

EMS Information Bulletin 2025-08

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FROM: Anthony L. Martin, Director

TO: PA Regional EMS Councils

PA EMS Agencies & Providers

SUBJECT: Guidance for EMS Providers and Agencies Regarding Act 34 of 2025

DATE: September 5, 2025

Act 34 of 2025 was passed on July 7, 2025, and is effective on September 5, 2025. This legislation amends the Pennsylvania Pharmacy Act to allow EMS providers to distribute dose packages of naloxone, or another comparable medication as determined by the Department of Health (DOH) in a standing order for the public. Specifically, it permits distribution to a family member, a friend, or another individual who can assist a patient who has experienced an opioid overdose. This may include the patient treated by EMS for an overdose. EMS must determine that distributing naloxone is appropriate based on the immediate circumstances surrounding the event or other conditions (e.g., pharmacy accessibility). The authority for EMS leave behind was originally granted through DOH's Naloxone Standing Order for First Responders but is now granted through Act 34. Therefore, an updated Naloxone Standing Order for First Responders that focuses on firefighters and law enforcement was issued in its place. The Naloxone Standing Order for the Public remains in place.

Some formulations of naloxone are available over the counter. Accordingly, EMS providers who previously obtained and distributed naloxone may continue to acquire naloxone using the same procedures and channels as before. Formulations of naloxone that EMS providers can acquire and distribute are included in the most up to date Naloxone Standing Order for the Public located on the DOH website. The formulations of naloxone listed in the standing order can be obtained through your single county authority (SCA) or an overdose prevention partner located near the EMS provider.

Naloxone saves lives, and DOH encourages EMS providers to adopt naloxone leave behind practices. However, EMS providers are not required to stock dose packages for distribution. Act 34 protects EMS providers from liability should they choose not to stock or distribute the dose packages. But, if EMS providers stock and distribute the dose packages, they are required to record the date and dosage on the back of the package prior to distribution or, the date and dosage can be recorded elsewhere, if the information can be readily available. EMS providers are not required to record any personally identifiable information about to whom the package was distributed.

Frequently Asked Questions:

1. If there are two doses in one box of naloxone (e.g., as seen with Narcan – two doses of 4mg/0.1mL in one box), do I distribute the entire box or just one dose in the box?

You can either distribute one dose or the entire box (two doses). However, when distributing either one or two doses, you must ensure that the requirements of <u>Act 34 of 2025</u> are fulfilled. This includes writing the date and dose on the back of the package or recording this information on another appropriate, uniformly maintained and readily retrievable record.

2. Where can my agency get the packages of naloxone to leave behind? How much would this cost my agency?

Your agency can get formulations of naloxone listed on the <u>Naloxone Standing Order for the Public</u>:

- Through your <u>SCA</u>, if the <u>SCA</u> is a designated overdose prevention partner in your county, or
- From any of the state's network of <u>distribution partners</u>, known as overdose prevention partners.

If you acquire naloxone through a partner, this is no cost to your agency, as this would be through the Pennsylvania Department of Drug and Alcohol Program's <u>Overdose Prevention Program</u>.

EMS agencies that previously obtained and distributed naloxone may continue to acquire naloxone using the same procedures and channels as before.

3. Are there any requirements for the record of the date and dosage if EMS personnel do not want to record this information on the back of a dose package?

Other than the requirements for it to be readily retrievable and uniformly maintained, there are no other requirements. The way EMS providers record this information is up to the discretion of the EMS agency. If EMS agencies would like guidance on possible recording mechanisms, please reach out to DOH or your Regional EMS Council.

4. If EMS personnel do not want to record the date and dose on the back of the package, can this information be recorded in the patient care record (PCR) if the dose was left behind for the individual that was cared for during an opioid overdose event?

No, you should not record the date and dosage in an individual's PCR. The date and dosage need to be readily available per the Act, which cannot be achieved due the confidentiality of PCRs.