Harm Reduction Laws in the United States

State laws can both increase and reduce harms related to drugs and drug use. All U.S. states continue to rely primarily on a punitive approach to people who use certain drugs, with most criminalizing not only the possession, distribution, and use of those drugs but also the possession and distribution of devices used to consume them and check them for adulterants such as fentanyl.

Consistent access to new injection and inhalation supplies is critical to prevent the transmission of HIV, viral hepatitis, and other communicable diseases among people who use drugs, and to prevent subsequent infection of sexual partners, children, and others. Drug checking equipment can help inform people who use drugs about the content of those drugs, leading them to make more informed decisions about their drug use. Laws that criminalize the possession and distribution of these objects lead to increases in preventable injuries and deaths. Similarly, state laws governing prescription medications make it difficult for community groups, harm reduction organizations, and similar entities to distribute naloxone, and a variety of laws designed to punish people who use drugs discourage those who are experiencing or witnessing an overdose to call for help.

Most states have passed laws designed to mitigate some of the impact of criminalization. There is great variation in the presence and specifics of these laws, which can create confusion among both people who use drugs and people and organizations working to ensure that they have the supplies they need to protect themselves and others. This document is designed to reduce this information gap and help individuals and organizations better understand how the legal landscape in their state may impact access to harm reduction services and supplies and emergency medical assistance in an overdose.

Specifically, this document includes detailed information regarding laws related to the possession and distribution of injection and smoking equipment, drug checking equipment, naloxone access, statewide naloxone standing orders, and overdose Good Samaritan overdose protections in all 50 states and the District of Columbia. For each state, each area of law is briefly explained in plain language. The relevant citation is also listed, together with a hyperlink that will take the reader to the text of the law. All information is current as of August 1, 2023.
Alabama

Legality of Injection and Smoking Equipment

- It is illegal to use, possess with intent to use, sell, or deliver drug paraphernalia in Alabama if the person knows that it will be used in violation of the law. Ala. Code § 13A-12-260.
- Any equipment, products, and materials which are used, intended for use, or designed for use in inhaling a controlled substance in violation of the law are considered drug paraphernalia. Ala. Code § 13A-12-260(a).
- Hypodermic needles, syringes, and similar objects are considered drug paraphernalia if used, intended for use, or designed for use in injecting controlled substances into the body in violation of the law. Ala. Code § 13A-12-260(a)(11).
- Possession or use of drug paraphernalia is a class A misdemeanor. Ala. Code § 13A-12-260(c).
  - Class A misdemeanors are punishable by up to one year in county jail. Ala. Code § 13A-5-12(a)(1). A convicted individual can also be ordered to pay a fine of up to $6,000. Ala. Code § 13A-5-12(a)(1).
- Delivery, sale, or possession/manufacture with intent to deliver or sell drug paraphernalia is a Class A misdemeanor for a first-time offense. Ala. Code §§ 13A-12-260(c)-(e).
  - Class A misdemeanors are punishable by up to one year in county jail. Ala. Code § 13A-5-7(a)(1). A convicted individual can also be ordered to pay a fine of up to $6,000. Ala. Code § 13A-5-12(a)(1).
- A prescription is not required to possess a syringe, and state law does not regulate the retail sale of syringes.
- There is no law authorizing syringe access programs.

Legality of Drug Checking Equipment

- Any equipment, products, and materials which are used, intended for use, or designed for use in testing or analyzing a controlled substance in violation of the law are considered drug paraphernalia. Ala. Code § 13A-12-260(a).
- As noted above, possession, use, delivery and sale of paraphernalia are Class A misdemeanors. Ala. Code § 13A-12-260(c).
As of June 1, 2022, there is a carveout for certain drug checking equipment. Specifically, “a person may possess, deliver, or sell testing equipment designed to detect the presence of fentanyl or any synthetic controlled substance fentanyl analogue.” Ala. Code § 13A-12-260(f).

Naloxone Access Law

Alabama’s naloxone access law defines “opioid antagonist” as “naloxone hydrochloride or other similarly acting drug that is approved by the federal Food and Drug Administration for the treatment of an opioid overdose.” Ala. Code § 20-2-280(a).

A dentist or physician may prescribe an opioid antagonist directly or by standing order. Ala. Code § 20-2-280(b).

A pharmacist or registered nurse employed by a state or local health department may dispense an opioid antagonist to a person at risk of overdose or a family member, friend, first responder, or other person able to help someone experiencing an overdose. Ala. Code § 20-2-280(b).

The prescriber may, but is not required to, require a written communication that the individual seeking the opioid antagonist is at risk of opiate-related overdose or might be in a position to assist such an individual. Ala. Code § 20-2-280(c).

An individual who receives an opioid antagonist prescribed under the law may administer the opioid antagonist to another person if they exercise reasonable care and administer the antagonist in a good faith belief that the other individual is experiencing an opiate-related overdose. Ala. Code § 20-2-280(d).

The following individuals are provided with civil and criminal immunity for any actions authorized by the law:

- A physician or dentist who prescribes an opioid antagonist and who has no managerial authority over the individuals administering the opioid antagonist; Ala. Code § 20-2-280(e)(1).
- The State Health Officer or any county health officer who issues standing orders for opioid antagonists; Ala. Code § 20-2-280(e)(1).
- An individual who administers an opioid antagonist; Ala. Code § 20-2-280(e)(2).
- A pharmacist, or registered nurse in the employment of the State Health Department or a county health department, who dispenses an opioid antagonist. Ala. Code § 20-2-280(e)(3).

Naloxone Standing Order

State law explicitly permits the State Health Officer, as well as county health officers, to publish the standing order permitted by Ala. Code § 20-2-280, including any necessary guidelines or other requirements. Ala. Code § 20-2-283.

The State Health Officer has issued a standing order for naloxone distribution, which is available here.

The order permits pharmacies to distribute both naloxone and nalmefene, which it refers to as “opioid reversal agents,” to people at risk of opioid overdose and those who may be in a position to assist such an individual.

The order permits pharmacists to provide intranasal naloxone with atomizer (two pre-filled 2mg/2mL syringes and two MADs), intranasal spray, intranasal nalmefene spray, and intramuscular naloxone in 1mL vials.
» The recipient is required to complete a sign a form attesting that they are at risk of opioid overdose or may be in a position to assist and that they’ve received information on how to recognize and respond to an overdose, and that they’ve been offered certain information.
» The state will mail naloxone and fentanyl test strips at no cost to individuals who complete a brief training. The training is available [here](#).

**Overdose Good Samaritan Law**

» If, at the scene of an emergency, a person acts in good faith under the reasonable belief that they were the first person to call for medical help, uses their own name when calling for help, and remains with the person who needed help until help arrives, they may not be prosecuted for a misdemeanor controlled substance offense if the only reason the police knew of the offense was because that person sought medical help for another person. [Ala. Code § 20-2-281(b)](#).
» The law does not provide any immunity for the person who overdosed.
» The law’s protections do not apply to violations of [Ala. Code § 32-5A-191](#), which prohibits drunk and drugged driving.

**Alaska**

**Legality of Injection and Smoking Equipment**

» There are no state laws prohibiting the possession or distribution of any type of drug paraphernalia, including syringes and smoking equipment. However, some municipalities have made possession and/or distribution of paraphernalia a crime under local law.
» There is no specific law authorizing or forbidding syringe access programs.

**Legality of Drug Checking Equipment**

» There are no state laws prohibiting the possession or distribution of any type of drug paraphernalia, including syringes and smoking equipment. However, some municipalities have made possession and/or distribution of paraphernalia a crime under local law.

**Naloxone Access Law**

» An “opioid overdose drug” is defined as “a drug that reverses, in whole or in part, the pharmacological effects of an opioid overdose.” [Alaska Stat. § 17.20.085(e)(3)](#).
» Alaska permits a prescriber to prescribe “an opioid overdose drug” to any person at risk of overdose or a friend, family member, caregiver, or other person in a position to administer naloxone, directly or by standing order or protocol. [Alaska Stat. § 17.20.085(a)](#).
» The receipt, possession, and distribution of an opioid reversal drug by “an employee or volunteer of an opioid overdose program, if acting under a standing order or protocol” is permitted. [Alaska Stat. § 17.20.085(b)](#).
» A pharmacist may independently prescribe and administer an opioid overdose drug if the pharmacist has completed an opioid overdose drug training program approved by the board of pharmacy and otherwise complies with the standards established by the board. [Alaska Stat. § 08.80.168(b)](#).
» A prescriber or an employee or volunteer of an opioid overdose program is not liable for civil damages “resulting from an act or omission in prescribing or providing an opioid overdose


Drug” so long as each person who received the naloxone was given training on its use. Alaska Stat. § 09.65.340(a).

» A person who administers naloxone to a person they reasonably believe is experiencing an opioid overdose is not liable for civil damages. Alaska Stat. § 09.65.340(b).

» For all groups, immunity does not apply to damages “that are the result of gross negligence or intentional misconduct.” Alaska Stat. § 09.65.340(c).

Naloxone Standing Order

» Alaska law permits both “a health care provider authorized to prescribe an opioid overdose drug” and the “chief medical officer of the department” to issue standing orders for an opioid overdose drug. Alaska Stat. §§ 17.20.085(a), (c).

» The Chief Medical Officer of the Department of Health and Social Services has issued a standing order, which is available here.

» This standing order does not authorize pharmacies to distribute naloxone, but instead authorizes any approved Department of Health and Social Services Project HOPE Overdose Response Program (ORP) to maintain opioid overdose rescue kits to distribute or administer to a person at risk of experiencing an opioid overdose or a family member, friend, caregiver, or other person in a position to help a person at risk of experiencing an opioid overdose.

» The order authorizes 4mg nasal spray Narcan and generics as well as 8mg nasal spray Kloxxado and generics.

Overdose Good Samaritan Law

» A person may not be prosecuted for certain offenses related to possession, use, or display of a controlled substance so long as they sought help in good faith for another person and they meet the following criteria:
  o the evidence supporting the prosecution was obtained or discovered as a result of the person seeking medical or law enforcement assistance; Alaska Stat. § 11.71.311(a)(1)(A).
  o the person calling for help reasonably believed that the other person was experiencing an overdose; Alaska Stat. § 11.71.311(a)(1).
  o the person calling for help remained at the scene; Alaska Stat. § 11.71.311(a)(1)(B), and
  o the person calling for help cooperated with medical or law enforcement personnel, including providing identification. Alaska Stat. § 11.71.311(A)(1)(C).

» A person may not be prosecuted for certain types of possession, use, or display of a controlled substance if they call for help for themselves when they are experiencing an overdose, and evidence for the prosecution was discovered because of the overdose and the need for medical help. Alaska Stat. § 11.71.311(a)(2).

» Seeking medical assistance for another person “who was experiencing a drug overdose contemporaneously with the commission of the offense” may be considered by a court in sentencing for a person convicted of a violation of the state controlled substance law. Alaska Stat. § 12.55.155(d)(19).

» There appears to be no immunity for the person who overdosed, unless they are also the person who called for help.
Arizona

Legality of Injection and Smoking Equipment

» It is illegal to use, possess with intent to use, deliver, and possession with intent to deliver drug paraphrenia in Arizona where the individual knew or should have known that the paraphrenalia would be used in violation of the law. Ariz. Rev. Stat. Ann. § 13-3415(A)-(B).

» Syringes are considered drug paraphrenalia when they are used, intended to be used, or designed to be used to inject controlled substances. Ariz. Rev. Stat. Ann. § 13-3415(F)(2)(k).

» All equipment, products and materials of any kind that are used, intended for use or designed for use in inhaling a drug in violation of the law are also drug paraphrenalia. Ariz. Rev. Stat. Ann. § 13-3415(F)(2).

  o A convicted person may also be subject to a fine of up to $150,000. Ariz. Rev. Stat. Ann. §13-801.

» Syringe services programs are permitted to be established and operated by a city, town, county, or nongovernmental organization. Ariz. Rev. Stat. Ann. § 36-798.51.

» Employees, volunteers, and participants of an SSP may not be charged or prosecuted for possession of a needle, syringe, or other “injection supply item” and residual amounts of a controlled substance that those objects contain if they provide verification that the device was obtained from an SSP. Ariz. Rev. Stat. Ann. § 36-798.52. There does not appear to be any immunity related to smoking supplies obtained or distributed from an SSP.

Legality of Drug Checking Equipment

» It is generally illegal to use, or possess with intent to use, drug paraphrenalia to test or analyze a drug in violation of the law. Ariz. Rev. Stat. § 13-3415(A).

» It is also generally illegal to deliver, possess with intent to deliver or manufacture with intent to deliver, drug paraphrenalia knowing, or where the person reasonably should know, that it will be used to test or analyze drugs in violation of the law. Ariz. Rev. Stat. § 13-3415(B).
  o Violation of either of these laws is a class 6 felony. As noted above, the potential penalties for a class 6 felony range from 4 months to two years in jail and a fine of up to $150,000.

» The definition of “drug paraphrenalia” specifically excludes “narcotic drug testing products that are used to determine whether a controlled substance contains fentanyl or a fentanyl analog.” Ariz. Rev. Stat. § 13-3415(F)(2)(d). This means that it is legal to possess or distribute fentanyl test strips and other products used to test for fentanyl, but not any other drug checking equipment.

Naloxone Access Law

» A prescriber can prescribe and dispense naloxone or other FDA-approved opioid antagonist, directly or by standing order, to a person at risk of an opioid overdose or to a family member, community organization that serves people who use drugs, or person in a position to help a person at risk of experiencing an opioid overdose. Ariz. Rev. Stat. Ann. § 36-2266(A).
» The AZ health department may give naloxone or other opioid antagonist to a person at risk of overdose or who is experiencing an overdose. Ariz. Rev. Stat. Ann. § 36-192.

» Health professionals are immune from professional liability and criminal prosecution for those actions so long as they act with reasonable care and in good faith, and without gross negligence, wilful misconduct, or intentional wrongdoing. Ariz. Rev. Stat. Ann. § 36-2266(C).


» Any person who administers naloxone in good faith and without compensation is not liable for civil or other damages, unless the person acts with gross negligence, wilful misconduct or intentional wrongdoing. Ariz. Rev. Stat. Ann. § 36-2267(B).

» Arizona law also requires health professionals to prescribe naloxone or another opioid antagonist in some situations. Ariz. Rev. Stat. Ann. § 32-3248.01(D).

Naloxone Standing Order
» The Chief Medical Officer of Public Health Services has issued a statewide standing order, which is available here.

» The statewide standing order authorizes any Arizona-licensed pharmacist to dispense 4mg nasal spray Narcan, 1ml vial naloxone for intramuscular injection, or “other FDA approved medication for the reversal of opioid overdose” to “any person”.

Overdose Good Samaritan Law
» A person who acts in good faith and seeks medical assistance for someone experiencing a drug-related overdose, whether for themselves or others, may not be charged or prosecuted for possession or use of a controlled substance or drug paraphernalia, if evidence for the offense was found as a result of calling for help. The person who overdosed has the same protections. Ariz. Rev. Stat. Ann. § 13-3423(A-B).


Arkansas
Legality of Injection and Smoking Equipment
» Syringes are drug paraphernalia if they are used, intended for use, or designed for use in injecting a controlled substance into the body. Ark. Code Ann. § 5-64-101(12)(B)(xi).


» The possession of drug paraphernalia with the purpose of using it to break the law is a class A misdemeanor or, if the controlled substance is methamphetamine, heroin, fentanyl, or cocaine, a class D felony. Ark. Code Ann. § 5-64-443(a).
  o A Class A misdemeanor is punishable by a maximum of one year and up to a $2,500 fine. Ark. Code Ann. §§ 5-4-401(b)(1); 5-4-201(b)(1).
A Class D felony is punishable by a maximum of 6 years in prison and a fine of up to $10,000. Ark Code Ann. §§ 5-4-401(a)(5); 5-4-201(a)(2).

Free distribution of paraphernalia to adults is not prohibited. Ark. Code Ann. § 5-64-444.

It is illegal to sell any object usable for smoking marijuana or THC or for ingesting or inhaling cocaine if the person doing so knows or has reason to know that the design of the object makes it primarily useful for that purpose. Ark. Code Ann. § 5-64-802.

There is no state law requiring a prescription to possess syringes.

There is no law allowing or forbidding syringe services programs, but the free distribution of paraphernalia to adults, including syringes and smoking supplies, is not illegal.

**Legality of Drug Checking Equipment**

Equipment, products, and materials used, intended for use, or designed for use in testing or analyzing drugs are considered paraphernalia if used in violation of the law. Ark. Code Ann. § 5-64-101(12)(A).

However, drug paraphernalia “does not include a disposable, single-use test strip that can detect the presence of fentanyl or fentanyl analogs in a substance.” Ark. Code Ann. § 5-64-101(12)(D).

The possession of drug paraphernalia with the purpose of using it to break the law is a class A misdemeanor or, if the controlled substance is methamphetamine, heroin, fentanyl, or cocaine, a class D felony. Ark. Code Ann. § 5-64-443(a).

A Class A misdemeanor is punishable by a maximum of one year and up to a $2,500 fine. Ark. Code Ann. §§ 5-4-401(b)(1); 5-4-201(b)(1).

A Class D felony is punishable by a maximum of 6 years in prison and a fine of up to $10,000. Ark Code Ann. §§ 5-4-401(a)(5); 5-4-201(a)(2).

Free distribution of paraphernalia to adults is not prohibited. Ark. Code Ann. § 5-64-444.

In summary, it is not illegal to distribute drug checking equipment to adults. It is illegal to possess drug checking equipment other than fentanyl test strips.

**Naloxone Access Law**

“Opioid antagonist” is defined as “any drug that binds to opioid receptors and blocks or inhibits the effects of opioids acting on the receptors and that is approved by the United States Food and Drug Administration for the treatment of an opioid-related drug overdose.” Ark. Code Ann. § 20-13-1803(6).

A healthcare professional acting in good faith can prescribe provide an opioid antagonist, directly or by standing order, to a person at risk of an opioid overdose, a family member or friend of a person at risk of overdose, an EMT, first responder, or law enforcement officer, and any individual employed or contracted by a public or private organization. Ark. Code Ann. § 20-13-1804(a).

All people who receive an opioid antagonist as permitted under the law are permitted to provide the opioid antagonist to anyone else who could have received it directly. Ark. Code Ann. § 20-13-1804(b).

Prescribers and pharmacists are not subject to professional discipline or criminal or civil liability as a result of prescribing or dispensing an opioid antagonist. Ark. Code Ann. § 20-13-1804(e).
Any non-healthcare professional who administers naloxone in good faith to a person they reasonably believe is experiencing an opioid-related overdose is immune from civil and criminal liability or professional sanctions. Ark. Code Ann. § 20-13-1804(e).


Naloxone Standing Order


A statewide protocol has been issued and is available here.

Under the protocol, a pharmacist can provide naloxone to someone at increased risk of overdose or a friend, family member, or other person who may be in a position to assist someone at increased risk of overdose.

The protocol permits pharmacists to dispense 4mg nasal spray Narcan, Evzio (no longer available), and 2mL pre-filled syringe with an MAD device.

Overdose Good Samaritan Law

A person who acts in good faith and calls for help for a drug overdose, whether for themselves or others, may not be arrested, charged, or prosecuted for possession of a controlled substance, if evidence for the offense was found as a result of calling for help. Ark. Code Ann. § 20-13-1704(a).

A person who acts in good faith and calls for help for a drug overdose, whether for themselves or others, may not be penalized for a violation of a restraining or protective order, pretrial release, probation, or parole, if evidence for the violation was found as a result of calling for help. These protections apply for violations based on possession of a controlled substance only. Ark. Code Ann. § 20-13-1704(b).

There appear to be no protections for the person who overdosed, unless they called for help for themselves.

California

Legality of Injection and Smoking Equipment


Equipment, products and materials of any kind designed for use or marketed for use, in inhaling a controlled substance in violation of the law are paraphernalia. Cal. Health & Safety Code § 11014.5(a).

It is illegal to possess any device or paraphernalia used for unlawfully injecting or smoking most controlled substances. Cal. Health & Saf. Code § 11364(a).

However, this prohibition does not apply to “hypodermic needles or syringes that have been containerized for safe disposal in a container that meets state and federal standards for disposal of sharps waste” and, until January 1, 2026, “to the possession solely for personal use of hypodermic needles or syringes.” Cal. Health & Saf. Code §§ 11364(b-c).
Delivering paraphernalia and possessing paraphernalia with intent to deliver it where the person knows or reasonably should know that it will be used in violation of the law is a misdemeanor. [Cal. Health & Saf. Code § 11364.7(a)(1)].

Misdemeanors are punishable by imprisonment of up to six months and a fine of up to $1,000. [Cal. Penal Code § 19].

State law also prohibits the selling or giving away of needles and syringes without a license from the pharmacy board. [Cal. Bus. & Prof. Code § 4026].

State law permits syringe services programs. These programs must be authorized by either the local government or the state Department of Public Health. [Cal. Health & Saf. Code § 121349].

SSP staff and volunteers of are not subject to criminal prosecution for distribution of syringes or other materials “deemed by a local or state health department to be necessary to prevent the spread of communicable diseases, or to prevent drug overdose, injury, or disability” to SSP participants, and participants are permitted to possess those materials. [Cal. Health & Safety Code § 121349.1].

Until January 1, 2026, physicians and pharmacists are allowed to give out syringes to people 18 and over without a prescription, and individuals may obtain such syringes for personal use. [Cal. Bus. & Prof. Code § 4145.5].

In summary: SSPs are permitted to give out syringes and smoking supplies, and it’s legal to possess those supplies. Additionally, until January 1, 2026 physicians and pharmacists are permitted to give out syringes. The possession of needles and other injection equipment is legal until January 1, 2026, no matter where they were obtained from.

**Legality of Drug Checking Equipment**

The definition of drug paraphernalia includes “[t]esting equipment designed for use or marketed for use in identifying, or in analyzing the strength, effectiveness, or purity of controlled substances.” [Cal. Health & Safety Code § 11014.5(a)(4)].

However, the definition of drug paraphernalia “does not include any testing equipment designed, marketed, intended to be used, or used, to test a substance for the presence of fentanyl, ketamine, gamma hydroxybutyric acid, or any analog of fentanyl.” [Cal. Health & Safety Code § 11014.5(d)].

Unlike many states, California only criminalizes the possession of drug paraphernalia “used for unlawfully injecting or smoking” a controlled substance. [Cal. Health & Safety Code § 11364(a)].

Delivering paraphernalia and possessing paraphernalia with intent to deliver it where the person knows or reasonably should know that it will be used in violation of the law is a misdemeanor. [Cal. Health & Saf. Code § 11364.7(a)(1)].

Misdemeanors are punishable by imprisonment of up to six months and a fine of up to $1,000. [Cal. Penal Code § 19].

In summary, it is legal to possess all drug checking equipment, and it is legal to distribute drug checking equipment to test a substance for the presence of fentanyl, ketamine, gamma hydroxybutyric acid, or any analog of fentanyl.

**Naloxone Access Law**
“Opioid antagonist” is defined as “naloxone hydrochloride or any other opioid antagonist that is approved by the United States Food and Drug Administration for the treatment of an opioid overdose.” Cal. Civ. Code § 1714.22(a)(1).

Prescribers acting with reasonable care may prescribe and dispense naloxone and other opioid antagonists, either directly or by standing order, to a person at risk of overdose or a family member, friend, or other person in a position to help. Cal. Civ. Code § 1714.22(b).

A health care provider acting with reasonable care is not subject to civil action, criminal prosecution, or professional review for prescribing naloxone. Cal. Civ. Code § 1714.22(e).

A person who possesses or distributes naloxone under a prescription or standing order is not subject to civil action, criminal prosecution, or professional review. Cal. Civ. Code § 1714.22(f).

Prescribers are required to prescribe naloxone in certain situations. Ca. Bus. & Prof. §§ 740-742.

Pharmacists may “furnish” naloxone and other FDA-approved opioid antagonists in accordance with standardized procedures and protocols. Cal. Bus. & Prof. Code § 4052.01.

