

Responding to Opioid Overdoses with Naloxone: A Toolkit for Ohio Schools

Introduction

Schools are required to be prepared to respond to a wide variety of [emergency situations](#). Opioid overdose is a life-threatening emergency. Resources are available to help schools prepare to respond to this emergency if it occurs in their buildings. While this toolkit includes currently available resources (March 2025), more resources are created on an ongoing basis and may not be included.

Overview

Every two hours, an Ohioan dies from an unintentional drug overdose ([Take Charge Ohio](#)). In 2023, there were 4,452 unintentional drug overdose deaths ([Ohio Department of Health](#)). The impact of substance use, substance use disorder, physical dependence, and both fatal and non-fatal overdose events touches all sectors of Ohio life, from jobs and economy, to healthcare, to the well-being of families, and to children.

Naloxone – also known as Narcan® – is a safe and easy-to-use life-saving measure that can reverse an opioid overdose. When administered during an overdose, naloxone blocks the effects of opioids on the brain and restores breathing. It is usually given as a nasal spray. Naloxone has no potential for abuse and if it is given to a person who is not experiencing an opioid overdose, it is harmless. Naloxone does not reverse overdoses that are caused by non-opioid drugs.

As with many other states, Ohio is embracing naloxone distribution and availability as a proven strategy to reduce overdose deaths. **Research shows that its widespread availability does not promote high-risk drug use among adolescents.** Rather, increased naloxone availability is mostly associated with decreases in adolescent drug use.¹

Thanks to the widespread availability of naloxone as part of Governor DeWine's multidisciplinary approach to combating the opioid epidemic, overdose rates have steadily decreased for two years in a row in 2022 and 2023, and we hope that further solidifying naloxone will help continue to build upon this momentum.

This resource guide is to support schools and school staff, including school nurses, in keeping naloxone on-site to administer in case an opioid overdose occurs on school premises. All resources are linked to the websites where they may be accessed.

¹ International Journal of Drug Policy. Vol. 114. April 2023. Science Direct: Naloxone expansion is not associated with increases in adolescent heroin use and injection drug use: Evidence from 44 US states.

Stock Naloxone in Schools

Schools are encouraged to consider stocking the emergency medication (naloxone) and ensure there are staff trained to use it. In order to implement these lifesaving measures, schools should consider a process that includes:

- Creation of a school policy that supports stocking naloxone in schools.
- Creation of a protocol that addresses the procurement, storage, staff training, replacement, when to call Emergency Medical Services (EMS)/9-1-1, required documentation, reporting of naloxone use, and after-action review.
- Procurement and placement of the naloxone. Include plan to track drug expiration dates, and verify if the naloxone is still available.
- Providing training to all school employees and contractors about opioids, overdose, and school policy.
- Providing training to designated school employees on how to administer the medication.

To assist schools in this process, sample school policies, protocols, and training resources may be found in the following pages.

SAMPLE POLICIES

Promoting Access to Naloxone – K-12 Sample Policy

The following are sample policies developed by the Ohio Board of Pharmacy, Ohio Department of Education and Workforce, and Ohio Department of Health. This document is broken up into two sections, depending on the type of naloxone access the school selects.

IMPORTANT: Schools may utilize one or several of these policies. It is up to the district or school to determine the best distribution strategy based upon the needs of its students.

Option 1:

Naloxone Cabinets for Emergency Use (e.g., [Naloxbox](#)²) – *This option allows a school to maintain a supply of naloxone in a readily available area for use during a suspected opioid overdose emergency. This option is similar to the availability of an automated external defibrillator (AED). NOTE: The cabinet may be in a publicly accessible area but may also be restricted to locations accessible by staff (e.g., principal's office, break room, coach's office, etc.).*

Option 2:

Equipping Staff with Naloxone for Emergency Use – *This option allows a school to maintain a supply of naloxone that is readily available to school staff for use during a suspected opioid overdose emergency. This could include training and equipping all staff or having designated staff trained to respond.*

For additional information and guidance, please review the [Ohio Board of Pharmacy's overdose reversal guidance document](#).

² This is an example of an emergency naloxone cabinet. The State of Ohio does not endorse a specific vendor.

