

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 217
(A-23)

Introduced by: American Academy of Child and Adolescent Psychiatry, American Academy of Psychiatry and the Law, American Association for Geriatric Psychiatry, American Psychiatric Association

Subject: Increase Access to Naloxone in Schools Including by Allowing Students to Carry Naloxone in Schools

Referred to: Reference Committee B

- 1 Whereas, Our American Medical Association with other interested organizations declare the
2 opioid epidemic as one of the many factors within the National Child Mental Health Crisis; and
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4 Whereas, Drug overdose deaths in youths from ages 10 to 19 years of age increased 109%
5 from 2019-2021; and
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7 Whereas, There is increased access of illicit manufactured fentanyl (IMF) pills associated with
8 higher risk of adolescent overdose, with IMF deaths increasing 182% from 2019-2021; and
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10 Whereas, The increased morbidity and mortality of adolescent substance use is a national
11 crisis; and
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13 Whereas, Naloxone is a life-saving medication that can reverse an overdose from opioids; and
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15 Whereas, Opioid overdose reversal must be immediate as opioid overdose can quickly result in
16 death; and
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18 Whereas, Naloxone is a safe medicine and only reverses overdoses in people with opioids in
19 their systems; and
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21 Whereas, Our AMA supports legislative, regulatory, and national advocacy efforts to increase
22 access to affordable naloxone, including but not limited to collaborative practice agreements
23 with pharmacists and standing orders for pharmacies and, where permitted by law, community-
24 based organizations, law enforcement agencies, correctional settings, schools, and other
25 locations that do not restrict the route of administration for naloxone delivery; and
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27 Whereas, Our AMA supports the widespread implementation of easily accessible Naloxone
28 rescue stations (public availability of Naloxone through wall-mounted display/storage units that
29 also include instructions) throughout the country following distribution and legislative edicts
30 similar to those for Automated External Defibrillators; and
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32 Whereas, All 50 states and the District of Columbia have enacted laws permitting pharmacy-
33 based naloxone dispensing; and
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35 Whereas, Most states have enacted laws that provide laypersons with civil and criminal
36 immunity for good faith administration of naloxone; and

1 Whereas, Roughly half of US states have statutory language regarding access to naloxone in
2 schools; therefore be it

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4 RESOLVED, That our American Medical Association encourage states, including communities
5 and school districts therein, to adopt legislative and regulatory policies that allow schools to
6 make naloxone readily accessible to school staff, teachers, and students to prevent opioid
7 overdose deaths on school campuses (New HOD Policy); and be it further

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9 RESOLVED, That our AMA encourage states, including communities and school districts
10 therein, to eliminate barriers that preclude students from carrying naloxone in school. (New
11 HOD Policy)

Fiscal Note: Minimal - less than \$1,000

Received: 5/2/23

REFERENCES

1. Centers for Disease Control and Prevention. (2023, January 25). *Lifesaving naloxone*. Centers for Disease Control and Prevention. Retrieved April 13, 2023, from <https://www.cdc.gov/stopoverdose/naloxone/>
2. Guy GP Jr., Haegerich TM, Evans ME, Losby JL, Young R, Jones CM. Vital Signs: Pharmacy-Based Naloxone Dispensing — United States, 2012–2018. *MMWR Morb Mortal Wkly Rep* 2019;68:679–686. DOI: <http://dx.doi.org/10.15585/mmwr.mm6831e1>
3. [external icon](#)
4. Legislative Analysis and Public Analysis Association. (2020, September). *Naloxone: Summary of state laws*. Retrieved April 13, 2023, from <https://legislativeanalysis.org/naloxone-summary-of-state-laws/>
5. NIDA. 2022, January 11. Naloxone DrugFacts. Retrieved from <http://nida.nih.gov/publications/drugfacts/naloxone> on 2023, April 13

RELEVANT AMA POLICY

Increasing Availability of Naloxone H-95.932

1. Our AMA supports legislative, regulatory, and national advocacy efforts to increase access to affordable naloxone, including but not limited to collaborative practice agreements with pharmacists and standing orders for pharmacies and, where permitted by law, community-based organizations, law enforcement agencies, correctional settings, schools, and other locations that do not restrict the route of administration for naloxone delivery.
2. Our AMA supports efforts that enable law enforcement agencies to carry and administer naloxone.
3. Our AMA encourages physicians to co-prescribe naloxone to patients at risk of overdose and, where permitted by law, to the friends and family members of such patients.
4. Our AMA encourages private and public payers to include all forms of naloxone on their preferred drug lists and formularies with minimal or no cost sharing.
5. Our AMA supports liability protections for physicians and other health care professionals and others who are authorized to prescribe, dispense and/or administer naloxone pursuant to state law.
6. Our AMA supports efforts to encourage individuals who are authorized to administer naloxone to receive appropriate education to enable them to do so effectively.
7. Our AMA encourages manufacturers or other qualified sponsors to pursue the application process for over the counter approval of naloxone with the Food and Drug Administration.
8. Our AMA supports the widespread implementation of easily accessible Naloxone rescue stations (public availability of Naloxone through wall-mounted display/storage units that also include instructions) throughout the country following distribution and legislative edicts similar to those for Automated External Defibrillators.
9. Our AMA supports the legal access to and use of naloxone in all public spaces regardless of whether the individual holds a prescription.

Citation: BOT Rep. 22, A-16; Modified: Res. 231, A-17; Modified: Speakers Rep. 01, A-17; Appended: Res. 909, I-17; Reaffirmed: BOT Rep. 17, A-18; Modified: Res. 524, A-19; Reaffirmed: BOT 09, I-19; Reaffirmed: Res. 219, A-21;

Prevention of Drug-Related Overdose D-95.987

1. Our AMA: (a) recognizes the great burden that substance use disorders (SUDs) and drug-related overdoses and death places on patients and society alike and reaffirms its support for the compassionate treatment of patients with a SUD and people who use drugs; (b) urges that community-based programs offering naloxone and other opioid overdose and drug safety and prevention services continue to be implemented in order to further develop best practices in this area; (c) encourages the education of health care workers and people who use drugs about the use of naloxone and other harm reduction measures in preventing opioid and other drug-related overdose fatalities; and (d) will continue to monitor the progress of such initiatives and respond as appropriate.

2. Our AMA will: (a) advocate for the appropriate education of at-risk patients and their caregivers in the signs and symptoms of a drug-related overdose; and (b) encourage the continued study and implementation of appropriate treatments and risk mitigation methods for patients at risk for a drug-related overdose.

3. Our AMA will support the development and implementation of appropriate education programs for persons receiving treatment for a SUD or in recovery from a SUD and their friends/families that address harm reduction measures.

4. Our AMA will advocate for and encourage state and county medical societies to advocate for harm reduction policies that provide civil and criminal immunity for the possession, distribution, and use of “drug paraphernalia” designed for harm reduction from drug use, including but not limited to drug contamination testing and injection drug preparation, use, and disposal supplies.

5. Our AMA will implement an education program for patients with substance use disorder and their family/caregivers to increase understanding of the increased risk of adverse outcomes associated with having a substance use disorder and a serious respiratory illness such as COVID-19.

6. Our AMA supports efforts to increase access to fentanyl test strips and other drug checking supplies for purposes of harm reduction.

Citation: Res. 526, A-06; Modified in lieu of Res. 503, A-12; Appended: Res. 909, I-12; Reaffirmed: BOT Rep. 22, A-16; Modified: Res. 511, A-18; Reaffirmed: Res. 235, I-18; Modified: Res. 506, I-21; Appended: Res. 513, A-22; Modified: Res. 211, I-22;