- The protocol permits pharmacists to give naloxone to people with a history of use of opioids or persons in contact with someone with a history of use of opioids without that person first getting a prescription for it. The protocol requires the pharmacist complete a one-hour training specific to naloxone and to provide consultation before giving out naloxone. Cal. Code Regs. tit. 16 § 1746.3.
- Under the protocol, a pharmacist may supply naloxone as an intramuscular injection, intranasal spray (like Narcan or other sprays), auto-injector, or in another FDA-approved product form.

**Naloxone Standing Order**

- Organizations may receive a standing order from the state to give out naloxone at this link.
- If a person receives naloxone via standing order, they must complete training from an opioid overdose prevention and treatment training program. Cal. Civ. Code § 1714.22(d)(1).

**Overdose Good Samaritan Law**

- If a person in good faith seeks medical assistance for themselves or another person who is experiencing an overdose, and that person does not get in the way of medical or law enforcement personnel, being under the influence of or possessing a controlled substance or drug paraphernalia for personal use is not a crime. Cal. Health & Saf. Code § 11376.5.
- This immunity applies to the person who called and the person who overdosed.

**Colorado**

**Legality of Injection and Smoking Equipment**

Possession of drug paraphernalia is a drug petty offense if the person knows or reasonably should know that the paraphernalia could be used in violation of state law. Colo. Rev. Stat. Ann. § 18-18-428(1)(a).

Sale, delivery, and possession with intent to sell or deliver equipment where the person knows or should know that the equipment will be used as drug paraphernalia is a level 2 drug misdemeanor. Colo. Rev. Stat. Ann. § 18-18-429.
  - The penalty for a level 2 drug misdemeanor is a minimum $50 fine and a maximum of a $750 fine and 364 days imprisonment. Colo. Rev. Stat. Ann. § 18-1.3-501(d).

Syringe services programs are permitted, but a county public health agency or district public health agency must receive approval from its county board of health or district board of health. The SSP can be operated by the agency or a nonprofit organization with which the agency contracts. However, “a nonprofit with experience operating a clean syringe exchange program or a health facility licensed or certified by the state may operate a clean syringe exchange program without prior board approval.” Colo. Rev. Stat. Ann. § 25-1-520.

A person is exempt from the state paraphernalia law if they are an employee, volunteer, or participant in an approved syringe services program. Colo. Rev. Stat. Ann. § 18-18-430.5.

There is no state law requiring a prescription to possess syringes.

**Legality of Drug Checking Equipment**

Drug paraphernalia does not include “[t]esting equipment used, intended for use, or designed for use in identifying or in analyzing the strength, effectiveness, or purity of controlled substances.” Colo. Rev. Stat. § 18-18-426(2)(b). It is therefore not against the law to use, possess, or distribute fentanyl test strips of any other drug checking equipment.

**Naloxone Access Law**

"Opiate antagonist" is defined as “naloxone hydrochloride or any similarly acting drug that is not a controlled substance and that is approved by the federal food and drug administration for the treatment of a drug overdose.” Colo. Rev. Stat. Ann. § 12-30-110(7)(d).

A prescriber may prescribe, directly or by standing order, and dispense and opiate antagonists to a person at risk of an opioid overdose or to a family member, friend, other person in a position to help a person at risk of overdose, and many other individuals and organizations. Colo. Rev. Stat. Ann. § 12-30-110(1)(a).


Prescribers are not subject to professional discipline or criminal or civil liability as a result of prescribing or dispensing opiate antagonists. Colo. Rev. Stat. Ann. § 12-30-110(3), (3.5), (4).

Anyone who legally receives an opiate antagonist can possess and administer it and can give it to a family member, friend, or other person in a position to help someone experiencing an overdose. Colo. Rev. Stat. Ann. § 12-30-110(1)(b).

Anyone other than a health-care provider who acts in good faith to furnish or administer an opiate antagonist, including an expired antagonist, is immune from criminal prosecution. Colo. Rev. Stat. § 18-1-712. They are also immune from civil liability. Colo. Rev. Stat. § 13-21-108.7.
Naloxone Standing Order

» Colorado does not maintain a single standing order, but the state Department of Public Health and Environment issues them upon request. Standing orders can be requested here.
» The state-issued standing orders permit the distribution of any formulation of naloxone.

Good Samaritan Law

» A person who calls for help in good faith for a drug or alcohol overdose may not be arrested or prosecuted for several offenses including possession of a controlled substance and possession of drug paraphernalia, if the following conditions are met:
  o The offense is part of the same event as the one involving the overdose Colo. Rev. Stat. Ann. § 18-1-711(1)(d).
» The person who overdosed has the same protections, so long as the person who calls for help meets all the above conditions. Colo. Rev. Stat. Ann. § 18-1-711(2).

Connecticut

Syringe Possession & Distribution

  o A Class C misdemeanor is punishable by a maximum of 3 months in prison and a fine of up to $500. Conn. Gen. Stat. §§ 53a-36(3); 53a-42(3).
» Unauthorized distribution and sale of drug paraphernalia knowing, or under circumstances where they should know that it will be used for drugs other than cannabis is a class A misdemeanor.
  o A Class A misdemeanor is punishable by a maximum of 1 year in prison and a fine of up to $2,000. Conn. Gen. Stat. §§ 53a-36(1); 53a-42(1).
  o Since syringes are not drug paraphernalia in Connecticut, it is not illegal for them to be distributed from SSPs, nor for them to be possessed if obtained from an SSP. It is also not illegal for SSPs to distribute smoking equipment as long as the equipment isn’t
used, intended for use or designed for use in inhaling marijuana, cocaine, hashish, or hashish oil.

Legality of Drug Checking Equipment

- The broad drug paraphernalia definition includes “testing equipment used, intended for use or designed for use in identifying or analyzing the strength, effectiveness or purity of controlled substances.” Conn. Gen. Stat. § 21a-240(20)(A)(iv).
  - However, “[d]rug paraphernalia’ does not include a product used by a manufacturer licensed pursuant to this chapter for the activities permitted under the license or by an individual to test any substance prior to injection, inhalation or ingestion of the substance to prevent accidental overdose by injection, inhalation or ingestion of the substance, provided the licensed manufacturer or individual is not using the product to engage in the unlicensed manufacturing or distribution of controlled substances.” Conn. Gen. Stat. Ann. § 21a-240(20)(A).
- In effect, this means that possession, use, and distribution of drug checking equipment is legal in Connecticut.

Naloxone Access Law

- In Connecticut, "opioid antagonist" is defined as “naloxone hydrochloride or any other similarly acting and equally safe drug approved by the federal Food and Drug Administration for the treatment of drug overdose.”
- Certain pharmacists may also prescribe naloxone if they have been trained and certified by a program approved by the Commissioner of Consumer Protection. Conn. Gen. Stat. Ann. § 20-633c.
  - A map of pharmacies with pharmacists who can prescribe naloxone is available here.
- Prescribers and pharmacists are not subject to professional discipline or criminal or civil liability as a result of prescribing, giving out, or administering naloxone or other opioid antagonists. Conn. Gen. Stat. Ann. § 17a-714a(b-c).
- Any person who has a good faith belief that another person is experiencing an overdose, other than a healthcare professional in the course of their employment, who acts with reasonable care and who administers naloxone is immune from civil and criminal liability. Conn. Gen. Stat. Ann. § 17a-714a(d).
- A law enforcement agency, emergency medical service provider, government agency, community health organization, or local or regional board of education may enter into an agreement with a health care provider to distribute and administer opioid antagonists. Conn. Gen. Stat. Ann. § 21a-286(b).

Naloxone Standing Order

- A pharmacy participating in a standing order may only distribute intranasal naloxone (either Narcan spray or generic atomizer) and auto-injector naloxone. Opioid antagonists may be

» Community health organizations an enter into an agreement with a health care provider that permits them to distribute opioid antagonists. People who distribute opioid antagonists under such an agreement are required to receive training from the prescriber. Conn. Gen. Stat. Ann. § 21a-286(b).

**Good Samaritan Law**

» A person who in good faith calls for help for themselves or others, or is the subject of such a call for help, for a drug or alcohol overdose may not be arrested, charged, or prosecuted for possession or use of drug paraphernalia if evidence of the violation was found as a result of the call for help. Conn. Gen. Stat. § 21a-267(d).

» A person who in good faith calls for help for themselves or others, or is the subject of such a call for help, for a drug or alcohol overdose may not be arrested, charged, or prosecuted for illegal drug possession if evidence of the violation was found as a result of the call for help. Conn. Gen. Stat. § 21a-279(d).

**District of Columbia**

**Syringe Possession & Distribution**

» Syringes are drug paraphernalia when used, intended for use, or designed for use in injecting controlled substances into the body. D.C. Code Ann. § 48-1101(K).

» Drug paraphernalia also includes objects used, intended for use, or designed for use in inhaling a controlled substance into the human body. D.C. Code Ann. § 48-1101(L).

» It is generally illegal to use or possess with intent to use drug paraphernalia except as authorized by law. D.C. Code Ann. § 48-1103(a)(1).

  o However, it is not illegal to use, or possess with intent to use, drug paraphernalia for the personal use of a controlled substance. D.C. Code Ann. § 48-1103(a)(1A).

» It is generally illegal to deliver or sell, or possess with intent to deliver or sell, drug paraphernalia knowingly or where the person should reasonably know that it will be used to break the law. D.C. Code Ann. § 48-1103(b)(1).

  o However, it is not illegal for community based organizations to deliver, or possess with intent to deliver, paraphernalia for the personal use of a controlled substance. D.C. Code Ann. § 48-1103(b)(1B).

  o It is also not illegal for D.C. government employees, contractors and grantees acting within the scope of their contract or grant to deliver, or possess with intent to deliver, paraphernalia for the personal use of a controlled substance. D.C. Code Ann. § 48-1103(b)(1B).

» There is no state law requiring a prescription to possess syringes.

» The Department of Human Services is authorized to establish syringe services programs. D.C. Code Ann. § 48-1103.01(a).

  o It is not illegal to possess or distribute syringes as part of a syringe services program. D.C. Code Ann. § 48-1103.01(d).
Legality of Drug Checking Equipment

» The definition of drug paraphernalia includes “[t]esting equipment or other objects used, intended for use, or designed for use in identifying or analyzing the strength, effectiveness, or purity of a controlled substance.” D.C. Code Ann. § 48–1101(3)(D).

  o However, “it shall not be unlawful” to use or possess with intent to use drug paraphernalia for the personal use of a controlled substance. D.C. Code Ann. § 48–1103(a)(1)(1A).

» It is unlawful for any person to deliver or sell, possess with intent to deliver or sell drug paraphernalia, knowingly, or under circumstances where one reasonably should know, that it will be used to…test, analyze…a controlled substance.” D.C. Code Ann. § 48–1103(b)(1).
  o However, “it shall not be unlawful for a community-based organization…to deliver or sell, or possess with intent to deliver or sell drug paraphernalia for the personal use of a controlled substance.” D.C. Code Ann. § 48-1103(b)(1A).
    • “Community-based organization” is defined as “an organization that provides services, including medical care, counseling, homeless services, or drug treatment, to individuals and communities impacted by drug use. The term ‘community-based organization’ includes all organizations currently participating in the Needle Exchange Program.” D.C. Code Ann. § 7-404(a)(1).
  o The prohibition against selling and delivering also does not apply to “[d]istrict government employees, contractors, and grantees, acting within the scope of their employment, contract, or grant.” D.C. Code Ann. § 48-1103(b)(1B).

» In summary, it is legal for any person to possess or use drug checking equipment, and for community-based organizations, D.C. government employees, contractors, and grantees to distribute it.

Naloxone Access Law

» “Opioid antagonist” is defined as “a drug, such as Naloxone, that binds to the opioid receptors with higher affinity than agonists but does not activate the receptors, effectively blocking the receptor, preventing the human body from making use of opiates and endorphins.” D.C. Code § 7-403(i)(2).

» A health care professional acting in good faith can prescribe an opioid antagonist, either directly or by standing order, to a person at risk of an opioid-related overdose or to a family member, friend, or person in a position to help a person experiencing an opioid overdose, or to an employee or volunteer of a community-based organization. D.C. Code § 7-404(b).

» An employee or volunteer of a community-based organization acting in good faith and under a standing order may dispense and distribute the opioid antagonist to a person at risk of an opioid-related overdose or to a family member, friend, or person in a position to help a person experiencing an opioid overdose. D.C. Code § 7-404(c). They must, however, complete a training conducted by the Department of Health before doing so. D.C. Code § 7-404(d)(1)(B).

» A pharmacist can dispense or distribute (but not prescribe) an opioid antagonist if acting under a standing order and protocol. D.C. Code § 7-404(d)(1)(A).
» The person giving out the opioid antagonist must provide training to the person who receives it. D.C. Code § 7-404(e).

» Anyone who gives prescribes, dispenses, or distributes an opioid antagonist according to the law is immune from civil or criminal liability for the use of the antagonist, so long as they were not reckless, grossly negligent, and didn’t engage in intentional misconduct. D.C. Code § 7-404(f)(1).

» Possession of naloxone is legal even if the person doesn’t have a prescription for it. D.C. Code § 7-403(f).

Naloxone Standing Order

» A health care professional acting in good faith can prescribe an opioid antagonist, either directly or by standing order, to a person at risk of an opioid-related overdose or to a family member, friend, or person in a position to help a person experiencing an opioid overdose, or to an employee or volunteer of a community-based organization. D.C. Code § 7-404(b).

» There is no blanket standing order; individual pharmacists must request one from an individual physician. The Health Regulation and Licensing Administration has created a sample standing order, but it is not required that that order be used.

Good Samaritan Law

» A person who reasonably believes that another person is experiencing an overdose and in good faith calls for help, whether for themselves or others, and the person for whom they called, may not be arrested, charged, or prosecuted for possession of a controlled substance or paraphernalia, or unlawful use or possession with intent to use drug paraphernalia, if the offense arose from the same situation as the overdose. D.C. Code § 7-403(a).

» The offenses for which protection is provided under the law may not be used as the sole basis for revoking or modifying someone’s supervision status.

» Calling for help can be considered as a mitigating factor for any other offense. D.C. Code § 7-403(c).

Delaware

Syringe Possession & Distribution

» Syringes are considered drug paraphernalia when they are used, intended to be used, or designed to be used to inject controlled substances except as authorized by the law. Del. Code Ann. tit. 16, § 4701(18)(k).

» The definition of drug paraphernalia also includes “equipment, products and materials of any kind” that are used, intended for use, or designed for use, in inhaling a controlled substance in violation of the law. Del. Code Ann. tit. 16, § 4701(18).

» Use or possess with intent to use drug paraphernalia for use with drugs other than marijuana is a class B misdemeanor. Del. Code Ann. tit. 16, § 4774(a).

  o The penalty for a class b misdemeanor is up to 6 months incarceration V and a fine of up to $1,150. Del. Code Ann. tit. 11, § 4206(b).

» Delivery of drug paraphernalia to an adult where the person knew or should have known that it would be used to violate the law is a class G felony. Del. Code Ann. tit. 16, § 4774(c).
o The penalty for a class G felony is up to 2 years incarceration and an “appropriate” amount of fines and penalties. Del. Code Ann. tit. 11, § 4206(b)(7), (k).

» There is no law requiring a prescription to possess syringes.
» The State Division of Public Health must maintain a syringe services program and designate private providers to operate the program. Del. Code Ann. tit. 29, § 7990.
» Program participants and employees are exempt from the drug paraphernalia laws regarding hypodermic needles or syringes when the possession or distribution is in connection to the program. Del. Code Ann. tit. 29, § 7993. There is no liability protection for smoking supplies.

Legality of Drug Checking Equipment
» “Drug paraphernalia” includes “all equipment, products or materials of any kind which are used, intended for use or designed for use in…testing, analyzing…a controlled substance the manufacture, delivery, possession or use of which is in violation of this chapter.” Del. Code tit. 16, § 4701(18).
» Use, possession with intent to use, and delivery of drug paraphernalia are punished as detailed above.
  o However, the prohibitions on drug paraphernalia do not apply to “[t]esting strips to determine the presence of fentanyl or fentanyl-related substances.” Until November 28, 2024, the protection is extended to include tests for determining the presence of xylazine as well. Del. Code tit. 16, § 4773.

Naloxone Access Law
» “Opioid antagonist” is defined as “naloxone or any other opioid antagonist that is approved by the United States Food and Drug Administration for emergency reversal of known or suspected opioid overdose.” Del. Code tit. 16, § 3002G(2).
» Community-based programs may distribute an opioid antagonist to people who complete an approved training program. Del. Code tit. 16, § 138(3).
» Health care practitioners who prescribe or dispense an opioid antagonist in good faith and with reasonable care are immune from civil, criminal, and disciplinary action as long as they didn’t act with unreasonable care, wilfully, wantonly, or with gross negligence. Del. Code Ann. tit. 16, § 3005G (b); (c).
» An individual who has completed an approved training program may receive, carry, and administer an opioid antagonist to an individual who is believed to be experiencing an opioid overdose. Del. Code Ann. tit. 16, § 3004G.

Naloxone Standing Order
» The Department of Health and Social Services is required to implement an Opioid Antagonist Access Program, in part by creating standing orders for the administration of naloxone and other opioid antagonists. Del. Code Ann. tit. 16, § 3003G.
» The Division of Public Health has issued standing orders for use by pharmacies, community-based naloxone access programs, and trained responders.
  o The standing order allows community-based training programs and pharmacists to give naloxone to people who have completed an opioid overdose responder training.
  o Covers 4mg intranasal naloxone spray or 2mg/2mL prefilled syringe with generic atomizer) and auto-injector naloxone.
Good Samaritan Law

» A person who is experiencing an overdose and anyone who seeks medical attention for that person may not be arrested, charged, or prosecuted for various drug crimes including possession of controlled substances and drug paraphernalia or subject to revocation or modification of the terms for probation for so long as:
  o The person reports or helps report the overdose in good faith to law enforcement, poison control, or a medical provider; Del. Code Ann. tit. 16, § 4769(b)(1) and,
  o The person provides all important medical information relating to the overdose to the medical provider. Del. Code Ann. tit. 16, § 4769(b)(2).

Florida

Syringe Possession & Distribution

» Syringes are considered drug paraphernalia when they’re used, intended to be used, or designed to be used to inject controlled substances in violation of the law. Fla. Stat. § 893.145(11).

» Objects used, intended for use, or designed for use in inhaling a controlled substance are also drug paraphernalia. Fla. Stat. § 893.145.

» The use and possession with intent to use drug paraphernalia in violation of the law is a misdemeanor of the first degree. Fla. Stat. § 893.147(1).
  o A misdemeanor of the first degree is punishable by “imprisonment not exceeding 1 year” and a fine not exceeding $1,000. Fla. Stat. §§ 775.082(4)(a); 775.083(1)(d).

» Delivery and possession with intent to deliver drug paraphernalia to an adult, knowing or under circumstances where one reasonably should have known it would be used to break the law, is a felony in the third degree. Fla. Stat. § 893.147(2).
  o A felony of the third degree is punishable by “imprisonment not exceeding 5 years” and a fine not exceeding $5,000. Fla. Stat. § 775.082(3)(c); 775.083(1)(b).

» There is no state law requiring adults to have a prescription to possess or obtain syringes. However, state law forbids the dispensing of syringes to minors except by a practitioner, parent, legal guardian, or pharmacist dispensing them via a prescription. Fla. Stat. § 893.147(3)(b).

» Counties may establish syringe services programs. Fla. Stat. § 381.0038(4)(b)(3).
  o Among many other requirements, an SSP is required to operate on a one-to-one basis. Fla. Stat. § 381.0038(4)(b)(3).
  o The possession, distribution, or exchange of syringes as part of an authorized program is not a violation of any law. Fla. Stat. § 381.0038(4)(c).

Legality of Drug Checking Equipment

» Drug paraphernalia includes “all equipment, products, and materials of any kind which are used, intended for use, or designed for use in…testing, analyzing…a controlled substance in violation” of the law. Fla. Stat. § 893.145.
  o The definition of drug paraphernalia “exclude[es] narcotic-drug-testing products that are used solely to determine whether a controlled substance contains fentanyl…or [certain fentanyl analogs].” However, this carveout does not apply to “a narcotic-drug-testing product that can measure or determine the quantity, weight, or potency of a controlled substance.” Fla. Stat. Ann. § 893.145(4).
» It is illegal to use, or to possess with intent to use, drug paraphernalia to test or analyze a controlled substance in violation of the law. Fla. Stat. § 893.147(1)(a).
» It is also illegal to manufacture, deliver, of possess with intent to deliver drug paraphernalia to test or analyze a controlled substance in violation of the law. Fla. Stat. § 893.147(2)(a).
» In summary: It is illegal to possess or distribute drug checking equipment other than products used to determine whether a drug contains fentanyl or fentanyl analogs. In practice, this probably means only fentanyl test strips are excluded.

Naloxone Access Law

» A prescriber can prescribe and dispense “emergency opioid antagonists” ("naloxone hydrochloride or any similarly acting drug that blocks the effects of opioids administered from outside the body and that is approved by the United States Food and Drug Administration for the treatment of an opioid overdose") to a person at risk of an opioid overdose or to a family member, friend, or person in a position to have contact with a person at risk of experiencing an opioid overdose. Fla. Stat. § 381.887(3)(a).
» A pharmacist can order “an emergency opioid antagonist with an autoinjection delivery system, a prefilled injection device delivery system, or an intranasal application delivery system" to a person at risk of an opioid overdose or to a family member, friend, or person in a position to have contact with a person at risk of experiencing an opioid overdose. Fla. Stat. § 381.887(3)(a).
» A person at risk of an opioid overdose and a family member, friend, or person in a position to have contact with a person at risk of experiencing an opioid overdose can store and possess emergency opioid antagonists and administer them to someone they think is having an opioid overdose. Fla. Stat. § 381.887(3)(c).
» Prescribers and dispensers who act in good faith and exercise reasonable care are not subject to professional action and are immunity from any civil or criminal immunity for actions permitted under the law. Fla. Stat. § 381.887(6).
» Any person who possesses, prescribes, dispenses, or stores naloxone as permitted by the law is covered by the state’s general Good Samaritan law (Fla. Stat. § 768.13, as opposed to the alcohol or drug related overdose Good Samaritan law, Fla. Stat. § 893.21, discussed below). This law provides that any person who in good faith renders emergency care at the scene without objection from the injured victim and without payment cannot be found liable for civil damages as a result of their actions, if they act as a reasonable person would under the circumstances. Fla. Stat. § 381.887(5).

Naloxone Standing Order

» Pharmacists are permitted to dispense “an emergency opioid antagonist with an autoinjection delivery system, a prefilled injection device delivery system, or an intranasal application delivery system" under a standing order. Fla. Stat. § 381.887(3)(b).
» The state Surgeon General has issued a statewide standing order that permits pharmacists to dispense naloxone to certain emergency responders.
  o The standing order covers 2mg or 4mg intranasal naloxone spray(Narcan), 8mg nasal spray (Kloxxado), 2mg/2mL prefilled syringe with atomizer, and 2mg or 5mg auto-injector naloxone (like Zimhi).
This standing order allows pharmacists to distribute naloxone only to first responders including law enforcement, firefighters, paramedics, and EMTs.

Good Samaritan Law

» A person who acts in good faith and calls for help for someone experiencing an alcohol or drug related overdose, whether for themselves or others, may not be arrested, charged, or prosecuted for possession of a controlled substance or use or possession of drug paraphernalia, if evidence for the offense was found as a result of calling for help. This protection applies only to ten grams or less of most controlled substances. Fla. Stat. § 893.21(1); (2).

» The protection from arrest, prosecution, and charge for drug and paraphernalia possession does not apply to the person who overdosed, unless they are also the person who called for help.

» A person who experiences an overdose, or believes in good faith that she is, and a person who acts in good faith and calls for help for an alcohol or drug related overdose, whether for themselves or others, may not be penalized for a violation of pretrial release, probation, or parole, if evidence for the violation was obtained as a result of calling for help. Fla. Stat. § 893.21(3).