Option 1: Naloxone Cabinets for Emergency Use (e.g., Naloxbox)

PURPOSE

The purpose of this policy is to establish guidelines and procedures governing the use of naloxone for emergency via cabinets maintained by the (SCHOOL/DISTRICT). This policy is intended to recognize the potential life-saving role bystanders can play when encountering persons suffering from an apparent opioid overdose.

DEFINITIONS AS USED IN THIS POLICY

EMS - “Emergency Medical Services” that provide pre-hospital emergency medical care; such practitioners provide out-of-hospital care for those with an illness or injury.

NALOXONE - Naloxone (commonly known as Narcan®) is a medication that can reverse an overdose caused by an opioid drug (heroin, illicit fentanyl, or prescription pain medications). When administered during an overdose, naloxone blocks the effects of opioids on the brain and quickly restores breathing. For the purposes of this policy, the (SCHOOL/DISTRICT) shall utilize naloxone administered intranasally.

OPIOID OVERDOSE – For the purposes of this policy, either one of the following:

- An acute condition resulting from consumption or use of an opioid (or a substance with which an opioid was combined) with symptoms which could include extreme physical illness, decreased level of consciousness, respiratory depression, coma, and/or death.
- An acute condition with one or more of the above symptoms which a layperson would reasonably believe to be an opioid-related drug overdose requiring medical assistance.

UNIVERSAL PRECAUTIONS - An approach to infection control to treat all human blood and certain human body fluids as if they were known to be infectious for blood borne pathogens.

POLICY

It is the policy of the (SCHOOL/DISTRICT) to aid, or assist in the aid of, any person(s) on school premises who may be suffering from an apparent opioid overdose. Designated employees who are trained in accordance with the policy shall make every reasonable effort, to include the use of naloxone, combined with calling 9-1-1 and rescue breathing, to the victim of any apparent drug overdose.

TRAINING

Upon installation of naloxone for emergency use, designated school employees shall be trained in responding to an opioid overdose and the use of naloxone by (SCHOOL/DISTRICT) staff or a person designated by (SCHOOL/DISTRICT) staff.

The SCHOOL/DISTRICT shall ensure that staff receive periodic refresher training. Training shall be conducted in accordance with current best practices for responding to an opioid overdose established by the Ohio Department of Health, the Centers for Disease Control and Prevention, or the local health department serving the district or school. Training videos are available on the Ohio Department of Health’s [Project DAWN website](#).

- 1) Training will address at minimum all of the following topics:
 - a) Risk factors for opioid overdose.
 - b) Signs and symptoms of opioid overdose.
 - c) Response to opioid overdose, including calling 9-1-1 and administering rescue breathing.
 - d) Procedures for assembling and administering naloxone.
 - e) Information on naloxone, including possible adverse reactions.
 - f) Use of universal precautions.
 - g) Follow-up care including:
 - i) Reporting the overdose in accordance with (SCHOOL/DISTRICT) policies.
 - ii) Ensuring that the overdose victim was transported to the emergency department.
 - iii) Notifying the appropriate student services.
 - iv) Providing substance use disorder resources to the overdose victim and family, as appropriate.
- 2) A designee for the (SCHOOL/DISTRICT) shall serve as the coordinator responsible for managing the naloxone cabinets.

NALOXONE CABINET CONTENTS

Each cabinet must include:

- Instructions for administering intranasal naloxone that include specific instructions to call EMS ([instructions for administration of naloxone](#)).
- Two doses of intranasal naloxone.
- One rescue breathing barrier device (pocket mask or face shield) with gloves and alcohol.

STORAGE AND REPLACEMENT

Inspection of cabinets installed by the (SCHOOL/DISTRICT) shall be the responsibility of the (SCHOOL/DISTRICT). In accordance with section 3715.50 of the Ohio Revised Code, such inspections shall be conducted within a reasonable time period.³ Schools may want to consider a daily check to ensure naloxone is available. The inspection process shall ensure the following:

- Each unit is securely fastened to a permanent structure.
- The naloxone is intact and not expired.
- Rescue breathing barrier device, gloves, and alcohol are present.
- SCHOOL/DISTRICT contact information along with signs of an opioid overdose are listed on the box.
- Instructions for use are present.
- The unit safety seal is functional.
- Naloxone is stored in accordance with manufacturer instructions to avoid extreme cold, heat, and direct sunlight as best possible.

