

Naloxone (Narcan) Request Form for Iowa Organizations and Businesses

To help address the issue of opioid misuse, the Iowa Department of Public Health (IDPH) is launching a new initiative. Funded through the State Opioid Response (SOR 2) grant, IDPH is offering eligible organizations and businesses free Narcan kits, the nasal spray version of naloxone (the opioid overdose reversal medication). The purpose of this initiative is to equip organizations and businesses in the event that they encounter someone experiencing a suspected opioid overdose. While the hope is there would never be a need for the use of Narcan, having this medication available as part of a first-aid response could save someone's life.

Eligible organizations and businesses may include: retail/convenience stores; libraries; restaurants; bars, community or social-services; event venues; and mobile service providers. In the event that an organization or business type not listed believes they have a need for Narcan kits, an [exception request](#) can be submitted to the [SOR Helpdesk](#) for consideration.

To complete the process of requesting Narcan kits, it is necessary that an individual with the authority to represent the organization/business indicate acceptance of the following criteria.

- 1) This organization/business has or will obtain training on proper naloxone administration to anyone allowed to administer naloxone received from by the Iowa Department of Public Health through this agreement.
- 2) This organization/business understands the essential components of opioid-related overdose, appropriate overdose response, naloxone storage conditions, and naloxone administration.
- 3) This organization/business understands that naloxone provided through this request cannot be distributed or redistributed in any way (given away, sold, traded, etc.) to anyone outside the organization/business and is intended only for use by staff, volunteers, or others trained in its use.
- 4) This organization/business understands that the purpose of this opportunity is to provide naloxone to be used as part of a response to a suspected opioid overdose, only in the event that other policies, laws, licenses or scope of practice does not prohibit this from occurring.
- 5) This organization/business understands that the use of naloxone is not meant to be an alternative to contacting emergency medical services. Due to concerns involving a return of overdose symptoms, always contact 911 when administering naloxone.

Completed forms are to be emailed to RaChel Greenwood at rachel.greenwood@idph.iowa.gov.

A maximum of five (5) kits per location or per eligible staff member, may be requested. If kits are requested for more than one location, please provide a list of the different locations and include the following information:

- Address
- Name of contact person
- E-mail/phone number of contact person
- Number of kits requested

All of the kits requested will be sent to the mailing address listed below.

By signing this request, I attest that I understand and agree to the criteria specified above and further attest that I have the authority to represent this organization/business. I also understand that my request will be reported to the Iowa Board of Pharmacy, under my name, but will not be reported to the state's Prescription Drug Monitoring Program (PDMP).

Name of Organization/Business: _____

Type of Organization/Business: _____

Number of Iowa locations: _____

Mailing Address (for Narcan shipment): _____

Total number of kits requested: _____

Printed Name – Organization/Business Representative: _____

Signature – Organization/Business Representative: _____

Date: _____