» This protection does apply to the person who overdosed, even if they weren’t the person who called for help.

» Calling for help or providing help can be used as mitigation in sentencing for other crimes. Fla. Stat. § 921.0026(2)(n).

Georgia

Legality of Injection and Smoking Equipment

» Any instrument, device, or object designed to inhale a controlled substance into the human body is considered a “drug related object.” Ga. Code Ann. § 16-13-32(a)(1)(A).

» Hypodermic needles and syringes are explicitly excluded from the definition of “drug related object”. Ga. Code Ann. § 16-13-32(a)(1).

» It is a misdemeanor for any person to use, or possess with intent to use, drug related objects. Ga. Code Ann. § 16-13-32.2(b).

» It is a misdemeanor for any person to sell, give, exchange, or otherwise distribute drug related objects. Ga. Code Ann. § 16-13-32(d).

» A misdemeanor is punishable by up to 1 year incarceration and a maximum $1000 fine. Ga. Code Ann. § 17-10-3(a)(1).

» It is unlawful for any person other than a pharmacist, doctor, or an employee of a registered SSP to sell or distribute syringes. Ga. Code Ann. § 16-13-32(c)(1). While a prescription is not required for syringes, pharmacies are required to keep syringes behind the counter and are not allowed to sell them if they suspect they will be used for an unlawful purpose. Ga. Comp. R. & Regs. 480-10-.13.

» Syringe services programs must be registered with the Department of Public Health Ga. Comp. R. & Regs. 511-2-9-.02. Operating requirements are found at Ga. Comp. R. & Regs. 511-2-9-.04. Employee or agents of a registered syringe services program are immune from civil and criminal liability arising from the possession, distribution, or exchange of hypodermic
syringes or needles and related supplies as part of the syringe services program. Ga. Code Ann. § 16-13-32(c)(2).

Legality of Drug Checking Equipment

» Any instrument, device, or object designed or marketed primarily to test the strength, effectiveness, or purity of marijuana or a controlled substance is considered a “drug related object.” Ga. Code Ann. § 16-13-32(a)(1)(C).

» It is a misdemeanor for any person to use or possess with the intent to use drug related objects for the purpose of testing or analyzing a controlled substance. Ga. Code Ann. § 16-13-32(d).

» It is a misdemeanor for any person or corporation to sell, give, exchange, or otherwise distribute or possess with intent to sell or distribute any object with the intended purpose of testing a controlled substance. Ga. Code Ann. § 16-13-32.1(a).
  o A misdemeanor is punishable by up to 1 year incarceration and a maximum $1000 fine. Ga. Code Ann. § 17-10-3(a)(1).

» Certain drug checking equipment is permitted. Specifically, “any testing equipment used to determine whether a controlled substance has been adulterated and contains a synthetic opioid shall not be considered a drug related object.” Ga. Code Ann. § 26-3-22(a).

» It is possible that employees and volunteers of a syringe services program are allowed to possess and freely distribute any drug checking equipment, as the law provides them with immunity from criminal liability for the possession, distribution, or exchange of hypodermic needles, syringes, and “related supplies.” Ga. Code Ann. § 16-13-32(c)(2). Participants have no such immunity.

Naloxone Access Law

» Georgia’s naloxone law uses the term “opioid antagonist,” which is defined as “any drug that binds to opioid receptors and blocks or inhibits the effects of opioids acting on those receptors and that is approved by the federal Food and Drug Administration for the treatment of an opioid related overdose.” Ga. Code Ann. § 26-4-116.2(a)(3).

» A practitioner acting in good faith and within the standard of care can prescribe an opioid antagonist to a person at risk of experiencing an overdose or to a pain management clinic, first responder, harm reduction organization, family member, friend, or other person in a position to help someone experiencing an overdose and is immune from criminal or civil liability and professional licensing sanctions for doing so. Ga. Code Ann. § 26-4-116.2(e)(2).

» A practitioner or pharmacist acting in good faith and within the standard of care may dispense an opioid antagonist that was either prescribed or authorized by a standing order from the state health officer. Ga. Code Ann. § 26-4-116.2(c).

» An appointed state health officer is authorized to issue a standing order for an opioid antagonist state-wide. Ga. Code Ann. § 31-1-10(b)(2). The officer issuing the standing order is immune from criminal or civil liability and professional licensing sanctions for doing so, so long as they did so in good faith. Ga. Code Ann. § 26-4-116.2(e)(3).

» A person, other than a practitioner, acting in good faith and with reasonable care may administer an opioid antagonist and is immune from criminal or civil liability and professional licensing sanctions for doing so. Ga. Code Ann. § 26-4-116.2(e)(4).
The law allows opioid antagonists to be prescribed to harm reduction organizations but does not specifically say that those organizations can then give out that opioid antagonist. Ga. Code Ann. § 26-4-116.2(b).

**Naloxone Standing Order**

- Georgia’s standing order is located [here](#).
- Allows pharmacists to give naloxone to a friend, family member, co-worker, first responder, school, pain management clinic, harm reduction organizations, or any person in a position to help someone at risk of overdose.
- Formulations allowed are: 2ml prefilled syringe with atomizers; 1 or 2ml prefilled syringe with needle, 4mg nasal spray, autoinjector, or IM naloxone (in 1mg vials or 10mg multidose vials) with syringe.

**Good Samaritan Law**

- A person who in good faith calls for help for themself or another person in need of medical assistance will not be arrested, charged, or prosecuted for possession of certain amounts of drugs and possession of drug related objects if the evidence for the violation is based on information collected as a result of calling for help. Ga. Code Ann. § 16-13-5(b).
- Any information collected as a result of calling for help cannot be a violation of a person’s pretrial release, probation, or parole for a drug violation or a violation of a protective or restraining order. Ga. Code Ann. § 16-13-5(b).

**Hawaii**

**Legality of Injection and Smoking Equipment**

- All equipment, products or materials used to inject or inhale a controlled substance into the human body are considered drug paraphernalia. Haw. Rev. Stat. Ann. § 329-1.
- Use or possession with intent to use drug paraphernalia is illegal and is punishable by a fine of no more than $500. Haw. Rev. Stat. Ann. § 329-43.5(a).
- Delivery or possession with intent to deliver drug paraphernalia is illegal, punishable by a fine of no more than $500. Haw. Rev. Stat. Ann. § 329-43.5(b).
- Syringes exchanged through an SSP do not violate the drug paraphernalia law for either the participants or the SSP employee or volunteer. Haw. Rev. Stat. Ann § 325-114(a).
Legality of Drug Checking Equipment

» All equipment, products or materials used to test or analyze controlled substances are considered drug paraphernalia. There is no exception for fentanyl test strips. Haw. Rev. Stat. Ann. § 329-1.


» Delivery or possession with intent to deliver drug paraphernalia is illegal and is punishable by a fine of no more than $500. Haw. Rev. Stat. Ann. § 329-43.5(b).

Naloxone Access Law

» Hawaii’s naloxone access law uses the term “opioid antagonist,” defined as “any drug that binds to opioid receptors and blocks or disinhibits the effects of opioids acting on those receptors, and that is approved by the United States Food and Drug Administration for treating opioid-related drug overdose. Haw. Rev. Stat. Ann. § 329E-1.

» A prescriber, either directly or by standing order, may prescribe, dispense, and distribute, and a pharmacist may dispense or distribute, an opioid antagonist to a person at risk for experiencing overdose, a harm reduction organization, or a person in a position to help another person at risk of experiencing an overdose. Haw. Rev. Stat. Ann. § 329E-2(a).

» A pharmacist who has received the required training may also prescribe and dispense an opioid antagonist to an individual at risk of overdose or a family member or caregiver of an individual at risk. Haw. Rev. Stat. Ann. § 461-11.8.

» A prescriber or pharmacist who acts with good faith and reasonable care is not subject to criminal or civil liability or professional discipline for prescribing, dispensing, or distributing an opioid antagonist, or any outcomes when the naloxone is administered. Haw. Rev. Stat. Ann. § 329E-2(b).

» Any person may possess an opioid antagonist even if they do not have a prescription for it, and a person who acts with good faith and reasonable care administering naloxone to another person who appears to be experiencing an overdose is immune from criminal prosecution, professional sanction, or civil liability. Haw. Rev. Stat. Ann. § 329E-2(c); (d).


Naloxone Standing Order


Good Samaritan Law

» If a person calls for help or provides care in good faith for themself or another person in need of medical assistance, that person cannot be arrested, charged, convicted, have their property subject to civil forfeiture, or be otherwise penalized for possession of a controlled substance or drug paraphernalia if the evidence for the negative consequence was obtained as a result of the call for help. Haw. Rev. Stat. Ann. § 329-43.6(b)(1); (b)(2).

» A person who calls for help may not be found in a violation of a restraining order, probation, or parole based on information collected as a result of calling for help. Haw. Rev. Stat. Ann. § 329-43.6(b)(3); (b)(4).
» Calling for help will be considered a mitigating factor in any other controlled substance or alcohol-related criminal prosecution. Haw. Rev. Stat. Ann. § 329-43.6(d).
» The person who experienced the overdose is also protected by this law. Haw. Rev. Stat. Ann. § 329-43.6(b).

Idaho

Legality of Injection and Smoking Equipment
» Syringes are drug paraphernalia when used, intended for use, or designed for use in injecting controlled substances into the body. Idaho Code Ann. § 37-2701(o)(11).
» It is illegal to use or possess with intent to use drug paraphernalia to inject, inhale, or otherwise introduce into the body a controlled substance. Idaho Code Ann. § 37-2734A(1).
  o Use or possession with intent to use drug paraphernalia is a misdemeanor punishable by maximum 1 year imprisonment, $1,000 maximum fine, or both. Idaho Code Ann. § 37-2734A(3).
» It is illegal to deliver or possess with intent to deliver drug paraphernalia to inject or inhale a controlled substance into the body. Idaho Code Ann. § 37-2734B.
  o Delivery or possession with intent to deliver drug paraphernalia is a felony punishable by 9 years maximum imprisonment, $30,000 maximum fine, or both. Idaho Code Ann. § 37-2734B.
» Syringe service programs are authorized by state law. However, there are no explicit protections or immunity for possession of syringes obtained from an SSP. Idaho Code Ann. § 37-3404.
» For more information on harm reduction laws in Idaho, please see this document.

Legality of Drug Checking Equipment
» Testing equipment used, intended for use, or designed for use in identifying or in analyzing the strength, effectiveness or purity of controlled substances is drug paraphernalia. Idaho Code Ann. § 37-2701(o)(4).
» It is illegal to use or possess with intent to use drug paraphernalia to test or analyze a controlled substance. Idaho Code Ann. § 37-2734A.
  o Use or possession with intent to use drug paraphernalia is a misdemeanor punishable by up to 1 year incarceration, $1,000 fine, or both. Idaho Code Ann. § 37-2734A(3).
» It is illegal to deliver or possess with intent to deliver drug paraphernalia to test or analyze a controlled substance into the body. Idaho Code Ann. § 37-2734B.
  o Delivery or possession with intent to deliver drug paraphernalia is a felony punishable by up to 9 years incarceration, $30,000 fine, or both. Idaho Code Ann. § 37-2734B.
» There is a possible exception for testing equipment under the state SSP law, as entities are permitted to procure and give away “supplies needed to operate a syringe and needle exchange program.” Idaho Code §37-3404(1)(b); Idaho Code §37-3404(1)(c). Idaho’s Operating Recommendations and Requirements for Idaho Safer Syringe Programs define a syringe services program as one that “provides access to sterile syringes, needles, and other prevention materials, including cotton filters, bandages, and alcohol swabs,” (emphasis added) which could potentially include testing equipment.
Naloxone Access Law

» “Opioid antagonist” is defined as “naloxone hydrochloride or any other similarly acting and equally safe drug approved by the federal food and drug administration for the treatment of drug overdose.” Idaho Code Ann. § 54-1705(37).

» A licensed health professional acting in good faith and exercising reasonable care can prescribe and dispense an opioid antagonist to any person or entity. Idaho Code Ann. § 54-1733B(1).

» Any person acting in good faith and with reasonable care may administer an opioid antagonist to someone who appears to be experiencing an overdose and must call for help as soon as possible. Idaho Code Ann. § 54-1733B(2).

» Any person who prescribes, dispenses, or administers an opioid antagonist is not civilly or criminally liable for those acts. Idaho Code Ann. § 54-1733B(3).

Naloxone Standing Order

» Idaho does not appear to have a statewide standing order.

Good Samaritan Law

» A person who in good faith calls for help for themself or another person in need of drug-related medical assistance cannot be charged or prosecuted for possession, use, or being under the influence of a controlled substance or for using or possessing drug paraphernalia, if the charge is based on information collected as a result of calling for help. Idaho Code Ann. § 37-2739C(1).

» The person who overdosed also qualifies for this immunity. Idaho Code Ann. § 37-2739C(2).

Illinois

Legality of Injection and Smoking Equipment

» Drug paraphernalia includes all equipment, products, and materials of any kind used to inject or inhale a controlled substance into the body. 720 Ill. Comp. Stat. Ann. 600/2(d).

» Possession of drug paraphernalia with the intent to use it to introduce a controlled substance into the human body is a class A misdemeanor. 720 Ill. Comp. Stat. Ann. 600/3.5(a).

   o A class A misdemeanor is punishable by a maximum of 1 year incarceration and a fine of between $75 and $2,500, plus an additional $750 fine. 730 Ill. Comp. Stat. Ann. 5/5-4.5-55(a).

» Free distribution of drug paraphernalia is not criminalized. See generally 720 Ill. Comp. Stat. 600.


» Local ordinances may provide greater restrictions. 720 Ill. Comp. Stat. Ann. 600/7.

» An adult may purchase from a pharmacy and possess up to 100 syringes. 720 Ill. Comp. Stat. Ann. 635/1(b).

» Syringe access programs that promote scientifically proven ways of mitigating health risks associated with drug use and other high-risk behaviors are allowed by law. 410 Ill. Comp. Stat. Ann. 710/5(a). No person will be charged with or prosecuted for possession of syringes and
other supplies, including residual amounts of controlled substances, obtained from or returned to an SSP. 410 Ill. Comp. Stat. Ann. 710/5(c).

» SSPs are required to distribute "other safer drug consumption supplies," which might include smoking equipment. 410 Ill. Comp. Stat. Ann. 710/5(b)(2).

**Legality of Drug Checking Equipment**

» Drug paraphernalia includes all equipment, products, and materials of any kind used to test or analyze a controlled substance. 720 Ill. Comp. Stat. Ann. 600/2(d).

» Possession of drug paraphernalia with the intent to use it to introduce a controlled substance into the human body is a class A misdemeanor. 720 Ill. Comp. Stat. Ann. 600/3.5(a).
  - A class A misdemeanor is punishable by a maximum of 1 year incarceration and a fine of between $75- $2,500, plus an additional $750 fine. 730 Ill. Comp. Stat. Ann. 5/5-4.5-55(a).

» Free distribution of drug paraphernalia is not criminalized. See generally 720 Ill. Comp. Stat. 600.

» Local ordinances may provide greater restrictions. 720 Ill. Comp. Stat. Ann. 600/7.

» Per a law passed in July 2023, effective January 1, 2024 drug paraphernalia does not include “equipment, products, or materials to analyze or test for the presence of fentanyl, a fentanyl analogue, or a drug adulterant within a controlled substance.” 720 Ill. Comp. Stat. Ann. 600/2.

» Certain health professionals “may dispense drug adulterant testing supplies to any person,” although the law imposes restrictions on where they can be stored and the locations from which they can be distributed. 410 Ill. Comp. Stat. 710/10.

» SSPs are required to distribute "other safer drug consumption supplies," which might include drug checking equipment. 410 Ill. Comp. Stat. Ann. 710/5(b)(2).

**Naloxone Access Law**

» Illinois’ naloxone access law uses the term “opioid antagonist” which is defined as "a drug that binds to opioid receptors and blocks or inhibits the effect of opioids acting on those receptors, including, but not limited to, naloxone hydrochloride or any other similarly acting and equally safe drug approved by the U.S. Food and Drug Administration for the treatment of drug overdose." 745 Ill. Comp. Stat. Ann. § 301/5-23(d)(4); 745 Ill. Comp. Stat. Ann. § 85/19.1(d).

» A healthcare professional acting in good faith can prescribe, directly or by standing order, and dispense an opioid antagonist to a patient who is capable of administering it in an emergency or to a person who is not at risk of overdose, may be in a position to help someone experiencing overdose, and has received basic instruction on administering the opioid antagonist. 20 Ill. Comp. Stat. Ann. 301/5-23(d)(1).

» Healthcare professionals are not subject to professional licensing sanctions for prescribing or dispensing an opioid antagonist and are not criminally liable unless they act with willful and wanton misconduct. 20 Ill. Comp. Stat. Ann. 301/5-23(d)(1.5).

» A pharmacist is also not civilly liable for dispensing naloxone under a standing order, or under a standardized procedure or protocol. 745 Ill. Comp. Stat. Ann. 49/36. When dispensing an opioid, a pharmacist is required to inform patients that opioids are addictive and offer an opioid antagonist. 225 Ill. Comp. Stat. Ann. 85/19.1(c).

» A person who has been trained to use an opioid antagonist and who is not otherwise licensed to administer drugs may administer it in an emergency so long as they believe in good faith
that another person is experiencing an overdose and so long as they administer the opioid antagonist for free. 20 Ill. Comp. Stat. Ann. 301/5-23(d)(2).

Naloxone Standing Order
» Illinois’ state standing order and procedure is available [here](#).
» Signed standing orders are available upon request [here](#). Pharmacies and Overdose Education and Naloxone Distribution (OEND) programs must complete training before they are able to obtain the standing order. Individuals who can help in an overdose emergency have to receive basic instructions on how to administer an opioid antagonist. 20 Ill. Comp. Stat. Ann. 301/5-23(b)(1).
» The standing order allows pharmacists and overdose education and naloxone distribution programs to provide intranasal naloxone (4mg Narcan, Sandoz, and Teva, and 8mg Kloxxado), 2 1ml vials or 1 10ml multi-dose vial of intramuscular naloxone with syringe, or ZIMHI 5mg pre-filled syringes.
» It also allows pharmacists and overdose education and naloxone distribution programs to distribute opioid antagonists to anyone who may assist someone with an overdose reversal.

Good Samaritan Laws
» General overdose GSL:
  o A person who seeks or obtains emergency assistance in good faith for someone experiencing an overdose will not be arrested, charged, or prosecuted for certain drug possession crimes or possession of paraphernalia if the charge is based on information collected as a result of calling for help. 720 Ill. Comp. Stat. Ann. 570/414(b).
  o The information gathered as a result of calling for help cannot serve as the sole basis of a violation of parole, mandatory supervised release, probation, or conditional discharge, a person’s pretrial release, or furlough, or civil forfeiture. 720 Ill. Comp. Stat. Ann. 570/414(b).
  o The person experiencing the overdose also qualifies for these immunities. 720 Ill. Comp. Stat. Ann. 570/414(c).
» Methamphetamine overdose GSL:
  o A person who seeks or obtains emergency assistance in good faith for a person experiencing a methamphetamine overdose will not be arrested, charged, or prosecuted for a certain methamphetamine possession crimes if the charge is based on information as a result of calling for help. 720 Ill. Comp. Stat. Ann. 646/115(b).
  o The information gathered as a result of calling for help cannot serve as the sole basis of a violation of parole, mandatory supervised release, probation, or conditional discharge, or civil forfeiture. 720 Ill. Comp. Stat. Ann. 646/115(b).
  o The person experiencing the overdose also qualifies for these immunities. 720 Ill. Comp. Stat. Ann. 646/115(c).
» Calling for help will be considered a mitigating factor in a class 3 felony or higher controlled substances charge or a class 2 felony or higher methamphetamine charge. 730 Ill. Comp. Stat. Ann. 5/5-5-3.1(a)(14).
Indiana

Legality of Injection and Smoking Equipment

» Knowingly or intentionally possessing an instrument, device, or other object that a person intends to use to introduce a controlled substance into the body is a class C misdemeanor. Ind. Code Ann. § 35-48-4-8.3(b)(1).
  o A class C misdemeanor is punishable by up to 60 days incarceration and a fine of not more than $500, with higher penalties for repeat offenses Ind. Code Ann. § 35-50-3-4.

» Delivery or sale of an instrument, device, or other object designed to introduce a controlled substance into the body is a class A infraction. Ind. Code Ann. § 35-48-4-8.5(a)(1).
  o A class A infraction is punishable by a fine up to $10,000. Ind. Code Ann. § 34-28-5-4(a).

» Knowing or intentional delivery or sale of an instrument, device, or other object designed to introduce a controlled substance into the body is a class A misdemeanor. Ind. Code Ann. § 35-48-4-8.5(b).
  o A class A misdemeanor is punishable by up to one year incarceration and a fine of not more than $5,000, with higher penalties for repeat offenses. Ind. Code Ann. § 35-50-3-2.

» Syringes do not require a prescription, but can only be purchased at a pharmacy or delivered in a pharmacy or practitioner’s office. 856 Ind. Admin. Code 2-6-18.

» Syringe service programs are permitted, but only in areas where a public health emergency has been declared or a program has been approved. Ind. Code Ann. § 16-41-7.5-4.

» SSPs are exempt from the paraphernalia delivery law. Ind. Code Ann. § 35-48-4-8.5(c)(3).

» A law enforcement officer cannot stop, search, or seize a person for participating in a syringe services program, and participation cannot be a basis for probable cause or reasonable suspicion. Ind. Code Ann. § 16-41-7.5-9. However, possession of syringes acquired at an SSP is still illegal. See Leatherman v. State, 101 N.E.3d 879, 886 (Ind. Ct. App. 2018), as corrected (Aug. 24, 2018).

» In summary, syringes and smoking equipment are drug paraphernalia and possession, delivery, and sale of drug paraphernalia is illegal. SSPs may distribute syringes, and participation in an SSP is not probable cause for a stop, but possession of syringes, even acquired at an SSP, is still illegal.

Legality of Drug Checking Equipment

» Knowingly or intentionally possessing an instrument, device, or other object that a person intends to use to test the strength, effectiveness, or purity of a controlled substance is a class C misdemeanor. Ind. Code Ann. § 35-48-4-8.3(b)(1).
  o A class C misdemeanor is punishable by up to 60 days incarceration and a fine of not more than $500, with higher penalties for repeat offenses. Ind. Code Ann. § 35-50-3-4.

» Delivery or sale of an instrument, device, or other object designed to test the strength, effectiveness, or purity of a controlled substance is, a class A infraction. Ind. Code Ann. § 35-48-4-8.5 (a)(1).
  o A class A infraction is punishable by a fine up to $10,000. Ind. Code Ann. § 34-28-5-4(a).
Knowing or intentional delivery or sale of an instrument, device, or other object designed to test the strength, effectiveness, or purity of a controlled substance is a class A misdemeanor. Ind. Code Ann. § 35-48-4-8.5(b).

A class A misdemeanor is punishable by up to one year incarceration and a fine of not more than $5,000, with higher penalties for repeat offenses. Ind. Code Ann. § 35-50-3-2.

SSPs are possibly allowed to distribute DCE. “This section [which prohibits delivery of objects intended, designed, or marketed to be used primarily for testing the strength, effectiveness, or purity of a controlled substance] does not apply to … [a] qualified entity (as defined in IC 16-41-7.5-3) that provides a syringe or needle as part of a program under IC 16-41-7.5 [syringe services program].” Ind. Code Ann. § 35-48-4-8.5(c)(3). SSPs are required to “[o]perate in a manner consistent with public health and safety” and “[e]nsure the program is medically appropriate and part of a comprehensive public health response.” Ind. Code Ann. § 16-41-7.5-6(7)-(8).

Naloxone Access Law

Indiana’s naloxone access law uses the term “overdose intervention drug” which is defined as “naloxone or any other drug that: (1) is an opioid, opiate, or morphine antagonist; and (2) prevents or reverses the effects of: (A) opioids; (B) opiates; or (C) morphine; including respiratory depression, sedation, and hypotension.” Ind. Code Ann. § 16-18-2-263.9.