³ Reasonable time period should be established in policy.

COMPLIANCE CHECKLIST ([ORC 3715.50 \(C\)](#))

The following are required by Ohio law ([ORC 3715.50\(C\)](#)) for the use of naloxone cabinets:

| | |
|--|--|
| | Provide to any individual who accesses the naloxone instructions regarding emergency administration of the drug, including a specific instruction to summon emergency services as necessary. |
| | Establish a process for replacing within a reasonable time period any naloxone that has been accessed. |
| | Store naloxone in accordance with the manufacturer's or distributor's instructions. |

LIABILITY PROTECTIONS

[ORC 3715.50 \(D\)](#) provides the following immunity protections “[i]f the authority granted by [the law] is exercised in good faith:”

- (1) The person or government entity exercising the authority is not subject to administrative action or criminal prosecution and is not liable for damages in a civil action for injury, death, or loss to person or property for an act or omission that arises from exercising that authority.
- (2) After an overdose reversal drug has been dispensed or personally furnished, the person or government entity is not liable for or subject to any of the following for any act or omission of the individual to whom the drug is dispensed or personally furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

Option 2: Equipping Staff with Naloxone for Emergency Use

PURPOSE

The purpose of this policy is to establish guidelines and procedures governing the use of emergency naloxone by appropriately trained staff of the (SCHOOL/DISTRICT). This policy is intended to recognize the potential life-saving role bystanders can play when encountering persons suffering from an apparent opioid overdose.

DEFINITIONS AS USED IN THIS POLICY

EMS - “Emergency Medical Services” that provide pre-hospital emergency medical care; such practitioners provide out-of-hospital care for those with an illness or injury.

NALOXONE - Naloxone (commonly known as Narcan®) is a medication that can reverse an overdose caused by an opioid drug (heroin, illicit fentanyl, or prescription pain medications). When administered during an overdose, naloxone blocks the effects of opioids on the brain and quickly restores breathing. For the purposes of this policy, the (SCHOOL/DISTRICT) shall utilize naloxone administered intranasally.

OPIOID OVERDOSE – For the purposes of this policy, either one of the following:

- An acute condition resulting from consumption or use of an opioid (or a substance with which an opioid was combined) with symptoms which could include extreme physical illness, decreased level of consciousness, respiratory depression, coma, and/or death.
- An acute condition with one or more of the above symptoms which a layperson would reasonably believe to be an opioid-related drug overdose requiring medical assistance.

UNIVERSAL PRECAUTIONS - An approach to infection control to treat all human blood and certain human body fluids as if they were known to be infectious for blood borne pathogens.

POLICY

It is the policy of the (SCHOOL/DISTRICT) to aid, or assist in the aid, any person(s) who may be suffering from an apparent opioid overdose. Employees trained in accordance with the policy shall make every reasonable effort, to include the use of naloxone, combined with calling 9-1-1 and rescue breathing, to the victim of any apparent drug overdose.

TRAINING

Prior to providing an overdose response kit, staff shall be trained in responding to an opioid overdose and the use of naloxone by (SCHOOL/DISTRICT) staff or a person designated by (SCHOOL/DISTRICT) staff.

The SCHOOL/DISTRICT shall ensure that staff receive periodic refresher training. Training shall be conducted in accordance with current best practices for responding to an opioid overdose established by the Ohio Department of Health, the Centers for Disease Control and Prevention, or the local health department serving the district or school. Training videos are available on the Ohio Department of Health's [Project DAWN website](#):

- 1) Training will address at minimum all of the following topics:
 - a) Risk factors for opioid overdose.
 - b) Signs and symptoms of opioid overdose.
 - c) Response to opioid overdose, including calling 9-1-1 and administering rescue breathing.
 - d) Procedures for assembling and administering naloxone.
 - e) Information on naloxone, including possible adverse reactions.
 - f) Use of universal precautions.
 - g) Follow-up care including:
 - i) Reporting the overdose in accordance with (SCHOOL/DISTRICT) policies.
 - ii) Ensuring that the overdose victim was transported to the emergency department.
 - iii) Notifying the appropriate student services.
 - iv) Providing substance use disorder resources to the overdose victim and family, as appropriate.
- 2) A designee for the (SCHOOL/DISTRICT) shall serve as the coordinator responsible for ensuring overdose reversal kits are not expired and contain all the required contents.

