



STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
Police Officer Standards and Training Council
Connecticut Police Academy

GENERAL NOTICE 17- 03

To: Chief Law Enforcement Officers
Training Officers
Protective Services
Resident Troopers

From: Thomas E. Flaherty
Police Academy Administrator

Date: November 2, 2017

Subject: **Officer and First Responder Safety – Training Bulletin – Fentanyl Safety Recommendations for First Responders**

The following information has been forwarded by Commissioner Dora Schriro, DESPP from the U.S. Department of Homeland Security, Office of Intergovernmental Affairs.

“The National Security Council (NSC) released a report outlining safety recommendations for state and local first responders on opioids, including specific recommendations on fentanyl.”

“The Fentanyl Safety Recommendations for First Responders provide first responders with evidence-based recommendations to protect themselves” when responding to scenes where the presence of fentanyl is suspected. Balancing personal safety with mobility and efficiency is critical, and these recommendations will serve as a resource in doing that.”

“The recommendations include actions for first responders to take:”

To protect themselves from exposure;
When exposure occurs; and

When they or their partners exhibit signs of intoxication.

“To view the full report, visit <https://www.whitehouse.gov/ondcp/presidents-commission>.”

Attached for your review and distribution is a one page document titled “FENTANYL – SAFETY RECOMMENDATIONS FOR FIRST RESPONDERS.”

FENTANYL[†]

SAFETY RECOMMENDATIONS FOR FIRST RESPONDERS

[†] For the purposes of this document, fentanyl, related substances, and synthetic opioids (herein after referred to as fentanyl[†]) includes fentanyl analogues (e.g., acetylfentanyl, acrylfentanyl, carfentanil, furanylfentanyl), novel synthetic opioids (e.g., U-47700), and other drugs that may be laced with these substances.

- ▶ **The abuse of drugs containing fentanyl[†] is killing Americans. Misinformation and inconsistent recommendations regarding fentanyl[†] have resulted in confusion in the first responder community.**
- ▶ You as a first responder (law enforcement, fire, rescue, and emergency medical services (EMS) personnel) are increasingly likely to encounter fentanyl[†] in your daily activities (e.g., responding to overdose calls, conducting traffic stops, arrests, and searches).
- ▶ This document provides scientific, evidence-based recommendations to protect yourself from exposure.

WHAT YOU NEED TO KNOW

- ▶ Fentanyl[†] can be present in a variety of forms (e.g., powder, tablets, capsules, solutions, and rocks).
- ▶ Inhalation of airborne powder is MOST LIKELY to lead to harmful effects, but is less likely to occur than skin contact.
- ▶ Incidental skin contact may occur during daily activities but is not expected to lead to harmful effects if the contaminated skin is promptly washed off with water.
- ▶ Personal Protective Equipment (PPE) is effective in protecting you from exposure.
- ▶ Slow breathing or no breathing, drowsiness or unresponsiveness, and constricted or pinpoint pupils are the specific signs consistent with fentanyl[†] intoxication.
- ▶ Naloxone is an effective medication that rapidly reverses the effects of fentanyl[†].

Actions to take . . .

To protect yourself from exposure

- ▶ Wear **gloves** when the presence of fentanyl[†] is suspected.
- ▶ **AVOID actions that may cause powder to become airborne.**
- ▶ Use a properly-fitted, NIOSH-approved **respirator ("mask")**, wear **eye protection**, and minimize skin contact when responding to a situation where small amounts of suspected fentanyl[†] are visible and may become airborne.
- ▶ Follow your department guidelines if the scene involves large amounts of suspected fentanyl[†] (e.g., distribution/storage facility, pill milling operation, clandestine lab, gross contamination, spill or release).

When exposure occurs

- ▶ Prevent further contamination and notify other first responders and dispatch.
- ▶ Do not touch your eyes, mouth, nose or any skin after touching any potentially contaminated surface.
- ▶ Wash skin thoroughly with cool water, and soap if available. **Do NOT use hand sanitizers as they may enhance absorption.**
- ▶ Wash your hands thoroughly after the incident and before eating, drinking, smoking, or using the restroom.
- ▶ If you suspect your clothing, shoes, and PPE may be contaminated, follow your department guidelines for decontamination.

If you or other first responders exhibit

- **Slow Breathing or No Breathing**
- **Drowsiness or Unresponsiveness**
- **Constricted or Pinpoint Pupils**
- ▶ Move away from the source of exposure and call EMS.
- ▶ Administer naloxone according to your department protocols. Multiple doses may be required.
- ▶ If naloxone is not available, rescue breathing can be a lifesaving measure until EMS arrives. Use standard basic life support safety precautions (e.g., pocket mask, gloves) to address the exposure risk.
- ▶ If needed, initiate CPR until EMS arrives.



Collaborative Support From:

- American College of Emergency Physicians
- American College of Medical Toxicologists
- American Industrial Hygiene Association
- Association of State and Territorial Health Officials
- Association of State Criminal Investigative Agencies
- Fraternal Order of Police

- International Association of Chiefs of Police
- International Association of Fire Chiefs
- International Association of Fire Fighters
- Major Cities Chiefs Association
- Major County Sheriffs of America
- National Alliance of State Drug Enforcement Agencies

- National Association of Counties
- National Association of County and City Health Officials
- National Association of Emergency Medical Technicians
- National Association of EMS Physicians
- National Association of State EMS Officials

- National Governor's Association
- National HIDTA Directors Association
- National Narcotic Officers' Associations' Coalition
- National Sheriffs' Association
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- Police Executive Research Forum
- Police Foundation