A prescriber may prescribe, either directly or by standing order, and dispense an overdose intervention drug to a person at risk of experiencing an overdose, or family member, friend, or other person in a position to help someone experiencing an overdose, but must provide training and drug treatment information. Ind. Code Ann. § 16-42-27-2(a). The prescriber is immune from civil liability, so long as they acted without gross negligence or willful misconduct. Ind. Code Ann. § 16-42-27-3(a).

A pharmacist who dispenses an overdose intervention drug is immune from civil liability, so long as they acted without gross negligence or willful misconduct. Ind. Code Ann. § 16-42-27-3(b).

A person at risk of overdose or family member, friend, or other person in a position to help who gets naloxone via prescription or standing order may administer an overdose intervention drug to someone experiencing an overdose. Ind. Code Ann. § 16-42-27-2(c); (d). If they act in good faith and attempt to call for help, they cannot be accused of practicing medicine without a license, and they are immune from civil liability, so long as they act without gross negligence or willful misconduct. Ind. Code Ann. § 16-42-27-3(c).

Registered naloxone entities such as public health departments and harm reduction organizations may dispense an overdose intervention drug via standing order so long as they register annually with the state or a local health department, provide education on overdose response, provide drug treatment information, and submit an annual report to the state health department. Ind. Code Ann. § 16-42-27-2(e). See Indiana Department of Health Naloxone FAQ.

Naloxone Standing Order

Indiana’s statewide standing order is available here.
The statewide standing order must allow for choice of overdose intervention drug from any formulation or dosage of a naloxone product that is approved by the FDA. Ind. Code Ann. § 16-42-27-2(f).

Intranasal naloxone (Narcan and generic atomizer), intramuscular naloxone with syringe, and auto-injector naloxone are allowed to be dispensed under the standing order.

**Good Samaritan Law**


Additionally, the person must have come into contact with law enforcement because they tried to help a person experiencing an overdose, and:

- Attempted to call for help
- Provided their full name and any other relevant information to law enforcement
- Remained at the scene until medical assistance arrived

A person who administers naloxone and calls for help according to the law cannot be taken into custody solely for and is immune from criminal prosecution for possession of cocaine, methamphetamine, controlled substance, paraphernalia, synthetic drug, or marijuana. Ind. Code Ann. § 16-42-27-2(g), (h).

The fact that someone called for help for another person may be used as a mitigating factor in that person’s sentencing. Ind. Code Ann. § 35-38-1-7.1(b)(12).

There does not appear to be any protection for the person who overdosed.

**Iowa**

**Legality of Injection and Smoking Equipment**

All equipment, products or materials used to unlawfully inject or inhale a controlled substance into the human body are considered drug paraphernalia. Iowa Code § 124.414(1)(a)(2).

Delivery, sale, or possession of drug paraphernalia is a simple misdemeanor. Iowa Code § 124.414(2), (3).

- A simple misdemeanor is punishable by up to 30 days incarceration and a fine of up to $855. Iowa Code § 903.1.

The law excludes syringes from the definition of drug paraphernalia if they are manufactured, delivered, sold, or possessed for a “lawful purpose.” Iowa Code § 124.414(1)(b).

Syringe services programs are not explicitly legal in Iowa.

**Legality of Drug Checking Equipment**

All equipment, products or materials used to “knowingly or intentionally and primarily…test the strength, effectiveness, or purity of a controlled substance” are considered drug paraphernalia. Iowa Code § 124.414(1)(a)(3).

Delivery, sale, or possession of drug paraphernalia is a simple misdemeanor. Iowa Code § 124.414(2), (3).

- A simple misdemeanor is punishable by up to 30 days incarceration in addition to a fine of up to $855. Iowa Code § 903.1.
**Naloxone Access Law**

» Iowa’s naloxone access law uses the term “opioid antagonist,” which is defined as “a drug that binds to opioid receptors and blocks or inhibits the effects of opioids acting on those receptors, including but not limited to naloxone hydrochloride or any other similarly acting drug approved by the United States food and drug administration.” Iowa Code Ann. § 147A.1(9).

» A licensed healthcare professional may prescribe an opioid antagonist to a person in a position to help another person at risk of experiencing an overdose or to a secondary distributor. Iowa Code § 135.190(2)(a).

» Pharmacists may provide an opioid antagonist under a traditional prescription as well as through a standing order or collaborative practice agreement to a person in a position to help or a secondary distributor, and must provide written instruction on emergencies and treatment referrals. Iowa Code § 135.190(2)(b).

» A person in a position to help may distribute an opioid antagonist to any individual. Iowa Code § 135.190(5).

» A person in a position to help may possess and administer opioid antagonist in good faith to a person experiencing an opioid overdose. Iowa Code § 135.190(3).

» A person in a position to help, a secondary distributor, or a prescriber who has acted reasonably and in good faith is not liable for any injury caused by the provision or administration of the opioid antagonist. Iowa Code § 135.190(6).

» Though harm reduction programs are not explicitly authorized by law, secondary distributors may possess and provide an opioid antagonist to a person in a position to help, and that person may distribute to any individual. Iowa Code § 147A.18(4); Iowa Code § 135.190(3).

» “Secondary distributor” is defined as a “law enforcement agency, emergency medical services program, fire department, school district, health care provider, licensed behavioral health provider, county health department, or the department of health and human services.” Iowa Code § 135.190(1)(f).

**Naloxone Standing Order**

» The Iowa standing order will likely be found here, but at the time of writing, this website was still transitioning.

» The chief medical officer of the Department of Public Health may issue a standing order “for the purpose of dispensing opioid antagonists to a person in a position to assist.” Iowa Code § 135.190(4).

» Iowa law does not clearly permit a prescriber other than the chief medical officer to issue a standing order but permits a pharmacist to dispense under one. Iowa Code § 147A.18(b)(1). Further, licensed health care professionals may prescribe an opioid antagonist in the name of a service program, law enforcement agency, fire department, or secondary distributor to be maintained for use as provided by the law. Iowa Code § 147.18A(1)(a).

**Good Samaritan Law**

» If a person calls for help for themself, information or evidence collected as a result of calling for help shall not be considered probable cause or be admissible as evidence for the following crimes:
  - Delivery of a controlled substance without profit Iowa Code § 124.418(2)(a);
Possession of a controlled substance Iowa Code § 124.418(2)(b);
Hosting of people using controlled substances Iowa Code § 124.418(2)(c);
Possession of drug paraphernalia Iowa Code § 124.418(2)(d).

If a person seeks help for another person in need of medical assistance, the same immunity applies, but the individual seeking help must:
- Be the first person to seek help for the patient
- Provide their name and contact information to law enforcement or medical personnel
- Remain on the scene until help arrives
- Cooperate with law enforcement or medical personnel. Iowa Code § 124.418(1)(d).

A person’s pretrial release, probation, supervised release, or parole cannot be revoked based on information collected as a result of calling for help. Iowa Code § 124.418(3).

Calling for help or providing help can be used as a mitigating factor in other prosecutions. Iowa Code § 124.418(4).

Both the person who overdosed and a person who reported the overdose of another person may receive this immunity one time only. Iowa Code § 124.418(1)(b), (c).

Kansas

Legality of Injection and Smoking Equipment
- Syringes and smoking equipment are drug paraphernalia if used or intended to be used to inject or inhale controlled substances. Kan. Stat. Ann. § 21-5701(f)(2)(K), (L).
  - Class B non person misdemeanors are punishable by:
    - up to 6 months incarceration and/or Kan. Stat. Ann. § 21-6602(a)(2);
- Distribution, or possession with intent to distribute, drug paraphernalia knowing or where the person should have known it will be used illegally, is a crime. Kan. Stat. Ann. § 21-5710(b), (c), (d).
  - Penalties vary based on a variety of factors.
  - Distribution of paraphernalia to an adult knowing or where the distributor should know that it will be used to violate the law prohibiting simple possession is a class A nonperson misdemeanor. Kan. Stat. Ann. § 21-5710(e)(4).
    - A class a nonperson misdemeanor has a maximum penalty of:
      - 1 year in county jail and/or Kan. Stat. Ann. § 21-6602(a)(1);
  - Distribution or possession with intent to distribute paraphernalia to an adult knowing or where the distributor should have known that it would be used with other drug crimes is a nondrug severity 9 nonperson felony. Kan. Stat. Ann. § 21-5710(e)(3).
- Kansas has no laws allowing syringe services programs.

Legality of Drug Checking Equipment
- Equipment to test or analyze controlled substances are drug paraphernalia if used or intended to be used to inject or inhale controlled substances. Kan. Stat. Ann. § 21-5701(f)(2)(D).
» Use, possession, and distribution of drug checking equipment is prohibited and punishable as paraphernalia as described above.
  o However, any materials used to test for the presence of fentanyl, fentanyl analogs, ketamine, or GHB are exempted from the drug paraphernalia law. Kan. Stat. Ann. § 21-5701(f)(3)(B).

Naloxone Access Law
  » Kansas’ naloxone access law uses the term “emergency opioid antagonist” which is defined as “any drug that inhibits the effects of opioids and that is approved by the United States food and drug administration for the treatment of an opioid overdose.” Kan. Stat. Ann. § 65-16,127(a)(2).
  » Allows pharmacists to provide an emergency opioid antagonist to a person believed to be at risk of experiencing an opioid overdose and a bystander without an individual prescription under a state protocol. Kan. Stat. Ann. § 65-16,127(c).
    o A bystander is a family member, friend, caregiver or other person in a position to help a person whom the helper believes, in good faith, to be experiencing an opioid overdose. Kan. Stat. Ann. § 65-16,127(a)(1).
  » Any prescriber or pharmacist who prescribes or dispenses naloxone in good faith and with reasonable care is not civilly or criminally liable and cannot be subject to professional discipline. Kan. Stat. Ann. §65-16,127(g)(1).
  » Any patient, bystander, or first responder who receives and administers naloxone in good faith and with reasonable care is not subject to civil liability or criminal prosecution unless personal injury results from gross negligence or willful or wanton misconduct in the administration. Kan. Stat. Ann. §65-16,127(g)(2).

Naloxone Standing Order
  » Kansas’ statewide protocol is located here.
  » Kansas requires the state board of pharmacy to issue a statewide “opioid antagonist protocol that establishes requirements for a licensed pharmacist to dispense emergency opioid antagonists to a person pursuant to this section.” Kan. Stat. Ann. §65-16,127(b). The protocol appears to be the functional equivalent of a standing order.
  » Because Kansas’s protocol requires pharmacists to opt-in to the protocol, check with the pharmacy before attempting to get naloxone to see if they participate.
  » Kansas’s protocol includes 4mg-8mg intranasal naloxone in a ready-to-use nasal spray device (FDA-approved; examples: Narcan, Kloxxado), intranasal naloxone pre-filled syringe w/atomizer, two 1ml intramuscular naloxone vials with syringe, FDA approved auto-injector naloxone, and 2.7mg intranasal nalmefene.
  » Parental consent is required to provide naloxone to anyone under 18.
  » The pharmacist is required to provide counseling on how to administer naloxone and where to get substance use disorder (SUD) treatment to anyone getting naloxone under the protocol.

Good Samaritan Law
  » Kansas does not have drug overdose Good Samaritan law protections.
Kentucky

Legality of Injection and Smoking Equipment

» All products used, intended for use, or designed for use in injecting or inhaling controlled substances into the body in violation of the law are considered drug paraphernalia. Ky. Rev. Stat. § 218A.500(1)(k).

» Use, possession with intent to use, delivery, or possession with intent to deliver drug paraphernalia are all class A misdemeanors. Ky. Rev. Stat. § 218A.500(2), (3), (8).
  o Class A misdemeanors are punishable by a maximum of 1 year incarceration and/or Ky. Rev. Stat. Ann. § 532.090(1);

» If a law enforcement officer offers before a search, a person can admit to the presence of sharps in exchange for not being charged or prosecuted for possession of the paraphernalia or residual amounts of controlled substances in the paraphernalia. Ky. Rev. Stat. § 218A.500(6)(a).

» Syringe services programs operated by the local health department are authorized by law. Ky. Rev. Stat. § 218A.500(5). Syringe services programs must “have the consent” of the local board of health and the local jurisdiction or jurisdictions in which it operates. Ky. Rev. Stat. § 218A.500(5)(b).

» Syringes and other items exchanged at a SSP are not drug paraphernalia only while located at the program. Ky. Rev. Stat. § 218A.500(5)(c).

Legality of Drug Checking Equipment

» Equipment used, intended for use, or designed for use in testing or analyzing a controlled substance in violation of the law is considered drug paraphernalia. Ky. Rev. Stat. § 218A.500(1).

» Use, possession with intent to use, delivery, and possession with intent to deliver drug paraphernalia are all class A misdemeanors. Ky. Rev. Stat. § 218A.500(2), (3), (8).
  o Class A misdemeanors are punishable by a maximum of 1 year incarceration and/or Ky. Rev. Stat. Ann. § 532.090(1);

» “[N]arcotic drug testing products utilized in determining whether a controlled substance contains a synthetic opioid or its analogue” are specifically exempted from the drug paraphernalia definition. Ky. Rev. Stat. § 218A.500(7)(c)(1).

» Possession of a drug testing product that contains “residual or trace amounts” of a synthetic opioid or analog “shall not be prosecuted as possession of a controlled substance under any provision of this chapter.” Ky. Rev. Stat. § 218A.500(7)(d).

Naloxone Access Law

» Kentucky’s naloxone access law uses the term “opioid antagonist” which is defined as “naloxone or any other United States Food and Drug Administration-approved drug designed to reverse the effects of an opioid overdose.” Ky. Rev. Stat. Ann. § 217.186(1).

» A prescriber may prescribe, either directly or by standing order, and dispense an opioid antagonist to a person or agency who the prescriber believes can administer naloxone in an overdose emergency. Ky. Rev. Stat. Ann. § 217.186(2). The prescription may also authorize
another person to administer the drug to the person to whom it is prescribed, if the prescribing instructions direct that person to call for help. Ky. Rev. Stat. Ann. § 217.186(3).

» A pharmacist with a special certification may dispense an opioid antagonist according to a physician-approved protocol authorizing them to do so. They may dispense an opioid antagonist to a person or agency that trains the public to administer naloxone. 201 Ky. Admin. Regs. 2:360.

» Prescribers and pharmacists are immune from professional disciplinary action for prescribing or dispensing an opioid antagonist as permitted by the law. Ky. Rev. Stat. Ann. § 217.186(2).


Naloxone Standing Order

» Kentucky has a state protocol in place of a standing order, which is for pharmacists who do not have a medical provider to issue them a protocol.

» Allows pharmacists to distribute to the following categories of people:
  - Persons with a history of receiving care for overdose
  - Persons with suspected history of nonmedical opioid use
  - Persons on high-dose opioid prescriptions
  - Persons who are receiving their first methadone prescription for pain (opioid-naïve)
  - Persons starting on buprenorphine or methadone for SUD treatment
  - Persons on opioid prescriptions for pain in conjunction with certain other illnesses or prescriptions
  - Persons who may have difficulty calling for medical help
  - Any person or agency who voluntary requests an opioid antagonist.

» Allows 4mg or 8mg intranasal naloxone (Narcan or Kloxxado) or 5mg pre-filled IM syringe (Zimhi) or 2.7mg nalmefene spray for patients 12 or older (Opvee).

» As of October 5, 2023 the KY Department for Medicaid Services will cover the 4mg over-the-counter naloxone. That product may be dispensed under the protocol.

Good Samaritan Law

» Anyone who in good faith calls for help for themself, or helps another person call for help, or calls for help for another person experiencing a drug overdose cannot be charged or prosecuted for possession of a controlled substance or possession of drug paraphernalia, if the evidence for the charge was discovered because they called for help, but only if they remain with the person in need of help and the evidence for the charge or prosecution was obtained because of the need for medical assistance. Ky. Rev. Stat. Ann. § 218A.133(2).

» This protection also applies to the person who overdosed.

» Law requires reporting of contact information of requester, where available, to local health department, and for health department to make contact with that person “in order to offer referrals regarding substance abuse treatment, if appropriate.” Ky. Rev. Stat. Ann. § 218A.133(4).
Louisiana

Legality of Injection and Smoking Equipment
» Syringes and smoking equipment are considered drug paraphernalia when used, intended for use, or designed for use in injecting or inhaling controlled substances into the body in violation of the law. La. Stat. Ann. § 40:1021(A)(11), (12).
» It is unlawful to sell, give, exchange, distribute, or possess with intent to distribute drug paraphernalia. La. Stat. Ann. § 40:1023(A), (B).
  o Use, possession with intent to use, sell, or distribute drug paraphernalia is a misdemeanor punishable by up to a $300 fine and/or a maximum of 15 days incarceration. La. Stat. Ann. § 40:1025(A)(1).
» Syringes may only be sold by legally authorized dealers, including pharmacists, and the purchaser must show a legitimate medical need, which can include preventing the spread of disease. 46 La. Admin. Code Pt LIII, 2509(A).
» The paraphernalia law specifies that it “shall not prohibit the establishment and implementation of” a “needle exchange program” within a local jurisdiction, so long as local authorities approve. La. Stat. Ann. § 40:1024(C).

Legality of Drug Checking Equipment
» Drug paraphernalia means all “equipment, products, and materials of any kind which are used, intended for use, or designed for use in…testing, analyzing… or otherwise introducing into the human body a controlled substance in violation of the Uniform Controlled Dangerous Substances Law.” La. Stat. Ann. § 40:1021(A)(1), (5).
» “Rapid fentanyl test strips (FTS) or any testing equipment or equipment or devices solely used, intended for use, or designed to determine whether a substance contains fentanyl or its analogues” are explicitly excluded from the definition of drug paraphernalia. La. Stat. Ann. § 40:1021(B).

Naloxone Access Law
» A prescriber may, directly or by standing order, prescribe and dispense naloxone or another opioid antagonist if they train the recipient on its use. La. Stat. Ann. § 40:978.2(A).
» A pharmacist shall dispense naloxone or another opioid antagonist that is prescribed directly by and licensed prescriber or under a standing order La. Stat. Ann. § 40:978.2(C).
» A prescriber who lawfully prescribes or a pharmacist who lawfully dispenses naloxone or another opioid antagonist is immune from civil and criminal liability and disciplinary action under a professional licensing statute. La. Stat. Ann. § 40:978.2(B); (C)(2).
» Any person or organization acting under a standing order may possess and dispense distribute naloxone or another opioid antagonist if they do so without charge or compensation. La. Stat. Ann. § 40:978.2(D).
» A person who, in good faith, administers naloxone or another opioid antagonist to a person they believe to be experiencing an overdose, has civil and criminal immunity for damages so long as the person did not act with gross negligence or willful or wanton misconduct. La. Stat. Ann. § 40:978.2(F).

**Naloxone Standing Order**

» Louisiana’s standing order is located here.

» Allows pharmacists to give out any naloxone or other opioid antagonist administered through a device approved for that purpose by the FDA to a person who is trained to recognize and respond to an overdose. La. Stat. Ann. § 40:978.2(A)(1), (2).

**Good Samaritan Law**

» Anyone who in good faith seeks medical assistance for a person experiencing a drug overdose cannot be charged, prosecuted, or penalized for possession of a controlled dangerous substance or drug paraphernalia if the information supporting the charge was found as a result of calling for help. La. Stat. Ann. § 14:403.10(A)(1).

» This protection also applies to the person who overdosed. Additionally, the person who overdosed may not be arrested. La. Stat. Ann. § 14:403.10(B)(1).

» Any person eligible for these immunities is also immune from:
  - sanctions for a violation of a condition of pretrial release, condition of probation, or condition of parole, related to the incident which required medical assistance La. Stat. Ann. § 14:403.10(A)(2)(a), (B)(2)(a) or;

» Providing or seeking first aid or other medical assistance may also be used as a mitigating factor in prosecution for other crimes. La. Stat. Ann. § 14:403.10(D).

**Massachusetts**

**Legality of Injection and Smoking Equipment**

» Simple possession of drug paraphernalia is not illegal.

» Free distribution of drug paraphernalia is not illegal.

» Sale of drug paraphernalia, which includes “all equipment, products or materials used to introduce a controlled substance into the body” is illegal. Mass. Gen. Laws Ann. ch. 94C, § 32I(a).
  - It is punishable by 2 years maximum imprisonment and/or a $5,000 maximum fine. Mass. Gen. Laws Ann. ch. 94C, § 32I(a).

» Syringes and needles may only be sold by a pharmacist, or a person working in surgical supplies or embalming supplies. Mass. Gen. Laws Ann. ch. 94C, § 27.

» Syringe services programs are authorized by law, with the approval of the local board of health. Mass. Gen. Laws Ann. ch. 111, § 215. However, as noted above, the possession and free distribution of syringes and other paraphernalia is not illegal, regardless of source. Further, the state Supreme Judicial Court has ruled that state approval is not required for a private SSP to freely distribute syringes. AIDS Support Group of Cape Cod, Inc. v. Town of Barnstable, 447 Mass. 296, 76 N.E.3d 969 (2017).
Legality of Drug Checking Equipment

» Simple possession or distribution of paraphernalia is not illegal, including drug checking equipment. However, sale of drug paraphernalia, knowing, or under circumstances where one reasonably should know, that it will be used to test or analyze a controlled substance, is illegal under the drug paraphernalia laws noted above. Mass. Gen. Laws Ann. ch. 94C, § 32I(a).

Naloxone Access Law

» “Opioid antagonist” means “naloxone or any other drug approved by the federal Food and Drug Administration as a competitive narcotic antagonist used in the reversal of overdoses caused by opioids.” Mass. Gen. Laws Ann. ch. 94C, § 19B(a).

» An opioid antagonist may be prescribed and dispensed to a person at risk of overdose, or a family member, friend, or other person in a position to help someone experiencing an overdose. Mass. Gen. Laws Ann. ch. 94C, § 19(d).

» A pharmacist may dispense an opioid antagonist under a statewide standing order issued by the commissioner of the department of public health or a physician designated by the commissioner. Mass. Gen. Laws Ann. ch. 94C, § 19B(b), (c).

» A prescriber who prescribes or dispenses, and a pharmacist who dispenses an opioid antagonist, and the commissioner or physician who issues the statewide standing order, is immune from civil and criminal liability, or professional disciplinary action, so long it was not an act of gross negligence or willful misconduct. Mass. Gen. Laws Ann. ch. 94C, § 19B(c), (f).


» A person acting in good faith may receive a naloxone prescription, possess naloxone, and administer naloxone to someone appearing to be experiencing an overdose. Mass. Gen. Laws Ann. ch. 94C, § 34A(e).

Naloxone Standing Order

» Massachusetts’ naloxone standing order is located here.

» Allows pharmacists to dispense 4mg or 8mg intranasal naloxone spray, 2mg prefilled syringe with atomizer, and 1ml vials of intramuscular naloxone with syringe or 5mg prefilled intramuscular syringe to a person at risk of overdose or a friend, family member, or other person in a position to help.

Good Samaritan Law

» Anyone who in good faith seeks medical assistance, either for themself or another person experiencing a drug overdose, cannot be charged or prosecuted for possession of a controlled substance if the evidence for the charge was discovered because they called for help. Mass. Gen. Laws Ann. ch. 94C, § 34A(a), (b).

» Anyone who in good faith seeks medical assistance, either for themself or another person experiencing a drug overdose, cannot be found in violation of probation, parole, or pretrial release if the evidence for the charge was discovered because they called for help. Mass. Gen. Laws Ann. ch. 94C, § 34A(a), (b).
These protections also apply to the person who overdosed. Mass. Gen. Laws Ann. ch. 94C, § 34A(b).

Calling for help may be used as a mitigating factor in a criminal prosecution for another charge. Mass. Gen. Laws Ann. ch. 94C, § 34A(c).

Maryland

Legality of Injection and Smoking Equipment


Syringes used, intended for use, or designed for use in injecting controlled substances are considered both drug paraphernalia and controlled paraphernalia. Md. Code Ann., Crim. Law §§ 5-101(p)(2)(xi); 5-101(h)(1).