OVERDOSE REVERSAL KIT CONTENTS

Each overdose reversal kit must include:

- Instructions for administering intranasal naloxone that include specific instructions to call EMS ([instructions for administration of naloxone](#)).
- Two doses of intranasal naloxone.
- One rescue breathing barrier device (pocket mask or face shield) with gloves and alcohol.

STORAGE AND REPLACEMENT

The (SCHOOL/DISTRICT) shall develop a process where staff must inspect and confirm the following:

- The overdose reversal kit includes the required components.
- The naloxone is intact and not expired.
- Instructions for use are present.
- Naloxone is stored in accordance with manufacturer instructions to avoid extreme cold, heat, and direct sunlight as best possible.

The (SCHOOL/DISTRICT) shall develop a process where staff may request replacement supplies.

COMPLIANCE CHECKLIST ([ORC 3715.50 \(B\)](#))

The following are required by Ohio law ([ORC 3715.50\(B\)](#)) for the distribution of naloxone for use by staff:

| | |
|--|---|
| | The naloxone is in its original manufacturer's packaging. |
| | The naloxone's packaging contains the manufacturer's instructions for use. |
| | The naloxone is stored in accordance with the manufacturer's or distributor's instructions. |

LIABILITY PROTECTIONS

[ORC 3715.50 \(D\)](#) provides the following immunity protections “[i]f the authority granted by [the law] is exercised in good faith:”

- (1) The person or government entity exercising the authority is not subject to administrative action or criminal prosecution and is not liable for damages in a civil action for injury, death, or loss to person or property for an act or omission that arises from exercising that authority.
- (2) After an overdose reversal drug has been dispensed or personally furnished, the person or government entity is not liable for or subject to any of the following for any act or omission of the individual to whom the drug is dispensed or personally furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

Sample School Protocol for Naloxone Use

Use of Naloxone Protocol for Schools

SYMPTOMS

*Stay with individual.
Never leave alone.*

- Unconscious and not responding.
- Slow or shallow breaths (less than one breath every six seconds) or not breathing at all.
- Choking, snoring, or gurgling sounds.
- Discolored skin:
 - Ashy color in darker skin tones.
 - Blue color in fairer skin tones.
- Slow, erratic, or absent pulse.
- Vomiting.
- Seizures.



ACTION STEPS

- 1) **Check to see if they can respond:**
 - Shake them or call their name.
 - Rub your knuckles hard in the middle of their chest (“sternal rub”).
- 2) **Call 9-1-1.** Give the address and location to those who respond to an overdose.
- 3) **Give naloxone.**
 - Follow the instructions on the naloxone.
 - If the person does not respond in two to five minutes, give another dose.
- 4) **Give rescue breaths:** Place the person on their back, head tilted back and chin up. Make sure there is nothing in their mouth and pinch their nose closed. Breathe two slow breaths into their lungs (if available: use rescue breathing barrier device, pocket mask or face shield), making sure the chest rises.

MONITORING

Monitoring after 9-1-1 is called – Airway, Breathing, and Cardiac.

- Continue rescue breathing, one breath every five seconds.
- If the person is breathing on their own, put them in the recovery position and tilt their head back to keep their airway clear.

Stay with individual; alert healthcare professional, principal, and parent.

Note:

- Record time naloxone used and inform rescue squad upon arrival.
- Continue to keep on back with legs elevated above the heart. If difficulty breathing or vomiting present, let individual sit up or lie on side.
- Provide First Aid/CPR as necessary; AED if necessary and available.

Adapted from <https://odh.ohio.gov/know-our-programs/project-dawn/resources/projectdawn-brochure-english>.

School Use only:

School Administrator Authorization

Note: Administrator responsible for maintaining list of trained, designated personnel for naloxone.

