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TRAINING BULLETIN

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FENTANYL OVERDOSES

In the past, the Training Section has released several training bulletins related to Fentanyl, the harm it causes people who encountered it and the fact there have been several overdoses throughout Kern County.

Recently the Training Section received statistical information from the Kern County Coroner's office regarding an alarming number of deaths in Kern County with Fentanyl being a contributing factor. The following is a short list of stats collected for the first quarter of 2021:

- January 2021 – There were 21 deaths and the average age was 37 years old.
- February 2021 – There were 9 deaths and the average age was 38 years old.
- March 2021 – There were 18 deaths and the average age was 41 years old.
- April 2021 – There were 9 deaths and the average age was 44 years old.

Their ages ranged from 14 years old to 69 years old. The Coroner's Office did see an increase in Fentanyl overdose in 2020; however, in 2021, most of the drug overdoses have a Fentanyl component to them. Specifically, the Coroner's Office is seeing a lot of methamphetamine, heroin, and cocaine mixed with Fentanyl. The locations of the deaths are throughout all of Kern County and not in one generalized location.

One large concern is Acetyl Fentanyl. This form of Fentanyl is 15 times more potent than other forms of Fentanyl and is considered a designer drug. Although we do not have a lot of stats regarding this designer drug, the three deaths involving this drug were females.

Law enforcement officers should use caution when approaching a scene with Fentanyl present; the substance can be absorbed through the skin and through inhalation of airborne powder. Fentanyl can be fatal if swallowed, inhaled, or absorbed through the skin. If Fentanyl comes in contact with the skin, it can enter the body through inadvertent touching of the mouth, nose, or other mucous membrane. It is important to wash your hands to limit the possibility of exposure. Hand Sanitizer should not be used. Fentanyl should be handled with nitrile gloves and other personal protective equipment. Naxalone (Narcan), an opioid antagonist, can be used to counter Fentanyl's effects and can be administered intravenously, intramuscularly, or subcutaneously. When administered quickly and effectively, Narcan restores breathing to a victim in the throes of a heroin or opioid overdose.

The Sheriff's Office Narcotics Division stated they have seized approximately 127,000 Fentanyl pills so far this year. Narcotics detectives stated the dealers are cutting the Fentanyl into their methamphetamine, cocaine and heroin, and they are not doing this through a clinically approved manner. In the end, some users do not realize Fentanyl is present in their drug of choice or they do not realize how much Fentanyl is present.

If you encounter fentanyl or suspected fentanyl and are unsure how to handle the substance, please contact detectives from the Narcotics Division.

For further information, refer to Training Bulletin 18-23 – Fentanyl Exposure Risk.

For further information on Narcan, refer to Training Bulletin 18-34 – Narcan Update and Policy Update.

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
- National Volunteer Fire Council
- Police Executive Research Forum
- Police Foundation