Equipment used or designed to be used to inhale controlled substances in violation of the law is considered drug paraphernalia. Md. Code Ann., Crim. Law § 5-101(p)(1).

It is a misdemeanor to use or possess with intent to use drug paraphernalia to inject or inhale a controlled substance into the body. Md. Code Ann., Crim. Law § 5-619(c)(1)(i).

- This misdemeanor is punishable by a fine up to $500 for a first violation. Md. Code Ann., Crim. Law § 5-619(c)(2)(i).

It is a misdemeanor to deliver, sell, or possess with intent to deliver or sell drug paraphernalia to inject or inhale a controlled substance into the body. Md. Code Ann., Crim. Law § 5-619(d)(1)(ii).

- This misdemeanor is punishable by a fine up to $500 for a first violation. Md. Code Ann., Crim. Law § 5-619(d)(2)(i).

It is a misdemeanor to possess or distribute controlled paraphernalia under circumstances which indicate that the paraphernalia will be used to illegally administer a controlled dangerous substance. Md. Code Ann., Crim. Law § 5-620(a)(2).

- Violation is punishable by up to 4 years incarceration and/or a fine of up to $25,000. Md. Code Ann., Crim. Law § 5-620(d).

Syringes may only be sold by pharmacists to those who show ID and explain the need for the syringes. Md. Code Regs. 10.13.08.01.

An AIDS Prevention Sterile Needle and Syringe Exchange Pilot Program is authorized in Baltimore City. Md. Code Ann., Health-Gen. § 24-802. Staff members and participants cannot be found guilty of possessing or distributing paraphernalia if it is from the exchange, but only in the city of Baltimore. Md. Code Ann., Health-Gen. § 24-808(b)(3).

Opioid-Associated Disease Prevention and Outreach Programs may be established by local health departments or community-based organizations with approval by the local department. These programs are allowed to distribute and collect needles and syringes. Md. Code Ann., Health-Gen. § 24-902(a). Staff members, volunteers, and participants cannot be arrested, charged, or prosecuted for possessing or distributing controlled paraphernalia or drug paraphernalia if it is from an authorized Program. Md. Code Ann., Health-Gen. § 24-908(a).

Legality of Drug Checking Equipment

The definition of “drug paraphernalia” continues to include “testing equipment used, intended for use, or designed for use in analyzing the strength, effectiveness, or purity of a controlled dangerous substance.” Md. Code Ann., Crim. Law § 5-101(p)(2)(iv).
However, “test” and “analyze” have been removed from the list of activities that it is impermissible to undertake with drug paraphernalia. The law currently reads as follows: “Unless authorized under this title, a person may not use or possess with intent to use drug paraphernalia to: (i) plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, prepare, pack, repack, store, contain, or conceal a controlled dangerous substance; or (ii) inject, ingest, inhale, or otherwise introduce into the human body a controlled dangerous substance.” Md. Code Ann., Crim. Law § 5–619(c)(1).

Testing and analyzing were also removed from the law that prohibits delivery or sale of drug paraphernalia. Md. Code Ann., Crim. Law § 5–619(d)(1).

Therefore, it is now legal to distribute and possess drug checking equipment in Maryland.

**Naloxone Access Law**

A prescriber may prescribe and dispense “an opioid overdose reversal drug approved by the federal Food and Drug Administration” to a person at risk of overdose or other person in a position to help someone experiencing an overdose. Md. Code Ann., Health-Gen. § 13-3106(a).

A prescriber may issue a standing order if they are employed by a health department or if they have a written agreement with an authorized organization and may allow an employee or volunteer of an organization to distribute overdose reversal drugs. Md. Code Ann., Health-Gen. § 13-3106(b).

A licensed healthcare provider who lawfully prescribes or dispenses an overdose reversal drug or a pharmacist is not subject to disciplinary action and is immune from civil liability if they act in good faith. Md. Code Ann., Health-Gen. §§ 13-3107(c); 13-3108(b).

Authorized entities can enter into a protocol to dispense an overdose reversal drug. Md. Code Ann., Health-Gen. § 13-3104.


A person who administers an overdose reversal drug to a person who is believed to be experiencing an overdose has civil immunity. Md. Code Ann., Health-Gen. § 13-3108(a).

**Naloxone Standing Order**

Maryland’s statewide standing order for overdose reversal drugs is located here.

Allows Maryland-licensed pharmacists to dispense a two dose package of intranasal naloxone spray, 2mg/2ml prefilled syringes with atomizer, or 1mg vial intramuscular naloxone with syringe to any individual with instructions on use and responding to an overdose.

**Good Samaritan Law**

Anyone who in good faith seeks, provides, or assists with the provision of medical assistance for themself or another person experiencing a drug overdose cannot be arrested, charged, or prosecuted for possession of controlled substances or paraphernalia if the evidence for the charge was discovered because they called for help. Immunity is also provided for improperly obtaining, possessing, or distributing controlled paraphernalia. Md. Code Ann., Crim. Proc. § 1-210(b).

These protections also apply to the person who overdosed. Md. Code Ann., Crim. Proc. § 1-210(c).
A person also cannot be sanctioned for violating pretrial release, probation, or parole, if the violation was discovered because they provided or called for help or if they were the person experiencing the overdose. Md. Code, Crim. Proc. § 1-210(d).

The fact that a person called for help can be used as a mitigating factor in a criminal prosecution for both the caller and the person who overdosed. Md. Code, Crim. Proc. § 1-210(a).

Maine

Legality of Injection and Smoking Equipment


State law permits the Maine Center for Disease Control and Prevention to certify SSPs Me. Rev. Stat. tit. 22, § 1341. The Center has created a number of rules governing the requirements for certification and operation. These rules include a requirement that SSPs generally adhere to one-for-one exchange, with limited exceptions. Code Me. R. tit. 10-144 Ch. 252, § II.

Residual amount of a controlled substance in a needle or syringe is excluded from the law prohibiting controlled substance possession. Me. Rev. Stat. tit. 17-A, § 1107-A(6).

In summary, possession and distribution of injection and smoking equipment by anyone is not illegal.

Legality of Drug Checking Equipment


Naloxone Access Law

A healthcare professional may, directly or by standing order, prescribe naloxone hydrochloride or another opioid-overdose reversing medication to a person at risk of experiencing an overdose or a family member, friend, or other person in a position to help. Me. Rev. Stat. Ann. tit. 22, § 2353(2)(A)(C).


A pharmacist may prescribe and dispense naloxone to a person at risk of experiencing an overdose or a family member, friend, or other person in a position to help. Me. Rev. Stat. Ann. tit. 22, § 2353(2)(A-1), (C-1).

A person at risk of overdose who receives naloxone via prescription or standing order may provide that naloxone to a family member to possess and use in an overdose emergency. Me. Rev. Stat. Ann. tit. 22, § 2353(2)(B).

An organization acting under a standing order may store naloxone and provide naloxone to people who have completed training, including, “with the express consent of a municipality,” by publicly accessible boxes or containers. Me. Rev. Stat. Ann. tit. 22, § 2353(4).
A healthcare professional or pharmacist acting in good faith and with reasonable care is immune from civil and criminal liability and professional discipline for storing, dispensing, or prescribing naloxone or another opioid-overdose reversing medication. Me. Rev. Stat. Ann. tit. 22, § 2353(5)(A).

Any person acting in good faith and with reasonable care is immune from civil and criminal liability and professional discipline for providing naloxone to another person or for administering naloxone to a person they believe is experiencing an overdose. Me. Rev. Stat. Ann. tit. 22 § 2353(5)(D).

Naloxone Standing Order

Maine law permits standing orders; however, no general statewide standing order appears to have been issued.

Maine has, however, issued a standing order for OTC naloxone for MaineCare members.

Good Samaritan Law

Anyone who in good faith calls for help or administers aid to another person experiencing a drug overdose may not be arrested or prosecuted for any crimes outside of a list of major and generally unrelated crimes, so long as the grounds for the arrest or prosecution and the person’s identity were obtained as a result of the first responder responding to the overdose. Me. Rev. Stat. tit. 17-A, § 1111-B(1)(A); (2).

A person who qualifies for immunity from arrest and prosecution is also immune from revocation or termination proceedings for parole or other supervised release. Me. Rev. Stat. tit. 17-A, § 1111-B(1)(A); (3).


Michigan

Legality of Injection and Smoking Equipment

All equipment, products or materials used to inject or inhale a controlled substance into the human body are considered drug paraphernalia. Mich. Comp. Laws § 333.7451.

Possession of drug paraphernalia is not illegal under state law.

Free distribution of drug paraphernalia is not illegal under state law.

Sale of drug paraphernalia or offering drug paraphernalia for sale knowing that it will be used to introduce a controlled substance into the body is illegal. Mich. Comp. Laws Ann. § 333.7453.

Sale and offering for sale is a misdemeanor punishable by up to 90 days incarceration and/or $5,000 maximum fine. Mich. Comp. Laws Ann. § 333.7455(1).

Many municipalities have local ordinances that make sale or possession of syringes illegal in some cases.

Legality of Drug Checking Equipment

All equipment, products or materials used to test or analyze a controlled substance are considered drug paraphernalia under Mich. Comp. Laws § 333.7451.

Possession of drug paraphernalia is not illegal.
Free distribution of drug paraphernalia is not illegal under state law. Sale of drug paraphernalia or offering drug paraphernalia for sale knowing that it will be used to introduce a controlled substance into the body is illegal. Mich. Comp. Laws Ann. § 333.7453.
  - Sale and offering for sale is a misdemeanor punishable by 90 days maximum incarceration and/or $5,000 maximum fine. Mich. Comp. Laws Ann. § 333.7455(1).

Naloxone Access Law
- Michigan’s naloxone access law uses the term “opioid antagonist,” which is defined as “naloxone hydrochloride or any other similarly acting and equally safe drug approved by the federal food and drug administration for the treatment of drug overdose.” Mich. Comp. Laws Ann. § 333.1106(1).
- A prescriber may prescribe or dispense and pharmacists may dispense an opioid antagonist to a person at risk of overdose, or a family member, friend, or other person in a position to help someone experiencing an overdose, a person who meets a list of requirements in the law, or an agency authorized to purchase, possess, and distribute naloxone. Mich. Comp. Laws § 333.17744b(1).
- A pharmacist may dispense an opioid antagonist to individuals or community based organizations under a standing order that is issued by the chief medical executive in the department of health and human services. Mich. Comp. Laws § 333.17744e(1).
- A prescriber who lawfully prescribes or dispenses or a pharmacist who lawfully dispenses an opioid antagonist that was properly stored and dispensed is immune from civil liability in any injury resulting from the administration of the opioid antagonist. Mich. Comp. Laws § 333.17744b(5).
- A person who administers an opioid antagonist to a person they, in good faith, believe to be experiencing an overdose, has civil immunity for damages resulting from the use of the opioid antagonist so long as the person did not engage in willful or wanton misconduct. Mich. Comp. Laws § 691.1503. The person who administers an opioid antagonist is also immune from criminal prosecution or professional sanction. Mich. Comp. Laws §§ 333.17744c. The chief medical executive who issues a standing order, a pharmacist who dispense an opioid antagonist under a standing order, and a community-based organization of staff member of a community-based organization who distributes an opioid antagonist under a standing order are all provided civil immunity from the dispensing and administration or failure of administration of an opioid antagonist. 333.17744e(3).

Naloxone Standing Order
- Michigan’s naloxone standing order is located here.
- Allows pharmacists and community-based organizations to distribute “all formulations” of naloxone that are FDA approved, including OTC, to a person at risk of overdose or a friend, family member, or other person in a position to help. Pharmacists must provide educational materials.

Good Samaritan Law
Anyone who in good faith “attempts to procure medical assistance” for themself or another person experiencing a drug overdose or accompanies someone who needs help, cannot be arrested, charged, or prosecuted for the use or possession of an amount of controlled substances that is for personal use only, if the evidence for the charge was discovered because they called for help. Mich. Comp. Laws § 333.7404(3)(b).

This protection also applies to the person who overdosed. Mich. Comp. Laws § 333.7404(3)(a).

Minneapolis

Legality of Injection and Smoking Equipment

The definition of drug paraphernalia specifically excludes syringes, but equipment used to inhale controlled substances is still listed under the definition of drug paraphernalia. Minn. Stat. Ann. § 152.01(18)(b), (18).

Minnesota does not criminalize the use, possession, delivery, or sale of drug paraphernalia.


Minnesota law defines “syringe services providers” as community-based public health programs that offer cost-free comprehensive harm reduction services “which may include” providing sterile needles, syringes, and other injection equipment. Minn. Stat. Ann. § 151.01 Subd. 43.

Legality of Drug Checking Equipment

The definition of drug paraphernalia does not include equipment used for testing the strength, effectiveness or purity of a controlled substance. Minn. Stat. Ann. § 152.01 Subd. 18(a).

Products that detect the presence of fentanyl or a fentanyl analog are specifically excluded from the definition of drug paraphernalia, as well. Minn. Stat. Ann. § 152.01 Subd. 18(b).

Naloxone Access Law

“Opiate antagonist” is defined as “naloxone hydrochloride or any similarly acting drug approved by the federal Food and Drug Administration.” Minn. Stat. Ann. § 604A.04 Subd. 1.

A prescriber may prescribe, directly or by standing order, and dispense, distribute, or administer an opiate antagonist without being subject to civil or criminal liability, regardless of to whom and by whom the opiate antagonist is eventually administered. Minn. Stat. Ann. § 604A.04 Subd. 3.

A person who is not a health care professional may possess or administer an opiate antagonist that was lawfully obtained and is immune from criminal prosecution or civil liability if they act in good faith to administer the opiate antagonist to a person experiencing a drug overdose. Minn. Stat. Ann. § 604A.04 Subd. 2.

Naloxone Standing Order

A sample standing order that allows for the distribution of nasal spray naloxone is available for mandated groups including schools, law enforcement, and corrections here.

The Minnesota Board of Pharmacy developed a protocol for naloxone dispensing, available here.
**Good Samaritan Law**

» A person who calls for help in good faith for another person experiencing a drug-related overdose may not be charged or prosecuted for possessing, sharing, or using a controlled substance, or for possession of drug paraphernalia, only if:
  
  o Evidence of the violation was obtained as a result of the person calling for help
  o The person who calls for help is the first person to call for help, provides their name and contact information, remains on the scene, and cooperates with authorities. [Minn. Stat. Ann. § 604A.05 Subd. 1.](#)

» Good faith does not include calling for help during the execution of an arrest or search warrant, or any lawful search. [Minn. Stat. Ann. § 604A.05 Subd. 1.](#)

» A person’s pretrial release, probation, furlough, supervised release, or parole cannot be revoked based on that person calling for help. [Minn. Stat. Ann. § 604A.05 Subd. 3.](#)

» Calling for help can be used as a mitigating factor in other criminal prosecutions. [Minn. Stat. Ann. § 604A.05 Subd. 4.](#)

» The person who overdosed has the same protections. [Minn. Stat. Ann. § 604A.05 Subd. 2.](#)

**Mississippi**

**Legality of Injection and Smoking Equipment**

» Syringes and smoking equipment are considered drug paraphernalia when they are used, intended to be used, or designed to be used to inject or inhale controlled substances in violation of the law. [Miss. Code Ann. § 41-29-105(v)(i).](#)

» The use or possession with intent to use drug paraphernalia is a misdemeanor, punishable by a maximum of 6 months in county jail and/or a maximum $500 fine. [Miss. Code Ann. § 41-29-139(d)(1).](#)

» The sale, delivery, and possession with intent to sell or deliver drug paraphernalia is a misdemeanor, punishable by a maximum of 6 months in county jail and/or a maximum $500 fine. [Miss. Code Ann. § 41-29-139(d)(2).](#)

» Syringe services programs are not authorized in Mississippi.

**Legality of Drug Checking Equipment**

» Drug paraphernalia includes equipment used, intended to be used, or designed to be used to test or analyze controlled substances. [Miss. Code Ann. § 41-29-105(v)(i).](#)

» The use or possession with intent to use drug paraphernalia is a misdemeanor, punishable by a maximum of 6 months in county jail and/or a maximum $500 fine. [Miss. Code Ann. § 41-29-139(d)(1).](#)

» The sale, delivery, and possession with intent to sell or deliver drug paraphernalia is a misdemeanor, punishable by a maximum of 6 months in county jail and/or a maximum $500 fine. [Miss. Code Ann. § 41-29-139(d)(2).](#)

» However, paraphernalia explicitly does not include any materials “used or intended for use in testing for the presence of fentanyl or a fentanyl analog in a substance.” [Miss. Code Ann. § 41-29-105(v)(iii).](#)
Naloxone Access Law

» Opioid antagonist is defined as “any drug that binds to opioid receptors and blocks or inhibits the effects of opioids acting on those receptors and that is approved by the federal Food and Drug Administration for the treatment of an opioid-related overdose.” Miss. Code Ann. § 41-29-319(2)(f).

» A prescriber may prescribe, directly or by standing order, and a pharmacist may dispense an opioid antagonist to a person at risk of overdose or a pain management clinic, family member, friend, or other person able to help someone experiencing an overdose. Miss. Code Ann. § 41-29-319(3), (4).

» Before a pharmacist can dispense an opioid antagonist under a standing order, they must complete a training program approved by the State Board of Pharmacy. Miss. Code Ann. § 41-29-319(4).

» Any prescriber who prescribes or issues a standing order, or any prescriber or pharmacist who dispenses an opioid antagonist, is immune from civil and criminal liability and professional discipline. Miss. Code Ann. § 41-29-319(8)(a), (b).

» A person who administers an opioid antagonist in good faith to a person experiencing an overdose is immune from civil or criminal penalties, so long as they exercise reasonable care. Miss. Code Ann. § 41-29-319(8)(c)(i).

» Education employees are allowed to distribute, store, and administer naloxone, and individuals who receive naloxone from an education employee are authorized to administer and store that naloxone. Miss. Code Ann. § 41-29-319(5)(b), (7)(a), (8)(c)(ii).

Naloxone Standing Order

» The Mississippi naloxone standing order is available here.

» The order allows pharmacists to dispense intranasal naloxone (Narcan spray, Kloxxado spray, or 2ml prefilled syringe with generic atomizer), 1ml vial intramuscular naloxone with syringe, or 5mg ZIMHI prefilled syringe to people who are at risk of overdose or are a friend, family member, or other person in the position to help in the case of an overdose.

Good Samaritan Law

» A person may not be arrested, charged, or prosecuted with certain types of simple possession or use of a controlled substance or drug paraphernalia so long as the person sought medical assistance in good faith for themself or another person. Miss. Code Ann. § 41-29-149.1(3)(a).

» Any person protected under this law cannot be penalized for violation of a protective or restraining order or for violation of a condition of pretrial release, probation, or parole based on a drug violation. They are also not subject to forfeiture, other than contraband. Miss. Code Ann. § 41-29-149.1(3)(c).

» The person who overdosed has the same protections. Miss. Code Ann. § 41-29-149.1(3)(b).

Missouri

Legality of Injection and Smoking Equipment

» Drug paraphernalia includes equipment products, substances and materials used, intended for use, or designed for use in injecting or inhaling controlled substances into the body in violation of the law. Mo. Ann. Stat. § 195.010(18), (18)(k).
The use and possession with intent to use drug paraphernalia that a reasonable person would know will be used to inject a controlled substance into the body is a class D misdemeanor, punishable by a fine of up to $500. Mo. Rev. Stat. § 558.002(1)(5).

Sale, distribution, or delivery and possession with intent to sell, distribute, or deliver drug paraphernalia is a class A misdemeanor, punishable by up to 1 year incarceration and/or a $2000 maximum fine. Mo. Ann. Stat. §§ 579.040(1); 558.002(1)(2).

Syringe services programs are not authorized in Missouri.

**Legality of Drug Checking Equipment**

- Testing equipment is drug paraphernalia when used, intended for use, or designed for use in identifying, or in analyzing the strength, effectiveness or purity of controlled substances. Mo. Ann. Stat. § 195.010(18)(d).
- The use and possession with intent to use drug paraphernalia that a reasonable person would know will be used to inject a controlled substance into the body is a class D misdemeanor, punishable by a fine of up to $500. Mo. Rev. Stat. § 558.002(1)(5).
- Sale or delivery and possession with intent to sell or deliver drug paraphernalia is a class A misdemeanor, punishable by up to 1 year incarceration and/or a $2000 maximum fine. Mo. Ann. Stat. §§ 579.040(1); 558.002(1)(2).

**Naloxone Access Law**

- “Opioid antagonist” is defined as “naloxone hydrochloride, or any other drug or device approved by the United States Food and Drug Administration.” Mo. Ann. Stat. § 195.206(1)(2).
- The director of the department of health, if they are a physician, or a licensed physician acting with the consent of the director, may issue a statewide standing order for an opioid antagonist. Mo. Ann. Stat. § 195.206(2)(1).
- Any pharmacist may sell and dispense an opioid antagonist under the standing order or a physician protocol and is immune from criminal or civil liability or professional discipline so long as they act with good faith and reasonable care. A physician who authorizes a protocol or authorizes the standing order also receives this immunity. Mo. Ann. Stat. § 195.206(4).
- Any person who administers an opioid antagonist to someone suffering from an opioid-related overdose is immune from criminal or civil liability or professional discipline so long as they act with good faith and reasonable care. Mo. Ann. Stat. § 195.206(6). That person must contact emergency personnel after administering the drug.
- Pharmacists may dispense an opioid antagonist to anyone they are authorized to give it to under the standing order or protocol. Mo. Ann. Stat. § 195.206(3).
- The naloxone access law also provides the same access to “addiction mitigation medication,” defined as naltrexone hydrochloride administered in a manner approved by the FDA. Mo. Ann. Stat. § 195.206(1)(1).
- Any person or organization who receives an opioid antagonist under a standing order may store it and dispense it so long as they do it for free. Mo. Ann. Stat. § 338.205(1).

**Naloxone Standing Order**

- Missouri’s naloxone standing order is located [here](#).
The order allows pharmacists to dispense intranasal naloxone (4mg or 8mg), 1ml vial intramuscular naloxone with syringe, or 2ml prefilled syringes to people who are at risk of overdose or a friend, family member, or other person in the position to help in the case of an overdose.

The standing order requires that everyone given naloxone must be trained on its use.

**Good Samaritan Law**

A person who seeks or obtains medical assistance in good faith for themself or another person experiencing a drug overdose may not be arrested, charged, prosecuted, convicted, or receive any other penalty for possession of a controlled substance or imitation controlled substance, possession or use of drug paraphernalia, or public nuisance, so long as the evidence for the charges is discovered as a result of calling for help. *Mo. Ann. Stat. § 195.205(2)(1), (2).*

Any person protected under this law cannot be penalized for violation of a protective order or for violation of a condition of probation or parole. They are also not subject to civil forfeiture. *Mo. Ann. Stat. § 195.205(2)(3), (4).*

The person who overdosed has the same protections. *Mo. Ann. Stat. § 195.205(2).*

**Montana**

**Legality of Injection and Smoking Equipment**

Anything used, intended to be used, or designed to be used to inject or inhale a dangerous drug is drug paraphernalia. *Mont. Code Ann. § 45-10-101(1).*

The use or possession with intent to use drug paraphernalia is a misdemeanor, punishable by up to 6 months in county jail and/or $500 maximum fine. *Mont. Code Ann. § 45-10-103.*

The delivery, and possession with intent to deliver drug paraphernalia is a misdemeanor, punishable by up to 6 months in county jail and/or $500 maximum fine. *Mont. Code Ann. § 45-10-104.*

The laws regarding syringes do not apply to employees or volunteers of an organization providing syringe services. *Mont. Code Ann. § 45-10-107(3).* This law appears to authorize syringe services programs, but does not appear to provide protection to clients of the program from the drug paraphernalia laws.