Name/Title (Printed): _____ School Building: _____

Signature: _____ Date: _____

Additional Resources

Automated Dispensing Machines

Ohio law permits the use of automated dispensing machines for the distribution of naloxone. The following is a sample policy that provides an additional resource for schools to consider.

PURPOSE

The purpose of this policy is to establish guidelines and procedures governing the use of automated naloxone dispensing machines maintained by the (SCHOOL/DISTRICT). This policy is intended to recognize the potential life-saving role bystanders can play when encountering persons suffering from an apparent opioid overdose.

DEFINITIONS AS USED IN THIS POLICY

EMS - “Emergency Medical Services” that provide pre-hospital emergency medical care; such practitioners provide out-of-hospital care for those with an illness or injury.

NALOXONE - Naloxone (commonly known as Narcan®) is a medication that can reverse an overdose caused by an opioid drug (heroin, illicit fentanyl, or prescription pain medications). When administered during an overdose, naloxone blocks the effects of opioids on the brain and quickly restores breathing. For the purposes of this policy, the (SCHOOL/DISTRICT) shall utilize naloxone administered intranasally.

OPIOID OVERDOSE – For the purposes of this policy, either one of the following:

- An acute condition resulting from consumption or use of an opioid (or a substance with which an opioid was combined) with symptoms which could include extreme physical illness, decreased level of consciousness, respiratory depression, coma, and/or death.
- An acute condition with one or more of the above symptoms which a layperson would reasonably believe to be an opioid-related drug overdose requiring medical assistance.

UNIVERSAL PRECAUTIONS - An approach to infection control to treat all human blood and certain human body fluids as if they were known to be infectious for blood borne pathogens.

POLICY

It is the policy of the (SCHOOL/DISTRICT) to provide resources to aid, or assist in the aid, any person(s) who may be suffering from an apparent opioid overdose.

REQUIREMENTS OF AUTOMATED DISPENSING MACHINES

Per [ORC 3715.50\(C\)\(2\)](#), each school providing the automated mechanism must:

- 1) Ensure that the mechanism is securely fastened to a permanent structure or is of an appropriate size and weight to reasonably prevent it from being removed from its intended location.
- 2) Provide to any individual who accesses the supply instructions regarding emergency administration of the drug, including a specific instruction to summon emergency services as necessary ([instructions for administration of naloxone](#)).
- 3) Develop a process for monitoring and replenishing the supply maintained in the automated mechanism.
- 4) Store the naloxone in accordance with the manufacturer’s or distributor’s instructions.

TRAINING

Upon installation of an automated machine, staff and students shall be trained in responding to an opioid overdose and the use of naloxone by (SCHOOL/DISTRICT) staff or a person designated by (SCHOOL/DISTRICT) staff.

The SCHOOL/DISTRICT shall ensure that staff and students receive periodic refresher training. Training shall be conducted in accordance with current best practices for responding to an opioid overdose established by the Ohio Department of Health, the Centers for Disease Control and Prevention, or the local health department serving the district or school. Training videos are available on the Ohio Department of Health's [Project DAWN website](#):

- 1) Training will address at minimum all of the following topics:
 - a) Risk factors for opioid overdose.
 - b) Signs and symptoms of opioid overdose.
 - c) Response to opioid overdose, including calling 9-1-1 and administering rescue breathing.
 - d) Procedures for assembling and administering naloxone.
 - e) Information on naloxone, including possible adverse reactions.
 - f) Use of universal precautions.
 - g) Follow-up care including:
 - i) Reporting the overdose in accordance with (SCHOOL/DISTRICT) policies.
 - ii) Ensuring that the overdose victim was transported to the emergency department.
 - iii) Notifying the appropriate student services.
 - iv) Providing substance use disorder resources to the overdose victim and family, as appropriate.
- 2) A designee for the (SCHOOL/DISTRICT) shall serve as the coordinator responsible for managing the automated machine.

