.
6. Minnesota Department of Health. Naloxone administration in school settings: school toolkit. February 27, 2024. Accessed July 15, 2024. <https://www.health.state.mn.us/people/childreneyouth/schoolhealth/toolkit.html>



Appendix A: State Board of Nursing Advisory Opinion



Katie Hobbs
Governor

Joey Ridenour
Executive Director

Arizona State Board of Nursing

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Phoenix, AZ 85014-3655
Phone (602) 771-7800
Home Page: www.azbn.gov

An advisory opinion adopted by AZBN is an interpretation of what the law requires. While an advisory opinion is not law, it is more than a recommendation. In other words, an advisory opinion is an official opinion of AZBN regarding the practice of nursing as it relates to the functions of nursing. Facility policies may restrict practice further in their setting and/or require additional expectations related to competency, validation, training, and supervision to assure the safety of their patient population and or decrease risk.

OPINION: Administration of Naloxone: The Role of the School Nurse
APPROVED: 11/24
ORIGINATING COMMITTEE:
SCOPE OF PRACTICE COMMITTEE

Within the Scope of Practice of X LPN X RN

ADVISORY OPINION ADMINISTRATION OF NALOXONE: THE ROLE OF THE SCHOOL NURSE

STATEMENT OF SCOPE

It is within the legal authority and Scope of Practice of a nurse (RN or LPN) to administer over-the-counter naloxone in school settings without a standing order in an emergency situation.

I. GENERAL REQUIREMENTS

- A. Comprehensive written policy and procedures are developed and maintained by the school/employer
- B. Training on how to administer naloxone, including assessment, documentation and post-administration care
- C. Training on how to recognize the signs and symptoms of an opioid overdose

II. RATIONALE

One of the primary reasons for stocking Naloxone (commonly known as Narcan) in schools is the importance of being prepared for emergencies. Naloxone is a life-saving medication that can rapidly reverse the effects of an opioid overdose. In summary, having Naloxone available in schools is a proactive safety measure that can save lives, increase access to this life-saving medication and address the rising rates of youth overdoses. The role of nurses in distributing and administering this medication is pivotal.

APPLICABLE STATUTES

ARS 36-2267. Administration of opioid antagonist; exemption from civil liability; definition

A. A person may administer an opioid antagonist that is prescribed or dispensed pursuant to section 32-1979 or 36-2266 in accordance with the protocol specified by the physician, nurse practitioner, pharmacist or other health professional or that is received from a county health department pursuant to section 36-192 to a person who is experiencing an opioid-related overdose.



B. A person who in good faith and without compensation administers an opioid antagonist to a person who is experiencing an opioid-related overdose is not liable for any civil or other damages as the result of any act or omission by the person rendering the care or as the result of any act or failure to act to arrange for further medical treatment or care for the person experiencing the overdose, unless the person while rendering the care acts with gross negligence, wilful misconduct or intentional wrongdoing.

C. For the purposes of this section, "person" includes an employee of a school district or charter school who is acting in the person's official capacity.

III. REFERENCES

Arizona Department of Health Services (2024). *Opioid Prevention*. <https://www.azdhs.gov/opioid/>

Gage CB, Powell JR, Ulintz A, et al. Layperson-Administered Naloxone Trends Reported in Emergency Medical Service Activations, 2020-2022. *JAMA Netw Open*. 2024;7(10):e2439427.
doi:10.1001/jamanetworkopen.2024.39427