**Legality of Drug Checking Equipment**

Anything used, intended to be used, or designed to be used to test or analyze a dangerous drug is drug paraphernalia. *Mont. Code Ann. § 45-10-101(1).*

The word “test” has been removed from the law against use or possession with intent to use drug paraphernalia. *Mont. Code Ann. § 45-10-103.*

The delivery, and possession with intent to deliver drug paraphrenia is a misdemeanor, punishable by up to 6 months in county jail and/or $500 maximum fine. *Mont. Code Ann. § 45-10-104.*

**Naloxone Access Law**

“Opioid antagonist” is defined as “naloxone hydrochloride and any other similarly acting drug approved by the United States food and drug administration.” *Mont. Code Ann. § 50-32-603(10).*
The state medical officer may prescribe an opioid antagonist on a statewide basis by standing order. Mont. Code Ann. § 50-32-604.

A prescriber may prescribe, directly, by standing order, or by collaborative practice agreement, or dispense an opioid antagonist to an eligible recipient. Mont. Code Ann. § 50-32-605.

Eligible recipients include people who are at risk of overdose or are a friend, family member, or other person in the position to help in the case of an overdose, in addition to first responders, state crime labs, probation/parole officers, harm reduction organizations, public health officials, and veterans’ service organizations. Mont. Code Ann. § 50-32-603.


A person who lawfully acquires an opioid antagonist and has received basic instruction may possess, store, and distribute opioid antagonists to an eligible recipient. Mont. Code Ann. § 50-32-607(a), (c). They may also, in good faith, administer an opioid antagonist to a person experiencing an overdose. Mont. Code Ann. § 50-32-607(b).

Any prescriber, pharmacist, or eligible recipient is immune from civil or criminal liability or disciplinary action for lawfully prescribing, dispensing, or distributing an opioid antagonist, so long as there was no gross negligence, willful or wanton misconduct, or intentional tort. Mont. Code Ann. § 50-32-608(2).

A prescriber, eligible recipient, emergency care provider, or other person is not liable for disciplinary action for administering an opioid antagonist, so long as there was no gross negligence, willful or wanton misconduct, or intentional tort. Mont. Code Ann. § 50-32-608(3).

Naloxone Standing Order

Montana’s naloxone standing order is located here. The order allows pharmacists to dispense intranasal naloxone (either 4mg spray or 2mg prefilled syringe with atomizer) to people who are at risk of overdose or are a friend, family member, or other person in the position to help in the case of an overdose, in addition to first responders, state crime labs, probation/parole officers, harm reduction organizations, public health officials, and veterans’ service organizations.

Good Samaritan Law

Laws criminalizing certain types of possession of a dangerous drug or drug paraphernalia do not apply to a person who seeks medical assistance in good faith for another person experiencing a drug overdose if the evidence for the violation was discovered as a result of calling for help. Mont. Code Ann. § 50-32-609(1)(a).

Any person protected under this law cannot be penalized for a violation of a protective order or for a violation of a condition of pretrial release, probation, furlough, supervised release, or parole based on an incident for which the person would have received immunity under the law. Mont. Code Ann. § 50-32-609(4).

Providing first aid or other medical assistance to a person who “is experiencing or reasonably perceived to be experiencing” an overdose may be used as a mitigating factor in a criminal prosecution other than the crimes granted immunity. Mont. Code Ann. § 50-32-609(5).
The law also provides protections for pregnant women seeking or receiving help for a substance use disorder. Mont. Code Ann. § 50-32-609(2).


Nebraska

Legality of Injection and Smoking Equipment


- A class II misdemeanor is punishable by a maximum of 6 months imprisonment and/or a maximum $1000 fine Neb. Rev. Stat. Ann. § 28-106.


Syringe services programs are not authorized in Nebraska.

Legality of Drug Checking Equipment


Unlike some other state paraphernalia laws, Nebraska’s has not been modified since 1980. Notably, testing equipment was not removed from the law; it was simply never present. This strongly suggests that drug checking equipment is not considered drug paraphernalia in the state.

Naloxone Access Law

A health professional who is authorized to prescribe or dispense naloxone, if acting with reasonable care, may prescribe, administer, or dispense naloxone to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose. The health professional is immune from administrative action or criminal prosecution. Neb. Rev. Stat. Ann. § 28-470(1).

A person, other than an emergency responder, who lawfully gets naloxone is immune from administrative action or criminal prosecution for administering naloxone in good faith. Neb. Rev. Stat. Ann. § 28-470(2).

An emergency responder or law enforcement officer who gets naloxone from their organization and administers naloxone is immune from administrative action or criminal prosecution, and cannot be civilly liable for administering the naloxone so long as there was no willful, wanton, or grossly negligent act. There does not appear to be a broader civil immunity for laypersons. Neb. Rev. Stat. Ann. § 28-470(3), (4).
Naloxone Standing Order
» Nebraska’s standing order is located here.
» The order allows pharmacists to dispense intranasal naloxone (4 or 8mg spray or 2ml prefilled syringe with atomizer) or 1ml vial intramuscular naloxone with syringe to individuals.
» At least two naloxone doses must be dispensed.

Good Samaritan Law
» A person shall not be in violation of most laws regarding simple possession or use of a controlled substance or drug paraphernalia so long as the person sought emergency medical assistance in good faith for themselves or another person as soon as possible and the evidence for the charge was discovered as a result of calling for help. Neb. Rev. Stat. Ann. § 28-472(1)(a)–(c).
» When calling for another person, the person who calls for help must remain at the scene until EMS or law enforcement arrives and must cooperate with responding parties. Neb. Rev. Stat. Ann. § 28-472(1)(d).

Nevada
Legality of Injection and Smoking Equipment
» The state, its political subdivisions, program staff and volunteers are not subject to civil liability with relation to the operation of a program so long as they do not act or fail to act in a reckless manner. Nev. Rev. Stat. Ann. § 439.992.
» It is not a violation of the controlled substances law if a syringe has trace amounts of controlled substances on it, so long at the syringe was obtained at a syringe access site. Nev. Rev. Stat. Ann. § 453.336(6).
Legality of Drug Checking Equipment
» The definition of drug paraphernalia excludes “testing products,” which are defined as “a product, including, without limitation, a fentanyl test strip, that analyzes a controlled substance for the presence of adulterants.” Nev. Rev. Stat. Ann. § 453.554(2)(b).

Naloxone Access Law
» Nevada’s naloxone access law uses the term “opioid antagonist” which includes naloxone and “any drug that binds to opioid receptors and blocks or disinhbits the effects of opioids acting on those receptors.” Nev. Rev. Stat. Ann. § 453C.040.
» A prescriber may prescribe, directly or by standing order, and dispense an opioid antagonist to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose. Nev. Rev. Stat. Ann. § 453C.100(1).
» A pharmacist may dispense an opioid antagonist under a pharmacy protocol with or without a prescription, so long as they complete an educational training program and provide training to the recipients of naloxone. Nev. Rev. Stat. Ann. § 453C.120.
» Any person, acting in good faith, may possess and administer an opioid antagonist to another person whom he or she reasonably believes to be experiencing an opioid-related drug overdose. Nev. Rev. Stat. Ann. § 453C.100(3)(a).
» A person who lawfully prescribes or dispenses an opioid antagonist is not subject to criminal or civil liability or professional disciplinary action. Nev. Rev. Stat. Ann. § 453C.100(2).
» A person who administers an opioid antagonist in good faith to a person experiencing an overdose is immune from civil or criminal penalties or professional disciplinary action, so long as they exercise reasonable care. Nev. Rev. Stat. Ann. § 453C.100(4).

Naloxone Standing Order
» Nevada does not appear to have a statewide standing order.

Good Samaritan Law
» A person who, in good faith, seeks medical assistance for a person experiencing a drug overdose, whether themself or another person, may not be arrested, charged, prosecuted, or convicted, or be subject to forfeiture, for some possession or use of a controlled substance crimes or drug paraphernalia crimes. Nev. Rev. Stat. Ann. § 453C.150(1).
» Seeking medical assistance can mean reporting the overdose to law enforcement or EMS, assisting someone else in making a report, giving care to the person experiencing the overdose until help arrives, or delivering the person experiencing overdose to a medical facility. Nev. Rev. Stat. Ann. § 453C.150(3).
» Any person protected from charges under this law cannot be penalized for violation of a local ordinance similar to the protected crimes in the statute, restraining orders, or a condition of parole or probation, so long as the evidence supporting those violations was found because the person called for help. Nev. Rev. Stat. Ann. § 453C.150(1).
New Hampshire

Legality of Injection and Smoking Equipment

» Syringes are not identified as drug paraphernalia, and the broad definition of paraphernalia does not include devices used for injecting. See N.H. Rev. Stat. Ann. § 318-B:1 X-a.


» Delivery, possession with intent to deliver, or sale of drug paraphernalia knowing it would be used to test or analyze controlled substances is illegal. N.H. Rev. Stat. Ann. § 318-B:2(II), (II-a).
  o It is a presumed class B misdemeanor N.H. Rev. Stat. Ann. § 625:9(IV)(c);
  o punishable by a maximum fine of $1,200 N.H. Rev. Stat. Ann. § 651:2(IV)(a);


Legality of Drug Checking Equipment

» Equipment, products, and materials used or intended to be used to test or analyze controlled substances are drug paraphernalia. N.H. Rev. Stat. Ann. § 318-B:1 X-a.

» Delivery, possession with intent to deliver, or sale of drug paraphernalia knowing it would be used to test or analyze controlled substances is illegal. N.H. Rev. Stat. Ann. § 318-B:2(II), (II-a).
  o It is a presumed class B misdemeanor N.H. Rev. Stat. Ann. § 625:9(IV)(c);
  o punishable by a maximum fine of $1,200 N.H. Rev. Stat. Ann. § 651:2(IV)(a);

» However, testing equipment “used or intended for use in testing for the presence of fentanyl, xylazine, or a fentanyl or xylazine analog” is exempt from the definition of drug paraphernalia “unless possessed in conjunction with other evidence forming the basis of a criminal charge involving the manufacturing, possessing with the intent to sell, or compounding.” N.H. Rev. Stat. Ann. § 318-B:1 X-b.

Naloxone Access Law

» “Opioid antagonist” is defined as “any drug that binds to opioid receptors and blocks or disinhibits the effects of opioids acting on those receptors.” N.H. Rev. Stat. Ann. § 318-B:15(IV)(d)(1).

» A prescriber may prescribe, directly or by standing order, and dispense an opioid antagonist to a person at risk of overdose or a family member, friend, or other person in a position to help. N.H. Rev. Stat. Ann. § 318-B:15(IV)(a).

» A person or organization who receives an opioid antagonist from a direct prescription or by standing order may store, possess, distribute, and administer the opioid antagonist. N.H. Rev. Stat. Ann. § 318-B:15(IV)(b).

» Any health care professional prescribing or dispensing an opioid antagonist, or any person giving out or administering an opioid antagonist in good faith and with reasonable care is not subject to any criminal or civil liability, or professional discipline. N.H. Rev. Stat. Ann. § 318-B:15(IV)(c).
Naloxone Standing Order
» The statewide standing order for community organizations is available here.
» The community organization standing order allows for the distribution of intranasal naloxone (4mg or 8mg spray or 2ml prefilled syringe with atomizer), 1ml single use or 10ml multidose vial intramuscular naloxone with syringe, or to a person at risk of overdose or a family member, friend, or other person in a position to help.
» The organization must give the person seeking naloxone written instructions on overdose prevention.

Good Samaritan Law
» It is a defense to a charge of possession of controlled drugs, and a person cannot be arrested, prosecuted, or convicted for that possession, if that person, in good faith and in a timely manner, called for help for themself or another person experiencing overdose, and that evidence of the charge was discovered because of calling for help. N.H. Rev. Stat. Ann. § 318-B:28-b(II)–(III).

New Jersey
Legality of Injection and Smoking Equipment
» It is illegal to use, possess with intent to use, distribute, dispense, or possess with intent to distribute or dispense, drug paraphernalia, knowing that it will be used in violation of the controlled substances law. N.J. Stat. Ann. §§ 2C:36-2, -3.
» Any equipment, products, and materials which are used, intended for use, or designed for use in inhaling or otherwise introducing a controlled substance in violation of the law are considered drug paraphernalia. Unlike many state paraphernalia laws, the definition does not specifically include supplies used for injecting. N.J. Stat. Ann. § 2C:36-1(a).
» It is not illegal to use or possess with intent to use a hypodermic needles or syringe for the personal use of a controlled substance. N.J. Stat. Ann. § 2C:36-1(c). The exemption includes syringes and needles with residual amounts of controlled substances or controlled substances analogs. N.J. Stat. Ann. § 2C:36-1(c).
  o Use or possession with intent to use paraphernalia is a disorderly person offense and distribution or possession with intent to distribute is a crime of the fourth degree. N.J. Stat. Ann. § 2C:36-2; N.J. Stat. Ann. § 2C:36-3.
  o A crime of the fourth degree is punishable by 18 months imprisonment maximum and a $10,000 maximum fine. N.J. Stat. §§ 2C:43-6(a)(4); N.J. Stat. Ann. § 2C:43-3(b).
» It is a petty disorderly offense to throw away a needle without destroying it properly, or if the owner of property allows improperly discarded needles to remain on their property. N.J. Stat. Ann. § 2C:36-6.1(a).

Pharmacies may sell 10 or fewer syringes without a prescription or more than 10 syringes with a prescription to an adult over 18 who shows photo ID “notwithstanding any State law, rule, or regulation to the contrary.” N.J. Stat. Ann. § 2C:36-6.2(a). Resale of a syringe purchased from a pharmacy is a disorderly person offense. N.J. Stat. Ann. § 2C:36-6.2(c).


Possession of a syringe by a participant, employee, or volunteer of a syringe access program authorized by law is not a crime, even if the syringes have residual amounts of controlled substances on them. N.J. Stat. Ann. § 2C:36-6a.

**Legality of Drug Checking Equipment**

- It is illegal to use, possess with intent to use, distribute, dispense, or possess with intent to distribute or dispense drug paraphernalia, knowing that it will be used in violation of the controlled substances law. N.J. Stat. Ann. § 2C:36-2; N.J. Stat. Ann. § 2C:36-3.

- Any equipment, products, and materials, including testing equipment, which are used, intended for use, or designed for use in testing or analyzing a controlled substance in violation of the law are considered drug paraphernalia. N.J. Stat. Ann. § 2C:36-1(a).

Fentanyl test strips are explicitly exempted from the definition of drug paraphernalia. N.J. Stat. Ann. § 2C:36-1(a)(4). Therefore, it is not illegal to possess and distribute fentanyl test strips.

- As noted above, use or possession with intent to use is a disorderly person offense, distribution and possession with intent to distribute is a crime of the fourth degree. N.J. Stat. Ann. § 2C:36-2; N.J. Stat. Ann. § 2C:36-3.

**Naloxone Access Law**

- New Jersey’s naloxone access law uses the term “opioid antidote” which is defined as “any drug, regardless of dosage amount or method of administration, which has been approved by the United States Food and Drug Administration (FDA) for the treatment of an opioid overdose…includ[ing], but is not limited to, naloxone hydrochloride, in any dosage amount, which is administered through nasal spray or any other FDA-approved means or methods.” N.J. Stat. Ann. § 24:6J-3.

- A healthcare practitioner may prescribe, directly or by standing order, or dispense an opioid antidote to any person or entity. N.J. Stat. Ann. § 24:6J-4(a)(1).

- A recipient of an opioid antidote may administer or distribute the opioid antidote to any person who they reasonably believe is experiencing an overdose, at risk of experiencing an overdose, or will be in a position to administer to a person experiencing an overdose, so long as they do so for free. N.J. Stat. Ann. § 24:6J-4(b).

- A prescriber or other health care practitioner who prescribes or dispenses an opioid antidote lawfully and in good faith is not subject to criminal or civil liability or professional disciplinary action. N.J. Stat. Ann. § 24:6J-4(c)(1).
» Any person who administers or distributes an opioid antidote in good faith and without fee is not subject to criminal or civil liability nor professional disciplinary action. N.J. Stat. Ann. § 24:6J-4(c)(2).

**Naloxone Standing Order**


» New Jersey’s statewide standing order is located here.

» Pursuant to the standing order, a pharmacist may dispense unlimited refills of an opioid antidote to anyone other than a prescriber or pharmacist acting in their professional capacity. They must also provide the recipient information regarding overdose prevention.

» “Opioid antidote” is defined in the standing order the same as it is in the naloxone law outlined above.

**Good Samaritan Law**

» A person who in good faith calls for help for themself or another person experiencing an overdose is immune from arrest, charge, prosecution and conviction for various controlled substances or drug paraphernalia violations if the evidence was obtained as a result of calling for help. N.J. Stat. Ann. § 2C:35-30; N.J. Stat. Ann. § 2C:35-31.

» The person calling for help cannot have their probation or parole revoked as a result of calling for help. N.J. Stat. Ann. § 2C:35-30(a)(7).


**New Mexico**

**Legality of Injection and Smoking Equipment**

» Syringes are drug paraphernalia when used, intended for use, or designed for use in injecting controlled substances into the body in violation of the state Controlled Substances Act. N.M. Stat. Ann. § 30-31-2(T)(10).

» Any equipment, products, and materials which are used, intended for use, or designed for use in inhaling a controlled substance in violation of the law are considered drug paraphernalia as well. N.M. Stat. Ann. § 30-31-2(T).

» It is illegal to use or possess with intent to use paraphernalia to inject or inhale a controlled substance into the body in violation of the law. N.M. Stat. Ann. § 30-31-25.1(A).

» It is illegal to deliver or possess with intent to deliver paraphernalia under circumstances where the person knows, or reasonably should know, that it will be used to inject or inhale a controlled substance into the body in violation of the law. N.M. Stat. Ann. § 30-31-25.1(B).

» Use or possession with intent to use paraphernalia is punishable by a penalty assessment citation, and delivery or possession with intent to deliver is a misdemeanor. N.M. Stat. Ann. § 30-31-25.1(c).


« A misdemeanor is punishable by one year imprisonment maximum and/or a maximum $1,000 fine. N.M. Stat. Ann. § 31-19-1(A).
» Harm reduction programs that provide syringes and other authorized harm reduction equipment are permitted. N.M. Stat. Ann. § 24-2C-5. Harm reduction providers are permitted to provide syringes, needles, and other safer injecting supplies, drug testing supplies, and certain smoking and snorting supplies (but not pipes and other smoking supplies actually used to inhale drugs). N.M. Code R. § 7.4.6.10.

» The prohibition on using and possessing with intent to use paraphernalia does not apply to a person who uses or possesses a syringe or other supplies or devices obtained from harm reduction programs. N.M. Stat. Ann. § 30-31-25.1(A). The prohibition on delivering and possessing with intent to deliver does not apply to department of health employees and their designees while engaged in harm reduction program activities. N.M. Stat. Ann. § 30-31-25.1(B).

Legality of Drug Checking Equipment
» Any equipment, products, and materials which are used, intended for use, or designed for use in testing or analyzing a controlled substance in violation of the law are considered drug paraphernalia. N.M. Stat. Ann. § 30-31-2(T).

» It is illegal to use or possess with intent to use paraphernalia to test or analyze a controlled substance. N.M. Stat. Ann. § 30-31-25.1(A). However, this prohibition does not apply to “supplies or devices used for the testing of controlled substances or controlled substance analogs for dangerous adulterants”.

» It is illegal to deliver or possess with intent to deliver paraphernalia to test or analyze a controlled substance. N.M. Stat. Ann. § 30-31-25.1(B).

» As noted above, drug testing supplies may legally be provided by harm reduction programs. N.M. Code R. § 7.4.6.10.

Naloxone Access Law
» New Mexico’s naloxone access law uses the term “opioid antagonist” which is defined as “a drug approved by the federal food and drug administration that, when administered, negates or neutralizes in whole or in part the pharmacological effects of an opioid in the body [and] shall be limited to naloxone or other like medications that are indicated for use in reversing an opioid overdose and are approved by the department [of health] for such purpose.” N.M. Stat. Ann. § 24-23-1(K)(7).

» A prescriber may prescribe, directly or by standing order, dispense, or distribute an opioid antagonist to a person at risk of overdose or a family member, friend, or other person in a position to help, an employee, volunteer or representative of a registered overdose prevention program, or a first responder. N.M. Stat. Ann. § 24-23-1(F).

» A pharmacist may distribute an opioid antagonist to a registered opioid prevention and education program. N.M. Stat. Ann. § 24-23-1(D). They may also dispense an opioid antagonist pursuant to a valid prescription to a person at risk of overdose or a person in a position to help another person at risk. N.M. Stat. Ann. § 24-23-1(C).

» A person or registered overdose program that lawfully possesses, stores, distributes or administers an opioid antagonist is not subject to civil or criminal liability or professional discipline, so long as they act with reasonable care and without willful, wanton, or reckless behavior. N.M. Stat. Ann. § 24-23-1(H).
» Any person may possess an opioid antagonist even if they don’t have a prescription for it. N.M. Stat. Ann. § 24-23-1(A).
» Any person acting under a standing order may store or distribute an opioid antagonist. N.M. Stat. Ann. § 24-23-1(B).
» Any person may administer an opioid antagonist if they in good faith believe the other person is experiencing an overdose and they act with reasonable care. N.M. Stat. Ann. § 24-23-1(E).
» Pharmacists may prescribe an opioid antagonist according to a protocol approved by the state board of pharmacy, after the pharmacist completes training. N.M. Code R. § 16.19.26.12.

**Naloxone Standing Order**

» New Mexico’s standing order is located [here](#).
» The standing order allows pharmacists to dispense naloxone or other FDA approved opioid antagonist for rescue use to a person who uses an opioid or a person in a position to help someone experiencing an opioid overdose.
» Pharmacists may dispense the following formulations:
» Narcan nasal spray (4mg)
» Naloxone HCl Solution with atomizer (1mg/mL pre-filled 2 mL syringes)
» Any other commercially available naloxone preparation or opioid antagonist approved by the FDA for overdose use
» The pharmacist must give the person seeking an opioid antagonist education on opioid overdose and opioid antagonist administration.

**Good Samaritan Law**

» A person who in good faith calls for help for someone experiencing an overdose cannot be arrested, charged, prosecuted, or otherwise penalized (including by civil forfeiture) for a controlled substances or drug paraphernalia crime, or for violating the conditions of a restraining order, probation or parole, if the evidence for the charge was found as a result of calling for help. N.M. Stat. Ann. § 30-31-27.1(A).
» Calling for help includes reporting an overdose to law enforcement or EMS, or helping the person experiencing the overdose until EMS arrives. N.M. Stat. Ann. § 30-31-27.1(D).
» Calling for help may be used as a mitigating factor in another criminal prosecution. N.M. Stat. Ann. § 30-31-27.1(C).

**New York**

**Legality of Injection and Smoking Equipment**

» There is no law against the simple possession of drug paraphernalia in New York.
» It is a violation of the New York General Business Laws to possess with intent to sell, sell, or purchase drug paraphernalia under circumstances “evincing knowledge” that it will be used for an illegal drug-related purpose. N.Y. Gen. Bus. Law § 851.
» Possession with intent to sell, sale, or purchase of drug paraphernalia is punishable by civil penalties ranging from $1,000 to $10,000 for each violation. N.Y. Gen. Bus. Law § 853(1).
Smoking equipment is drug paraphernalia only if it is "used or designed for the purpose of ingesting, inhaling, or otherwise introducing cocaine into the human body." N.Y. Gen. Bus. Law § 850(2)(a)(vii).

Syringes, needles, and other injection equipment are specifically excluded from the definition of drug paraphernalia. N.Y. Gen. Bus. Law § 850(2)(b).

In New York, it's illegal to sell or give a syringe or needle to someone unless:
- They have a prescription for it N.Y. Pub. Health Law § 3381(1)(a).
- They have been authorized by the health commissioner to have it (including SSP clients – see below) N.Y. Pub. Health Law § 3381(1)(b).
- They are a pharmacy, health care facility, or health care practitioner, and
  - a) the person they are giving or selling it to is at least 18 and
  - b) they provide a “safety insert” developed or approved by the commissioner. N.Y. Pub. Health Law § 3381(1)(c).

Pharmacies are required to keep needles and syringes in a place that isn’t “openly available to customers” (for example, behind the counter). N.Y. Pub. Health Law § 3381(4)(d).