MONITORING AND REPLACEMENT

Per [ORC 3719.50 \(C\)\(2\)](#), the (SCHOOL/DISTRICT) shall develop a process for monitoring and replenishing the supply maintained in the machine. The monitoring and replacement process shall ensure the following:

- The naloxone is intact and not expired.
- Instructions for use are present.
- Naloxone is stored in accordance with manufacturer instructions to avoid extreme cold, heat, and direct sunlight as best possible.

COMPLIANCE CHECKLIST (ORC 3715.50 (C))

The following are required by Ohio law (ORC 3715.50(C)(2)) for the use of automated machines:

| | |
|--|--|
| | Ensure that the mechanism is securely fastened to a permanent structure or is of an appropriate size and weight to reasonably prevent it from being removed from its intended location. |
| | Provide to any individual who accesses the supply instructions regarding emergency administration of the drug, including a specific instruction to summon emergency services as necessary. |
| | Develop a process for monitoring and replenishing the supply maintained in the automated mechanism. |
| | Store the naloxone in accordance with the manufacturer's or distributor's instructions. |

LIABILITY PROTECTIONS

ORC [3715.50 \(D\)](#) provides the following immunity protections “[i]f the authority granted by [the law] is exercised in good faith:”

- (1) The person or government entity exercising the authority is not subject to administrative action or criminal prosecution and is not liable for damages in a civil action for injury, death, or loss to person or property for an act or omission that arises from exercising that authority.
- (2) After an overdose reversal drug has been dispensed or personally furnished, the person or government entity is not liable for or subject to any of the following for any act or omission of the individual to whom the drug is dispensed or personally furnished: damages in any civil action, prosecution in any criminal proceeding, or professional disciplinary action.

Additional Ohio Resources

RecoveryOhio

RecoveryOhio aspires to save and improve the lives of all Ohioans impacted by mental health challenges and substance use disorders. Governor Mike DeWine's RecoveryOhio team works alongside state agencies, boards, and commissions to help Ohioans during the evolving substance use and overdose crisis.

The goals are to create a system to help make treatment available to Ohioans in need, provide support services for those in recovery and their families, offer direction for the state's prevention and education efforts, and work with local law enforcement to provide resources to fight illicit drugs at the source.

- Priorities are:
 - Stigma reduction and education.
 - Workforce development.
 - Prevention.
 - Harm reduction.
 - Treatment and recovery.
 - Parity.
 - Public safety.
 - Data measurement.
 - [2023 Annual Review](#).
- [RecoveryOhio 2024-2027 Strategic Plan](#).

Take Charge Ohio

Public awareness and educational materials please see [Take Charge Ohio](#).

- [Naloxone resource information](#).

Ohio Board of Nursing

- Joint Regulatory Statement: [Prescription of naloxone to high-risk individuals and third parties who are in a position to assist an individual who is experiencing opioid-related overdose. \(2015\)](#).

Ohio Board of Pharmacy

- [Ohio pharmacies dispensing naloxone without a prescription](#). Provides a list of Ohio licensed pharmacies which dispense naloxone pursuant to [OAC 4729:1-3-04](#).
- [Overdose reversal drugs definitions](#).
 - A government entity may:
 - Purchase, possess, distribute, dispense, personally furnish, sell, or otherwise obtain or provide an overdose reversal drug.
 - Obtain and maintain a supply of an overdose reversal drug for use in emergency situations.
 - Provide to any individual who accesses the supply, instructions regarding emergency administration of the drug, including specific instructions to summon emergency services.

Ohio Department of Mental Health and Addiction Services

- [Services and resources](#).
- [Beat the Stigma \(Ohio Opioid Education Alliance\)](#).
- Children/youth and mental illness or addiction.
 - [Start Talking! Talk to Kids About Drugs](#).
 - [Start Talking! For Schools](#).

Naloxone Ohio

Provides a one-stop website to Ohioans with a simplified process of accessing naloxone. The website promotes the goal of providing ongoing access to naloxone and offers resources for Project DAWN sites, law enforcement agencies, or community members to make access to this lifesaving medication as seamless as possible.

- [Get free naloxone and fentanyl test strips](#).
- [What is naloxone?](#)
- [What is an opioid?](#)
- [How to administer naloxone](#).

