

# Fentanyl Exposure: Knowing the Facts as a Law Enforcement Officer

Companion to Video Publication

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With the rise in overdose cases, law enforcement, criminal justice agencies, and public health sectors are collaborating to better serve the public and improve outcomes for those struggling with substance misuse. However, these evolving responsibilities come with new occupational safety risks, and without proper training and education, they can result in unnecessary physical and mental harm for officers. This paradigm shift necessitates adopting an evidence-based approach to ensure the safety of first responders and the community. Jurisdictional policies on response protocol as well as evidence handling may vary, impacting the techniques used to remain safe in the field and further underscoring the importance of a well-informed response.

This publication accompanies the video *Fentanyl Exposure: Knowing the Facts as a Law Enforcement Officer*, part of a series that emphasizes the importance of effective tools and evidence-based training to manage high-risk health situations, particularly in relation to the concerns that law enforcement officers may have about fentanyl exposure and needlestick injuries.

## Addressing Fentanyl Exposure in the Field

One specific concern in the field is an officer's potential exposure to fentanyl, a potent synthetic opioid. The number of service calls related to opioid-related overdoses remains high, and a considerable proportion are due to the presence of fentanyl. It is thus imperative to equip officers with the right tools and training to handle such situations safely and effectively while dispelling misconceptions that could lead to undue anxiety or misinformed actions.

It is a common misconception that touching or breathing in fentanyl will cause an overdose. Research shows fentanyl cannot break the skin barrier unless it is through a patch, commonly used in medical environments, which can take significant time to enter the body. Breathing in fentanyl from the air is not highly risky; even an exposure lasting more than an hour would amount to a normal medical dose. Doctors and nurses are constantly exposed to fentanyl through patient contact, but there have not been cases of them overdosing. The real chance of overdosing by just being around fentanyl is very low.

## Understanding Symptoms of an Overdose

It is crucial to recognize the common signs of an opioid overdose in order to act quickly. Signs of an opioid overdose include unresponsiveness to stimuli, shallow or absent breathing, gurgling sounds, bluish-gray lips and fingernails, and pinpoint-sized pupils. However, the small-pupil symptom might not apply if stimulants are also involved.

If an officer does get powder on their hands, they should wash their hands with soap and water and follow their department's policies and procedures. While fentanyl cannot cross the skin barrier without chemical assistance, it can enter the bloodstream through mucus membranes. It is recommended to avoid touching the nose, mouth, or eyes with your fingers.

It is still important to carry naloxone, the opioid overdose antidote, and understand the signs of an opioid-related overdose.

## Administering Naloxone

Administering naloxone to someone who has overdosed, in conjunction with rescue breathing, can save their life. Naloxone poses no health risks and may be available to law enforcement and first responders through local and state health departments. It is most commonly used as a nasal spray but can also be injected into the muscle. It is important for first responders to carry naloxone, since it counteracts all opioids in an overdose.

After naloxone is administered, the person's breathing should be supported through rescue breaths and their response monitored. If there is no response to the first dose, subsequent doses can be administered after 2 to 5 minutes. Training in and access to naloxone can be obtained through the local

or state department of health and emergency medical services partners. More information can also be found in the Bureau of Justice Assistance's Law Enforcement Naloxone Toolkit.<sup>1</sup>

Naloxone can play a vital role in reducing overdoses. The accompanying video delves deeper into understanding the symptoms of an overdose and how to administer naloxone, thereby creating a safer environment for both the public and law enforcement officers.

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*"If you or your colleague are exposed to fentanyl and are consciously aware of the symptoms, then it's not an opioid related overdose. If you experience heavy breathing or rapid shallow breathing, racing heart, or even panic attack symptoms, it's still important that you seek medical attention, but those are not the symptoms of an opioid related overdose."*

—Dr. Brandon del Pozo, SHIELD Training Initiative

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## Endnote

1. Bureau of Justice Assistance (BJA) National Training and Technical Assistance Center (NTTAC), (n.d.), Law Enforcement Naloxone Toolkit: Acquiring Naloxone, U.S. Department of Justice, Office of Justice Programs, BJA, <https://bjatta.bja.ojp.gov/tools/naloxone/Acquiring-Naloxone>.

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Visit the Comprehensive Opioid, Stimulant, and Substance Use Program (COSSUP) Resource Center at [www.cossup.org](http://www.cossup.org).

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