Syringe services programs are authorized by law. N.Y. Comp. Codes R. & Regs. tit. 10, § 80.135.

Employees and trained volunteers of authorized non-profits and government entities may obtain, possess, and distribute syringes without a prescription. N.Y. Comp. Codes R. & Regs. tit. 10, § 80.135(a).

**Legality of Drug Checking Equipment**

- It is a violation of the New York General Business Laws to possess with intent to sell, sell, or purchase drug paraphernalia under circumstances “evincing knowledge” that it will be used for an illegal drug-related purpose. N.Y. Gen. Bus. Law § 851.
- However, New York’s definition of drug paraphernalia does not include drug checking equipment. N.Y. Gen. Bus. Law § 850. Therefore, it is not against the law to possess with intent to sale, sell, or purchase drug checking equipment.

**Naloxone Access Law**

- New York’s naloxone access law uses the term “opioid antagonist” which is defined as “a drug approved by the Food and Drug Administration that, when administered, negates or neutralizes in whole or in part the pharmacological effects of an opioid in the body [and] shall be limited to naloxone and other medications approved by the department for such purpose.” N.Y. Pub. Health Law § 3309(3)(a)(i).
- A prescriber may prescribe, dispense or distribute, directly or by standing order, and a pharmacist may dispense an opioid antagonist to a person at risk of overdose, or a family member, friend or other person in a position to help a person experiencing an overdose, or an organization registered as an opioid overdose prevention program. N.Y. Pub. Health Law § 3309(3)(b)(i), (ii).
» Distribution must include an informational card or sheet including at least the following information: “(a) how to recognize symptoms of an opioid overdose; (b) steps to take prior to and after an opioid antagonist is administered, including calling first responders; (c) the number for the toll free office of addiction services and supports' HOPE line; (d) how to access the office of addiction services and supports' website; (e) the application of good samaritan protections … and (f) any other information deemed relevant by the commissioner.” N.Y. Pub. Health Law § 3309(3-a).

» Use of an opioid antagonist is considered first aid or emergency treatment for liability purposes, and a person or entity who uses an opioid antagonist or acts reasonably and in good faith in compliance with the naloxone access law, is immune from criminal, civil, or administrative liability. N.Y. Pub. Health Law § 3309(4).

Naloxone Standing Order
» New York’s state-wide standing order is located here.
» The state’s standing order allows pharmacists to dispense naloxone to a person who asks for it, including a person at risk of overdose, or a family member, friend or other person in a position to help a person experiencing an overdose, in the following forms:
» Nasal naloxone – 2 doses of single dose spray containing 4 mg in a 0.1mL solution
» Injectable naloxone – 2 vials of single-use 1 mL vials with a strength of 0.4 mg/mL with an intramuscular syringe for each vial.
» Other FDA-approved formulations of naloxone that “are identical to one of the listed formulations in strength, dose volume, route of administration and pharmacologic action.”
» The pharmacist must provide counseling or materials that address similar information as is required for distribution of an opioid antagonist under the naloxone access law.

Good Samaritan Law
» A person who in good faith seeks health care for themselves or someone else who is experiencing an overdose cannot be charged or prosecuted for possession or free distribution of a controlled substance or drug paraphernalia if the offense is a class A-II felony or below if the information for the charge or prosecution was obtained as a result of seeking or receiving the care. N.Y. Penal Law § 220.78. The same protection applies for the person who overdosed. N.Y. Penal Law § 220.78(2).
» A person who in good faith seeks “immediate health care” for themselves or others because the person is experiencing an overdose is not in violation of the law that prohibits possession of a controlled substance in the seventh degree. N.Y. Penal Law § 220.03.
» It is an affirmative defense to the sale of controlled substances offenses for which immunity is not provided in limited circumstances. N.Y. Penal Law § 220.78(4), (6).
» Seeking health care for someone experiencing overdose will be considered as a mitigating factor for a controlled substance, marijuana, drug paraphernalia, or alcohol offense. NY Crim Proc Law § 390.40(3).

North Carolina
Legality of Injection and Smoking Equipment
» Syringes, needles, and other injecting equipment are drug paraphernalia when used to inject controlled substances into the body. N.C. Gen. Stat. Ann. § 90-113.21(a)(11).
All “equipment, products, and materials of any kind that are used to facilitate, or intended or designed to facilitate, violations of the Controlled Substances act,” including inhaling controlled substances, are considered drug paraphernalia. N.C. Gen. Stat. Ann. § 90-113.21(a).

It is illegal to use, possess with intent to use, deliver, or possess with intent to deliver drug paraphernalia knowing it will be used to inject or inhale a controlled substance that it would be unlawful to possess into the body. N.C. Gen. Stat. Ann. § 90-113.22; N.C. Gen. Stat. Ann. § 90-113.23.

Use, possession with intent to use, and delivery, or possession with intent to deliver drug paraphernalia to an adult is a class 1 misdemeanor. N.C. Gen. Stat. Ann. § 90-113.22(b); N.C. Gen. Stat. Ann. § 90-113.23(c).

A class 1 misdemeanor with no priors is punishable by 1-45 days community service and a fine of any amount within a judge’s discretion. N.C. Gen. Stat. Ann. § 15A-1340.23.

If a person in possession of a syringe alerts law enforcement before the officer conducts a search, the person will not be charged or prosecuted for possession of drug paraphernalia or for residual amounts of controlled substances in the needle. N.C. Gen. Stat. Ann. § 90-113.22(c).

The law permits “any governmental or nongovernmental organization, including a local or district health department or an organization that promotes scientifically proven ways of mitigating health risks associated with drug use and other high-risk behavior” to establish and operate an SSP. N.C. Gen. Stat. Ann. § 90-113.27.

Employees, volunteers, and participants in SSPs cannot be charged with or prosecuted for possession of needles or other injection supplies or residual amounts of controlled substances on the supplies obtained from or returned to an SSP. However, the person claiming immunity only applies if the person claiming immunity provides written verification that the supplies were obtained from an SSP. N.C. Gen. Stat. Ann. § 90-113.27(c).

**Legality of Drug Checking Equipment**

All “equipment, products, and materials of any kind that are used to facilitate, or intended or designed to facilitate, violations of the Controlled Substances act,” including testing and analyzing controlled substances, are considered drug paraphernalia. N.C. Gen. Stat. Ann. § 90-113.21(a).


As explained above, use, possession with intent to use, delivery, or possession with intent to deliver drug paraphernalia is a class 1 misdemeanor. N.C. Gen. Stat. Ann. § 90-113.22(b); N.C. Gen. Stat. Ann. § 90-113.23(c).

However, it is not unlawful for a person who uses or intends to use a controlled substance to use or possess with intent to use testing equipment. It is also permissible for “a governmental or nongovernmental organization that promotes scientifically proven ways of mitigating health risks associated with drug use and other high-risk behaviors to possess such testing equipment or distribute such testing equipment to a person who intends to introduce a controlled substance into his or her body.” N.C. Gen. Stat. Ann. § 90-113.22(d).
Naloxone Access Law

» North Carolina’s naloxone access law uses the term “opioid antagonist” which is defined as “an opioid antagonist that is approved by the federal Food and Drug Administration for the treatment of a drug overdose.” N.C. Gen. Stat. Ann. § 90-12.7(a).

» A prescriber may, in good faith and with reasonable care, prescribe an opioid antagonist directly or by standing order to a person at risk of overdose or a family member, friend, or other person in a position to help a person at risk of overdose. N.C. Gen. Stat. Ann. § 90-12.7(b)(1).

» A prescriber may also prescribe an opioid antagonist to any governmental or non-governmental organization so that those organizations can then distribute it to a person at risk of overdose or a family member, friend, or other person in a position to help a person at risk of overdose. N.C. Gen. Stat. Ann. § 90-12.7(b)(3).


» A pharmacist may dispense an opioid antagonist pursuant to a prescription to a person at risk of overdose or a family member, friend, or other person in a position to help a person at risk of overdose, or an agency or organization. N.C. Gen. Stat. Ann. § 90-12.7(c).

» Agencies and organizations may distribute opioid antagonists so long as they include basic instruction and information on overdose. N.C. Gen. Stat. Ann. § 90-12.7(c1).

» Anyone who lawfully obtains an opioid antagonist may administer it, using reasonable care, to a person they believe in good faith is experiencing a drug-related overdose. N.C. Gen. Stat. Ann. § 90-12.7(d).

» A practitioner who prescribes, a pharmacist who dispenses, or a person who administers an opioid antagonist, or the state health director issuing a standing order, or any agency or organization giving out an opioid antagonist, is immune from civil or criminal liability. N.C. Gen. Stat. Ann. § 90-12.7(e).

Naloxone Standing Order

» North Carolina’s standing order is located here.

» Allows pharmacists to dispense any FDA approved opioid antagonist to people at risk of overdose or their family, friends, or others who may be in a position to help.

» The person receiving the opioid antagonist must receive education on recognizing and responding to an overdose, including how to use opioid antagonists.

» Pharmacists that dispense under the standing order are required to notify the Division of Public Health. A list of such pharmacies is available here.

Good Samaritan Law

» North Carolina’s overdose Good Samaritan law applies to a person who, acting in good faith, seeks medical assistance for another person experiencing a drug-related overdose and
  o Reasonably believes they are the first person to call for help
  o Provides their own name to emergency personnel
  o Did not call for help during the execution of a warrant or other lawful search.

» Such individuals are immune from prosecution for certain controlled substance offenses and possession or use of drug paraphernalia, so long as the evidence for the charge was discovered because the person called for help. N.C. Gen. Stat. Ann. § 90-96.2(b), (c3).
Effective December 1, 2023, the covered offenses include felony possession of less than one gram of any controlled substance. The protections and restrictions also apply to the person who overdosed. These protections and restrictions also apply to the person who overdosed. N.C. Gen. Stat. Ann. § 90-96.2(c).

The person who seeks medical assistance is not subject to arrest for or revocation of pretrial release, probation, parole, or post-release if the arrest or revocation is based on an offense for which the person is immune from prosecution. N.C. Gen. Stat. Ann. § 90-96.2(c1). However, the person's probation officer may still drug test the person on pretrial release, probation, or parole. N.C. Gen. Stat. Ann. § 90-96.2(d)(4).

North Dakota
Legality of Injection and Smoking Equipment
Syringes are drug paraphernalia when used to inject controlled substances into the body in violation of the law. Any equipment, products, and materials which are used, intended for use, or designed for use in inhaling a controlled substance in violation of the law are considered drug paraphernalia. It is illegal to use or possess with intent to use drug paraphernalia for use in violation of the law. It is illegal to deliver or possess with intent to deliver drug paraphernalia if the person knows or reasonably should know that it will be used in violation of the law. Use or possession with intent to use drug paraphernalia to inject or inhale controlled substances in violation of the law is a class A misdemeanor, with higher penalties for repeat offenses. A class A misdemeanor is punishable by 360 days maximum imprisonment and/or a $3,000 fine. Delivery or possession with intent to deliver drug paraphernalia to an adult is a class C felony if the paraphernalia will be used to inject or inhale a controlled substance in violation of the law. A class C felony is punishable by 5 years maximum imprisonment and/or a $10,000 fine.

The department of health and human services may authorize local health departments, cities, or authorized organizations to operate an SSP. Supplies are defined as "needles, syringes, sterile disposal preparation spoons, cotton, sterile filters, alcohol wipes, sterile water, saline, tourniquets, disposal containers, wound care, testing strips, naloxone, and other items recognized as supporting safe drug use."
Legality of Drug Checking Equipment

» Any equipment, products, and materials which are used, intended for use, or designed for use in testing or analyzing a controlled substance in violation of the law are considered drug paraphernalia. N.D. Cent. Code Ann. § 19-03.4-01.

» Use or possession with intent to use drug paraphernalia to test or analyze controlled substances is a class C felony. N.D. Cent. Code Ann. § 19-03.4-03(1).

» A class C felony is punishable by 5 years maximum imprisonment and/or a $10,000 fine. N.D. Cent. Code Ann. § 12.1-32-01(4).

» Delivery or possession with intent to deliver drug paraphernalia to an adult is a class C felony if the person knows or reasonably should know the paraphernalia will be used to test or analyze a controlled substance. N.D. Cent. Code Ann. § 19-03.4-04.

» A class C felony is punishable by 5 years maximum imprisonment and/or a $10,000 fine. N.D. Cent. Code Ann. § 12.1-32-01(4).

» As noted above, supplies appropriately collected by an SSP are not considered drug paraphernalia.” N.D. Cent. Code § 23-01-44(7). Testing strips are included under the definition of “supplies.” N.D. Cent. Code § 23-01-44(1)(c). Although the plain language of the statute appears to provide protection only to testing strips “collected” by an SSP, it is likely the intention was to exclude strips provided by one as well.

Naloxone Access Law

» North Dakota’s naloxone access law uses the term opioid antagonist, which is defined as a drug that “is approved by the United States food and drug administration for the treatment of a drug overdose and is recognized by the department of health and human services for the treatment of a drug overdose; and (2) That when administered negates or neutralizes, in whole or in part, the pharmacological effects of an opioid in the body.” N.D. Cent. Code Ann. § 23-01-42(1)(b).

» A health care professional may in good faith, directly or by standing order, prescribe, dispense or distribute an opioid antagonist to anyone. N.D. Cent. Code Ann. § 23-01-42(2).

» A person acting in good faith may administer an opioid antagonist to someone else experiencing an overdose, regardless of whether that person is the one who was prescribed or given an opioid antagonist by a health care professional. N.D. Cent. Code Ann. § 23-01-42(3), (4).

» Anyone who prescribes, dispenses, distributes, receives, possesses, or administers an opioid antagonist is immune from civil and criminal liability. Healthcare professionals are also immune from disciplinary action. These immunities only apply if the person did not act with recklessness, gross negligence, or intentional misconduct. N.D. Cent. Code Ann. § 23-01-42(5).

» A pharmacist may prescribe an opioid antagonist according to a protocol developed by the board of health. N.D. Admin. Code 61-04-12-02.

Naloxone Standing Order

» North Dakota does not appear to have a statewide standing order.
**Good Samaritan Law**

» A person who, in good faith, seeks medical assistance for another person experiencing an overdose is immune from prosecution for certain crimes if:

- They remain on the scene until emergency personnel arrive
- They cooperate with the medical treatment of the overdosing person
- The person experiencing overdose must have been in a condition where a reasonable person would believe they needed medical assistance
- The evidence for the charges was found because the person called for help. N.D. Cent. Code Ann. § 19-03.1-23.4.

» Immunity is provided for drug possession or use, paraphernalia possession or use, inhalation of certain substances, or sharing controlled substances with others at the scene. N.D. Cent. Code Ann. § 19-03.1-23.4.

» These protections and restrictions also apply to the person who overdosed. N.D. Cent. Code Ann. § 19-03.1-23.4.

**Ohio**

**Legality of Injection and Smoking Equipment**

» Any equipment, products, and materials which are used, intended for use, or designed for use in injecting or inhaling a controlled substance in violation of the law are considered drug paraphernalia, including but not limited to syringes used to inject controlled substances into the body. Ohio Rev. Code Ann. § 2925.14(A).

» It is a misdemeanor of the fourth degree to use or possess with purpose to use drug paraphernalia. Ohio Rev. Code Ann. § 2925.14(C)(1), (F)(1).


» It is a misdemeanor of the second degree to sell or possess with purpose to sell drug paraphernalia to an adult “if the person knows or reasonably should know that the equipment, product, or material will be used as drug paraphernalia.” Ohio Rev. Code Ann. § 2925.14(C)(2), (F)(2).


» A court may also suspend a persons’ driver’s license or permit for up to 5 years if they are convicted of any paraphernalia offense. Ohio Rev. Code Ann. § 2925.14(G)(1).


» Syringes are also considered “drug abuse instruments”. Ohio Rev. Code Ann. § 2925.12(A).

» Possession of “drug abuse instruments” other than as permitted by law is a misdemeanor of the second degree, with higher penalties if the person has previously been convicted of a drug abuse offense. Ohio Rev. Code Ann. § 2925.12(C).


» A court may also suspend a persons’ driver’s license or permit for up to 5 years. Ohio Rev. Code § 2925.12(D)(1).

» Sale and furnishing of syringes is prohibited except for certain individuals, including a person under the direct supervision of a pharmacist, a licensed health professional authorized to

» Sale or furnishing to an unauthorized person is a felony of the fifth degree. Ohio Rev. Code Ann. § 3719.99(B).


» Ohio law permits boards of health to establish “bloodborne infectious disease prevention programs.” Ohio Rev. Code Ann. § 3707.57(B). Before establishing such a program, the board of health is required to “consult” with a variety of groups, including law enforcement representatives and prosecutors. Ohio Rev. Code Ann. § 3707.57(E)(1).

» Participants in the program cannot be prosecuted for possession of paraphernalia, “drug abuse instruments,” or “criminal tools,” so long as they have documentation that they are involved with the program and are within 1000 feet of the program. Ohio Rev. Code Ann. § 3707.57(F)(2). People who work or volunteer for the program have immunity from the same charges while they are on duty, as well as from Ohio Rev. Code Ann. § 3719.172. Ohio Rev. Code Ann. § 3707.57(F)(1).

» In summary, Ohio has multiple laws prohibiting and regulating the possession, sale, and distribution of syringes. Possession and sale of smoking equipment is prohibited under the drug paraphernalia law, but free distribution of drug paraphernalia such as syringes and smoking equipment is not criminalized. Participants of a bloodborne infectious disease prevention program cannot be prosecuted for possession of paraphernalia, “drug abuse instruments,” or “criminal tools,” so long as they have documentation that they are involved with the program and are within 1000 feet of the program. On-duty workers and volunteers of the program immune from prosecution for the same.

**Legality of Drug Checking Equipment**

» Any equipment, products, and materials which are used, intended for use, or designed for use in testing or analyzing a controlled substance in violation of the law are considered drug paraphernalia. Ohio Rev. Code Ann. § 2925.14(A).

» As mentioned above, it is illegal to use, sell, possess with intent to use, or possess with intent to sell, drug paraphernalia, although free distribution is not criminalized. Ohio Rev. Code Ann. § 2925.14.

» Use and possession of fentanyl test strips is exempt from the drug paraphernalia law. Ohio Rev. Code Ann. § 2925.14(D)(4). Therefore, it is not against the law to use and possess with intent to use fentanyl test strips.

» The penalties for use, possession, and sale of other drug checking equipment are the same as the above for syringes and smoking equipment. The same protections that apply to paraphernalia obtained from bloodborne infectious disease programs would apply to other drug checking equipment as well.

**Naloxone Access Law**

» Ohio’s naloxone access law uses the term “overdose reversal drug” which is defined to include both naloxone and “[a]ny other drug that the state board of pharmacy, through rules adopted in accordance with [the law] designates as a drug that is approved by the federal food and drug
administration for the reversal of a known or suspected opioid-related overdose.” Ohio Rev. Code Ann. § 4729.01(CC). After September 1, 2023, the state board of pharmacy has designated naloxone and nalmefene. Ohio Admin. Code Ann. § 4729-8-01.

“Any person or government entity may purchase, possess, distribute, dispense, personally furnish, sell, or otherwise obtain or provide an overdose reversal drug” if it is in the original manufacturer’s packaging, the packaging has the manufacturer’s instructions for using the drug, and the drug is stored pursuant to the manufacturer’s or distributor’s instructions. Ohio Rev. Code Ann. § 3715.50(B).

Individuals and entities who do so in good faith have civil, criminal, and administrative immunity. Ohio Rev. Code Ann. § 3715.50(D)(1).

After a person or government entity dispenses or personally furnishes an overdose reversal drug, they have civil, criminal, and professional immunity for acts or omissions by the person the drug was given to. Ohio Rev. Code Ann. § 3715.50(D)(2).

Individuals and government entities may also maintain a supply of overdose reversal drugs for emergency situations and for distributing via “automated mechanism” such as vending machines so long as they meet certain requirements for storage and maintenance of supply and provide instructions for use of the overdose reversal drug. Ohio Rev. Code Ann. § 3715.50(C).

The same immunities for providing and obtaining an overdose reversal drug apply.

A prescriber may prescribe or personally furnish an overdose reversal drug without examination of the person it will be administered to. The prescriber must provide instruction on administration and calling for help to the person receiving the prescription or the medication, and has civil, criminal, and professional disciplinary immunity for any act of the person who used the overdose reversal drug. Ohio Rev. Code Ann. § 3715.501(A)(1).

A pharmacist may dispense an overdose reversal drug pursuant to a physician-approved protocol to an individual at risk of overdose or a family member, friend, or other person in a position to help. Pharmacists must instruct the person receiving the overdose reversal drug to call emergency services as soon as possible. Pharmacists have civil, criminal, and professional disciplinary immunity for any act of the person who used the overdose reversal drug if the pharmacist acted in good faith. Ohio Rev. Code Ann. § 3715.502.

The protocols are not required for over-the-counter opioid antagonists but, according to the State Board of Pharmacy, allow for the possibility of insurance reimbursement.

Pharmacies without a protocol may dispense an overdose reversal drug if it is in the original manufacturer’s packaging, the packaging has the manufacturer’s instructions for using the drug and the drug is stored pursuant to the manufacturer or distributor’s instructions. Ohio Rev. Code Ann. § 3715.50(B).

Ohio law also permits anyone to personally furnish an opioid reversal drug under a protocol established by a physician, physician assistant, or advance practice registered nurse. Ohio Rev. Code Ann. § 3715.503. The protocol must include any limitations on who may be personally furnished an overdose reversal drug; the dosage that may be personally furnished; training, labeling, storage, and recordkeeping requirements; and any training or instructions that the furnisher must provide to the receiver of the overdose reversal drug. A sample protocol is available from the state board of pharmacy here.
A person who lawfully obtains and administers an overdose reversal drug has civil, criminal, and administrative immunity if they administer the overdose reversal drug in good faith to a person experiencing overdose and call for emergency help. Ohio Rev. Code Ann. § 3715.504.

Law enforcement agencies may, for the purposes of investigation or referral to treatment, ask emergency medical service personnel, firefighters and volunteer firefighters, who administer an overdose reversal drug while working, for the name and address of the person to whom the overdose reversal drug was administered, unless the emergency medical service personnel, firefighter or volunteer firefighter believes the law enforcement agency does not have jurisdiction over the location where the drug was administered. Ohio Rev. Code Ann. § 3715.505.

**Naloxone Standing Order**

Ohio does not have a standing order. Pharmacies may have physician-approved protocols to dispense overdose reversal drugs, functionally similar to standing orders, but are not required to do so. See Ohio Rev. Code Ann. § 3715.50(B); Ohio Rev. Code Ann. § 3715.502; Ohio Rev. Code Ann. § 3715.503.

Information about the protocol process and distribution generally is available from the board of pharmacy [here](#).

**Good Samaritan Law**

A person, acting in good faith, who calls for help for themself or a person experiencing an overdose cannot be arrested, charged, prosecuted, convicted, or penalized for a minor drug possession or use offense; or use or possession of drug paraphernalia or drug abuse instruments if:

- The evidence of the crime was discovered because the person called for help
- The person who called for help is screened and receives a referral to a treatment provider within 30 days of the call for help, and can document that screening and referral if asked by a prosecuting attorney. Ohio Rev. Code Ann. § 2925.11(B)(2).

If the person who is seeking immunity is in violation of a community control sanction or post-release control and they sought help or help was sought for them, they will not be penalized for a violation of the community control or post-release control sanction if the violation is based on a minor drug possession offense, or use or possession of drug paraphernalia or drug abuse instruments. Ohio Rev. Code Ann. § 2925.11(B)(2)(c).

These protections do not apply to any person who has already received immunity two times. Ohio Rev. Code Ann. § 2925.11(B)(2)(e).

These protections and restrictions also apply to the person who overdosed. Ohio Rev. Code Ann. § 2925.11(B)(2)(viii).

**Oklahoma**

**Legality of Injection and Smoking Equipment**


Use, delivery, sale, or possession of drug paraphernalia “knowing, or under circumstances where one reasonably should know” it will be used to inject or inhale controlled substances into the body in violation of state law is prohibited. Okla. Stat. Ann. tit. 63, § 2-405(B-D).