Ohio Department of Health (ODH)

- [School Nursing Program](#) The School Nursing Program supports the provision of quality health services in schools to promote student health and success. In addition, the School Nursing Program assists schools with an emergency preparedness, including overdose prevention. Contact us at 614-466-1930 or send an email to BCFH@odh.ohio.gov. In addition to providing technical assistance, they also provide conferences, [online independent study courses](#), [train-the-trainer courses](#), and [other resources](#).
- [OH Against OD \(Ohio Against Overdoses\)](#).
 - [Know The Signs](#).
 - [Good Samaritan Law](#).
 - [Tips and education](#).
 - [Help and resources](#).
 - [Myths and Facts](#).
- [Project DAWN](#) (Deaths Avoided with Naloxone).
 - Naloxone/fentanyl test strip distribution program.
 - Provides opioid overdose education and harm reduction services.
 - There are about 200 [Project DAWN programs](#) across Ohio.
 - Open to all Ohioans.
 - No-cost take-home naloxone kits.

Ohio Narcotics Intelligence Center (ONIC)

- **What is ONIC?**
- ONIC leverages cutting-edge technologies and analytical techniques to detect, identify, and intercept dangerous drugs. ONIC Public Outreach-the ONIC publishes [awareness bulletins](#) and videos on a wide range of topics for both law enforcement and broader audiences.

Ohio Department of Public Safety

- Drug Resilience Education Awareness Mentorship ([DREAM](#)) is a K-12 video series focused on National Health Education Standards, the Ohio Department of Education and Workforce's Health and Social and Emotional Learning requirements, developing resiliency and decision-making skills, and role-playing opportunities.

National Resources

National Association of School Nurses (NASN)

- [Position statement](#): Opioid Overdose Reversal Medication and Care in the School Setting. (June 2024).
- [Naloxone Education for School Nurses Toolkit. \(NASN, 2023\).](#)
Shared with permission by the National Association of School Nurses. The NASN 2023 toolkit includes:
 - **Creating a naloxone program in your school.**
 - Naloxone in the school setting - NASN position statement.
 - Questions to consider in development of a naloxone in school program.
 - Creating a naloxone policy.
 - Sample report of naloxone administration.
 - Naloxone in school policy and procedure resources.
 - **Campus protocols for emergency administration.**
 - Nasal naloxone (Narcan) administration protocol.
 - Injectable naloxone administration protocol.
 - Nasal naloxone (Narcan) administration training handout.
 - Injectable naloxone administration training handout.
 - **Communication resources.**
 - Presentation: Naloxone in schools.
 - Presentation: Safeguarding your community: Opioid overdose response with naloxone.
 - Presentation: Naloxone in schools: Training for school staff.
 - Words matter – Terms to use and avoid when talking about addiction.
 - **Acknowledgments:** Information about overdoses in the *Naloxone Education for School Nurses Toolkit* was created in collaboration with the National Institute on Drug Abuse, National Institutes of Health.

U. S. Centers for Disease Control and Prevention (CDC)

- [Overdose prevention.](#)
 - [Naloxone Toolkit](#) (CDC, 2022).
 - Talking about naloxone.
 - Assessing risk factors for opioid overdose.
 - Engaging patients in a conversation about naloxone.
 - Reducing the stigma surrounding naloxone.
 - Interactive patient cases.
 - Conversation starters (resources).

Substance Abuse and Mental Health Services Administration

- [Opioid overdose reversal medications.](#) (2024).
- [Substance Abuse and Mental Health Services Administration Library.](#)
- [Overdose prevention and response toolkit.](#) (2024).

National Institute of Drug Abuse

Items available to download or order:

- [Drugs, brains, and behavior: The science of addiction.](#) (2020).
- [Fentanyl drug facts.](#) (2021).
- [Heroin research report.](#) (2018).
- [Medications to treat opioid use disorder research report.](#) (2021).
- [Misuse of prescription drugs research report.](#) (2020).
- [Naloxone drug facts.](#) (2022).
- [Prescription opioids and heroin research report.](#) (2018).
- [Prescription opioids drug facts](#) (2021).
- [Tobacco, alcohol, prescription medication, and other substance use tool.](#)
- [Understanding drug use and addiction drug facts.](#) (2018).