The Commonwealth of Massachusetts

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Governor

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Lieutenant Governor

Executive Office of Health and Human Services Department of Public Health

Office of Emergency Medical Services 67 Forest Street, Marlborough, MA 01752

**MEMORANDUM**

January 3, 2022

KATHLEEN E. WALSH

Secretary

ROBERT GOLDSTEIN, MD, PhD

Commissioner

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[**www.mass.gov/dph**](http://www.mass.gov/dph)

# TO: All MA Licensed Ambulance Services FROM: Susan Lewis, NRP, Director

**RE: Pre-EMS Naloxone Administration Documentation DATE: May 15, 2023**

In 2021, Massachusetts recorded a record number of deaths due to [opioid overdose.](https://www.mass.gov/lists/current-opioid-statistics) This is, of course, a national problem, and partly in response, [the FDA recently approved 4 mg intranasal naloxone to be sold](https://www.fda.gov/news-events/press-announcements/fda-approves-first-over-counter-naloxone-nasal-spray) [over the counter](https://www.fda.gov/news-events/press-announcements/fda-approves-first-over-counter-naloxone-nasal-spray) without a prescription. The Massachusetts Department of Public Health (DPH) welcomes this action as it expands bystander access to naloxone. The increased availability of over-the-counter naloxone will likely increase bystander-administered naloxone. It is important that ambulance services and their EMS personnel be aware of these changes; we are taking this opportunity to remind you that often it is ONLY EMS medical documentation that records bystander administration, and it is vital that EMS personnel record such data as accurately as possible for medical care and public health.

The DPH Bureau of Healthcare Safety & Quality reviewed patient care report (PCR) narratives reported in the Massachusetts Ambulance Trip Record Information System (MATRIS) in 2022. Approximately **43% of patients identified as having received prehospital naloxone did not have naloxone reported in any of the ‘medication given’ fields**. Many of these records had documentation supporting naloxone administered before EMS arrival.

The field “Medication Administered Prior to this Unit’s EMS Care” (eMedications.02) is a nationally required element in accordance with [AR 5-403 Statewide EMS Minimum Dataset](https://www.mass.gov/doc/ar-5-403-statewide-ems-minimum-data-set-nemsis-v3-effective-11012022/download), under [105 CMR](https://www.mass.gov/doc/105-cmr-170-emergency-medical-services-system/download) [170.345](https://www.mass.gov/doc/105-cmr-170-emergency-medical-services-system/download)(B). This is typically reported within the ePCR “flow chart,” which allows for documentation of events, interventions and medications that were performed prior to EMS arrival by laypeople, law enforcement, and other first responders. EMS personnel are expected to report all medications administered before EMS arrival in the medication fields, including naloxone when administered for a suspected opioid overdose.

Please contact your software vendor for guidance if there are questions about how to enter these in your ePCR. For all other questions, you may contact DPH at matrissupport@mass.gov.

In addition to reminding you of the need to record naloxone administration, DPH is reminding ambulance services that they are authorized under [STP 6.12](https://www.mass.gov/doc/emergency-medical-services-statewide-treatment-protocols-version-20231-effective-april-1-2023-pdf/download) to stock ambulances with ‘civilian’ naloxone administration kits, to be provided to the patient or accompanying person. Ambulance services interested in accessing state-subsidized naloxone for this purpose are welcome to apply to participate in the MDPH [Community Naloxone Purchasing Program.](https://www.mass.gov/service-details/community-naloxone-purchasing-program-cnpp)

EMS personnel are essential and valued partners in emergency overdose response. DPH thanks you for your service to individuals and families impacted by opioid overdose and for ensuring accurate data recording which is essential to a data driven response to opioid overdose in Massachusetts.