All of these offenses are misdemeanors. Okla. Stat. Ann. tit. 63, § 2-405(E).

A first offense is punishable by 1 year maximum imprisonment in county jail and/or a maximum fine of $1,000. Okla. Stat. Ann. tit. 63, § 2-405(E)(1).

A person convicted of any of these offenses is also subject to a required $100 “special assessment trauma-care fee.” Okla. Stat. Ann. tit. 63, § 2-405(F).


Entities that may register with the State Department of Health to provide harm-reduction services include government entities, religious institutions, churches, non-profit organizations, for-profit companies, nongovernmental entities partnered with a government agency, and tribal governments. Okla. Stat. Ann. tit. 63, § 2-1101(A).

It is not explicitly legal to possess syringes obtained from a harm-reduction services program, however, the programs themselves are explicitly authorized to possess and distribute syringes. Okla. Stat. Ann. tit. 63, § 2-1101(B).

**Legality of Drug Checking Equipment**

Any equipment, products, and materials which are used, intended for use, or fashioned for use in testing or analyzing a controlled substance in violation of the law are considered drug paraphernalia. Okla. Stat. Ann. tit. 63, § 2-101(36).

- Fentanyl test strips are specifically excluded from the definition of drug paraphernalia. Okla. Stat. Ann. tit. 63, § 2-101(36). Therefore, use, possession, delivery, and sale of fentanyl test strips is not against the law.
- Penalties for possession, use, delivery, and sale of other drug checking equipment are the same as above.

Entities registered with the state department of health that provide harm-reduction services may also possess and distribute “[r]apid substance testing products used, intended for use, or fashioned specifically for the use in identifying or analyzing the potency or toxicity of unknown substances.” Okla. Stat. Ann. tit. 63, § 2-1101(B)(7).

**Naloxone Access Law**


A provider may prescribe an opioid antagonist to a person to use when a family member is experiencing an overdose. Okla. Stat. Ann. tit. 63, § 1-2506.2.
» The provider must provide basic instruction when prescribing to a family member including how to identify an overdose, "basic resuscitation techniques", how to administer an opioid antagonist, and the importance of calling 9-1-1 for help. Okla. Stat. Ann. tit. 63, § 1-2506.2.

» Pharmacists may prescribe and dispense naloxone without a protocol or prescription to any person at risk of experiencing an overdose, family, or friends of an at-risk person, or a first responder. Okla. Admin. Code 535:10-9-15.

» Providers prescribing or administering opioid antagonists, and family members administering opioid antagonists, are covered under the state’s civil Good Samaritan Act, which provides limited civil immunity. Okla. Stat. tit. 63, § 1-2506.2(C)-(D); Okla. Stat. Ann. tit. 76, § 5(2).

» First responders can provide an “opioid antagonist” to individuals “who experienced or witnessed an opiate overdose for use by those individuals at a later date.” Okla. Stat. Ann. tit. 63, § 1-2506.1(C).

Naloxone Standing Order

» Oklahoma’s standing order is located here.

» Under the standing order, a pharmacist may dispense 2 doses of FDA approved naloxone in the following formulations: 4 or 8 mg nasal spray, 1 mL Single Dose Vial (SDV) or pre-filled syringe, 1 mg/mL Injection SDV or pre-filled syringe, or Naloxone 5 mg/ 0.5 mL auto-injection.

» Other requirements include maintaining a copy of the standing order, “[d]esignat[ing] the prescriber as the designated physician pursuant to the standing order,” following all state Board of Pharmacy Regulations and providing basic education on use of naloxone, signs of overdose, how to respond to an overdose, and the need for substance use disorder treatment.

Good Samaritan Law

» If a peace officer reasonably believes that a person:
  o Requested emergency medical assistance for help for someone who needed medical help due to using a controlled substance;
  o Provided their full name and other relevant info to the peace officer;
  o Remained at the scene with the person who needed help, and;
  o Cooperated with emergency personnel at the scene

then that person cannot be taken into custody and is immune from prosecution for certain drug possession crimes and paraphernalia possession crimes. Okla. Stat. Ann. tit. 63, § 2-413.1.


Oregon

Legality of Injection and Smoking Equipment

» Oregon does not criminalize the possession of drug paraphernalia.

» It is unlawful, to sell or deliver, or possess with intent to sell or deliver, drug paraphernalia knowing that it will be used to inject or inhale a controlled substance into the body. Or. Rev. Stat. Ann. § 475.525(1). However, syringes and any other item “designed to prevent or reduce the potential harm associated with the use of controlled substances” are specifically excluded from the law. Or. Rev. Stat. Ann. § 475.525(3).

  o Violation of the paraphernalia law is a civil violation punishable by a civil fine of between $2,000 and $10,000. Or. Rev. Stat. Ann. § 475.565(1).
Although syringes and other items designed to prevent or reduce the harm associated with controlled substances are not paraphernalia, the law further provides that syringes and “other items provided by a syringe service program” are not considered drug paraphernalia. Or. Rev. Stat. Ann. § 475.757(3). Further, it is an affirmative defense to unlawful possession of a controlled substance if a person was acting in the capacity of an employee or volunteer of an SSP.

**Legality of Drug Checking Equipment**

- Oregon does not criminalize the possession of drug paraphernalia.
- It is illegal, punishable by a civil fine, to sell or deliver, or possess with intent to sell or deliver, drug paraphernalia knowing that it will be used to test a controlled substance. However, “single-use drug test strips” and “drug testing tools” are specifically excluded from the law, as well as “any other item designed to prevent or reduce the potential harm associated with the use of controlled substances, including but not limited to items that reduce the transmission of infectious disease or prevent injury, infection or overdose.” Or. Rev. Stat. Ann. § 475.525(3).
- Therefore, it is not against the law to possess, sell, deliver, or possess with intent to sell or deliver, drug checking equipment.

**Naloxone Access Law**

- A pharmacy, health care professional, pharmacist with prescribing and dispensing privileges, or any other person designated by the state board of pharmacy may distribute and administer a short-acting opioid antagonist and distribute the supplies needed for administration. Or. Rev. Stat. Ann. § 689.681(2)(a).
- Pharmacies, health care professionals, and pharmacists may also distribute kits to people who have experienced an overdose or are likely to do so, family members of people who have experiences an overdose or are likely to do so, and anyone else to asks for one or more kits. Or. Rev. Stat. Ann. § 689.681(2)(b). They may also distribute kits to social service agencies or other people who work with people who have experienced drug overdose, and those agencies and people may redistribute the short-acting opioid antagonist kits to people likely to experience overdose or to their family members. Or. Rev. Stat. Ann. § 689.681(2)(c).

**Naloxone Standing Order**

Good Samaritan Law

» A person who contacts emergency medical services or a law enforcement agency for another person who needs medical assistance due to a drug-related overdose may not be arrested or prosecuted for possession of drugs, paraphernalia with intent to sell or deliver, frequenting a place where drugs are being used, or arrested on an existing warrant for any of these offenses if the evidence for the arrest was found because the person called for help. Or. Rev. Stat. Ann. § 475.898.

» A person who contacts emergency medical services or a law enforcement agency for another person who needs medical assistance due to a drug-related overdose may not be arrested for violating conditions of pretrial release, probation, post-prison supervision, or parole if the violation is based on any of the above offenses if the evidence for the arrest was found because the person called for help. Or. Rev. Stat. Ann. § 475.898(4).


Pennsylvania

Legality of Injection and Smoking Equipment

» Any equipment, products, and materials which are used, intended for use, or designed for use in injecting or inhaling a controlled substance in violation of the law are considered drug paraphernalia, including but not limited to, syringes used, intended for use or designed for use in injecting controlled substances into the body. 35 Pa. Cons. Stat. § 780-102(b).

» Use or possession with intent to use drug paraphernalia for the purpose of injecting, inhaling or otherwise introducing a controlled substance into the human body, in violation of The Controlled Substance, Drug, Device and Cosmetic Act is unlawful. 35 Pa. Cons. Stat. § 780-113(a)(32). Delivery, possession with intent to deliver, and manufacture with intent to deliver, drug paraphernalia "knowing, or under circumstances where one reasonably should know, that it would be used to" inject, inhale or otherwise introduce controlled substances into the human body are also unlawful. 35 Pa. Cons. Stat. § 780-113(a)(33).

» The above offenses are misdemeanors punishable by maximum 1 year imprisonment and/or $2,500 maximum fine. 35 Pa. Cons. Stat. § 780-113(i).

» Sale of syringes is restricted to pharmacists or individuals under the "direct, immediate and personal" supervision of pharmacists. 49 Pa. Code § 27.18(s). Syringes may be sold without a prescription but must be kept behind the counter in the "prescription area" of the pharmacy and may only be accessible by the pharmacist and individuals authorized to be in the prescription only area of the pharmacy. 49 Pa. Code § 27.18(s).

» There is no state law permitting syringe services programs; however, some local communities have authorized SSPs.

Legality of Drug Checking Equipment

» Any equipment, products, and materials which are used, intended for use, or designed for use in testing or analyzing a controlled substance in violation of the law are considered drug paraphernalia, subject to the punishments above. 35 Pa. Cons. Stat. § 780-102(b).

» However, “testing products utilized in determining whether a controlled substance contains chemicals, toxic substances or hazardous compounds in quantities which can cause physical harm or death,” including fentanyl test strips are not considered drug paraphernalia. 35 Pa.
Cons. Stat. § 780-102(b). Therefore, it is not against the law to use, possess or deliver drug checking equipment.

**Naloxone Access Law**

» Pennsylvania’s naloxone access law uses the term “opioid antagonists” which is defined as “a drug or device approved by the Federal Food, Drug, and Cosmetic Act (52 Stat. 1040, 21 U.S.C. § 301 et seq.) for emergency reversal of known or suspected opioid overdose, including naloxone hydrochloride or other similarly acting drugs approved by the United States Food and Drug Administration for the treatment of an opioid overdose.” 35 Pa. Stat. Ann. § 780-113.8(h).

» A prescriber may prescribe, dispense, and distribute opioid antagonists, directly or by standing order, to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose. 35 Pa. Stat. Ann. § 780-113.8(c).

» Law enforcement, fire departments and fire companies may also obtain and administer opioid antagonists, pursuant to an agreement with emergency medical services and with consent of the agency’s medical director or physician, if they complete an approved training. 35 Pa. Stat. Ann. § 780-113.8(b).

» A health care professional who prescribes or dispenses an opioid antagonist in good faith is not subject to criminal or civil liability or professional discipline for prescribing or dispensing an opioid antagonist or any future use of the opioid antagonist unless the professional acts with intent to harm or with reckless indifference to harm. 35 Pa. Stat. Ann. § 780-113.8(e).

» A person, law enforcement agency, fire department, or fire company, acting in good faith and with reasonable care, who administers an opioid antagonist to a person suffering an overdose has civil and criminal immunity and is not subject to professional review. Receiving training on the use of opioid antagonists and promptly calling for help is considered evidence that a person acted with reasonable care but is not required to receive immunity. 35 Pa. Stat. Ann. § 780-113.8(f).

**Naloxone Standing Order**

» Pennsylvania’s standing order is located here.

» The order permits pharmacists to dispense only the following formulations, or their FDA approved generic equivalent, to people who are at risk of overdose or are a friend, family member, or other person in the position to help in the case of an overdose: 4 mg Narcan spray, 8mg Kloxxado spray, generic atomizer (luer-lock syringes with 2mL of naloxone), ZIMHI auto-injector (5mg/0.5mL dose), or intramuscular naloxone (2 vials of 1mL)

» Refills are allowed.

» The order also authorizes community-based organizations to obtain and distribute naloxone to people who are at risk of overdose or are a friend, family member, or other person in the position to help in the case of an overdose. They may do so in person or by mail.

**Good Samaritan Law**

» A person may not be charged or prosecuted with various drug and paraphernalia possession or paraphernalia delivery crimes, or with a violation of probation or parole if:

  o The evidence for the offense was discovered because the person transported someone experiencing an overdose to law enforcement or a health care facility; or
The person called for help in good faith for a drug overdose, provided their own name and location and cooperated with law enforcement and medical personnel, and stayed with the person needing help until help arrived. 35 Pa. Cons. Stat. § 780-113.7. The person who overdosed has the same protections, but only if the person who sought help for them qualifies for immunity. 35 Pa. Cons. Stat. § 780-113.7(c).

**Rhode Island**

*Legality of Overdose Prevention Centers*

- Rhode Island is the only state with a law that authorizes overdose prevention centers, which they call “harm reduction centers.” 23 R.I. Gen. Laws § 23-12.10-1(a).
- Centers must be authorized and approved by the municipality where the center will be located. 23 R.I. Gen. Laws § 23-12.10-1(d).
- Persons and entities may not be arrested, charged or prosecuted for possession of a controlled substance or for delivery, sale, possession with intent to deliver or sell, or manufacture with intent to deliver or sell drug paraphernalia. 23 R.I. Gen. Laws § 23-12.10-4.
- Protections further include “for attempting, aiding and abetting, or conspiracy to commit a violation of any of those [offenses]; nor have their property subject to forfeiture; nor be subject to any civil or administrative penalty, including, but not limited to, disciplinary action by a professional licensing board, credentialing restrictions, contractual or civil liability, or medical staff or other employment action; nor be denied any right or privilege for actions, conduct, or omissions relating to the approval or operation of a harm reduction center in compliance with” the laws regarding operation of a harm reduction center. 23 R.I. Gen. Laws § 23-12.10-4.
- Places used in compliance with the harm reduction center law, cannot be arrested, charged or prosecuted as a common nuisance for allowing the sale, use or keeping of controlled substances on the premises. 23 R.I. Gen. Laws § 23-12.10-4; R.I. Gen. Laws § 21-28-4.06.

*Legality of Injection and Smoking Equipment*

- Syringes or other references to injection are not included in the definition of drug paraphernalia, but the definition does include equipment, products, and materials used to inhale or introduce drugs into the human body in violation of the law. 21 R.I. Gen. Laws Ann. § 21-28.5-1.
- Rhode Island does not criminalize possession of drug paraphernalia. Therefore, it is not against the law to possess syringes or smoking equipment so long as they are not possessed with intent to deliver or sell. 21 R.I. Gen. Laws Ann. § 21-28.5-2.
- It is unlawful to deliver, sell, or possess with intent to deliver or sell drug paraphernalia knowing it will be used to inject or inhale controlled substances. 21 R.I. Gen. Laws Ann. § 21-28.5-2. Language related to injection equipment and syringes has been specifically removed from the definition of drug paraphernalia; it is likely the legislature did not intend for this remaining provision to apply to syringes. 2000 Rhode Island Laws Ch. 00-363 (00–S 2832).
- The offense is a felony punishable by a $5,000 maximum fine and/or 2 years maximum imprisonment. 21 R.I. Gen. Laws Ann. § 21-28.5-2; 11 R.I. Gen. Laws Ann. § 11-1-2.
- The director of department of health is authorized to maintain syringe services programs. 21 R.I. Gen. Laws Ann. § 23-11-19.
Sale of syringes and other “instrument(s) adapted for the administration of drugs by injection” by pharmacies is also authorized subject to health department rules and regulations. 21 R.I. Gen. Laws Ann. § 21-28-4.04(a). Pharmacists must provide information regarding safe disposal and store syringes where only authorized individuals may access them. 21 R.I. Gen. Laws Ann. § 21-28-4.04(b)(1), (b)(4).

**Legality of Drug Checking Equipment**

- Equipment, products, and materials intended for use or designed for use in testing or analyzing a controlled substance is considered drug paraphernalia. 21 R.I. Gen. Laws Ann. § 21-28.5-1(a).
- Rhode Island does not criminalize possession of drug paraphernalia, but it is unlawful to deliver, sell, or possess with intent to deliver or sell drug paraphernalia knowing it will be used to test or analyze drugs in violation of the law, subject to the same punishments as above. 21 R.I. Gen. Laws Ann. § 21-28.5-2.
- However, Rhode Island specifically allows for the provision, administration, and utilization of narcotic testing products, including but not limited to fentanyl test strips and any person who does so to assist another person is immune from civil and criminal liability. 21 R.I. Gen. Laws Ann. § 21-28.9-3.1(a)-(b).

**Naloxone Access Law**

- Rhode Island uses the term “opioid antagonist” in its naloxone access statute regarding administration and defines it as “a drug which is a competitive antagonist that binds to the opioid receptors with higher affinity than agonists but does not activate the receptors, effectively blocking the receptor, preventing the human body from making use of opiates and endorphins.” 21 R.I. Gen. Laws Ann. § 21-28.9-2. Rhode Island’s regulations also use the term “opioid antagonist” but with a different definition: “‘Opioid antagonist’ means a drug used to reverse the effects of opioids, such as a naloxone hydrochloride, commonly referred to as naloxone or by the brand name Narcan, which is a competitive antagonist that binds to opioid receptors with higher affinity than agonists but does not activate the receptors. For the purposes of this Part, opioid antagonist does not include any drugs, such as naltrexone hydrochloride, used for addiction treatment.” 216 R.I. Code R. 20-20-5.2(A)(6).
- Pursuant to Rhode Island statute:
  - Any person may administer an opioid antagonist to another person if they have a good faith belief the person is experiencing an overdose and act with reasonable care while administering. 21 R.I. Gen. Laws Ann. § 21-28.9-3(a). Any person who does so has civil and criminal immunity from actions arising out of administration of the drug. 21 R.I. Gen. Laws Ann. § 21-28.9-3(b).
  - State and municipal law enforcement and emergency medical personnel can distribute an opioid antagonist, with instructions on how to use it, to a person who is believed to be “at substantial risk” of experiencing an overdose or their “responsible family member friend or other person.” 21 R.I. Gen. Laws Ann. § 21-28.9-3(c)(1). They have civil immunity if they do so in good faith and without willful or wanton misconduct. 21 R.I. Gen. Laws Ann. § 21-28.9-3(c)(2).
- Pursuant to Rhode Island regulations:
  - Anyone may lawfully possess opioid antagonists. 216 R.I. Code R. 20-20-5.3(B).
Any healthcare professional may dispense opioid antagonists. 216 R.I. Code R. 20-20-5.3(C).
  ▪ “Healthcare professional” is defined as “a physician, physician assistant, or an advanced practice registered nurse licensed in Rhode Island, who is authorized to prescribe drugs or any pharmacists licensed in Rhode Island authorized to dispense drugs.” 216 R.I. Code R. 20-20-5.2(4).

A prescriber may prescribe and dispenser may dispense an opioid antagonist to a person at risk of overdose and/or their family, friends, or other people “reasonably expected” to be in a position to help the person experiencing overdose. 216 R.I. Code R. 20-20-5.3.1(A).
  ▪ A prescriber or dispenser must ensure the person prescribed or dispensed the opioid antagonist receives “patient information” which includes information on recognizing and preventing an overdose; performing rescue breathing and resuscitation; dosage and administration; calling 911; how to take care of someone after administration; and any other necessary issues. 216 R.I. Code R. 20-20-5.3.1(B); 216 R.I. Code R. 20-20-5.2(9).

A healthcare professional who administers, dispenses, prescribes, purchases, acquires, possesses, or uses an opioid antagonist is not subject to professional discipline if done with reasonable care and in good faith to help a person experiencing an overdose or persons in a position to help a person experiencing an overdose. 216 R.I. Code R. 20-20-5.3.1(C).

A person who administers naloxone for free in the good faith belief that they or another person is experiencing an overdose is not engaging in the unlicensed practice of medicine and is subject to the immunity granted in the Rhode Island Good Samaritan laws. 216 R.I. Code R. 20-20-5.3.2(A), (C). They are also not liable for any statute or regulation enforceable by the Department of Health. 216 R.I. Code R. 20-20-5.3.2(A).

**Naloxone Standing Order**

Language related to standing orders was removed in July 2022. References to standing orders for naloxone are now limited to the school setting; “School physicians shall prepare standing orders for the procedures to be followed in dealing with a suspected opioid overdose in a school setting. The standing orders shall not require any school nurse-teacher to administer an opioid antagonist.” 21 R.I. Gen. Laws Ann. 16-21-35(c).

**Good Samaritan Law**

A person who in good faith and without malice or intent to defraud, who seeks medical assistance for someone experiencing a drug overdose or another drug-related emergency, cannot be charged or prosecuted with drug possession, possession of drug paraphernalia, or operating a drug-involved premises, if the evidence for those charges was found because the person sought medical assistance. 21 R.I. Gen. Laws Ann. § 21-28.9-4(a).

This immunity also applies to a violation of probation or parole for the same circumstances. 21 R.I. Gen. Laws Ann. § 21-28.9-4(d).

Giving first aid or medical assistance may be considered as a mitigating factor in other criminal prosecutions “pursuant to the controlled substances act.” 21 R.I. Gen. Laws Ann. § 21-28.9-4(c).
» The person who overdosed has the same protections. 21 R.I. Gen. Laws Ann. § 21-28.9-4(b).

South Carolina

Legality of Injection and Smoking Equipment

» Syringes are not listed as drug paraphernalia under South Carolina law. S.C. Code Ann. § 44-53-110(33). However, “any instrument, device, article, or contrivance used, designed for use, or intended for use in ingesting, smoking, administering, manufacturing, or preparing a controlled substance” is considered drug paraphernalia. S.C. Code Ann. § 44-53-110(33).

» Smoking equipment would be drug paraphernalia as “any instrument, device, article, or contrivance used, designed for use, or intended for use in…smoking…a controlled substance” is considered paraphernalia. S.C. Code Ann. § 44-53-110(33).

» It is unlawful to possess, sell, deliver, or possess with intent to sell or deliver paraphernalia. S.C. Code Ann. § 44-53-391(a).

» Possession, sale, delivery and possession with intent to sell or deliver paraphernalia is punishable by a $500 maximum civil fine. S.C. Code Ann. § 44-53-391(c).

» Syringes may only be sold at retail by pharmacists or assistant pharmacists through permitted pharmacies. S.C. Code Ann. § 44-53-930. There is an exception allowing sellers of veterinary medicines to sell syringes if they register with the Department of Health and Environmental Control. S.C. Code Ann. § 44-53-930.

» While there is no law authorizing syringe services programs, they are not forbidden because there is no law prohibiting possession or delivery of syringes.

Legality of Drug Checking Equipment

» South Carolina’s drug paraphernalia definition does not contain language that would include drug checking equipment. See S.C. Code Ann. § 44-53-110(33).

» Additionally, “rapid fentanyl test strips or any testing equipment or devices solely used, intended for use, or designed to determine whether a substance contains fentanyl or its analogues” are explicitly excluded from the definition of drug paraphernalia. S.C. Code Ann. § 44-53-393.

Naloxone Access Law

» South Carolina’s naloxone access law uses the term “opioid antidote” which is defined as “naloxone hydrochloride or other similarly acting drug approved by the United States Food and Drug Administration for the treatment of an opioid overdose.” S.C. Code Ann. § 44-130-20(7).

» A prescriber may prescribe an opioid antidote by written prescription to any person at risk of overdose, or a caregiver of a person at risk. S.C. Code Ann. § 44-130-30(A). They may also prescribe an opioid antidote to a first responder by standing order. S.C. Code Ann. § 44-130-30(C). The prescriber must provide basic training to the person at risk or the caregiver on dosage and administration of an opioid antidote, overdose prevention and recognition, the importance of calling 911 for medical assistance, and how to care for someone after administering an opioid antidote. S.C. Code Ann. § 44-130-30(B).

» “Caregiver” means a person who isn’t at risk of overdose but may be in a position to assist another person during an overdose. S.C. Code Ann. § 44-130-20(1).
Pharmacists may dispense an opioid antidote via prescription or standing order or written joint protocol issued by the Board of Medical Examiners and the Board of Pharmacy. S.C. Code Ann. § 44-130-40(A)-(B). Any protocol must at least require that the pharmacist provide overdose information, document the transaction, notify the primary care provider of the person who received the opioid antidote, any training or education the Board of Medical Examiners and the Board of Pharmacy deem necessary for the pharmacist, guidelines for determining who may function as a caregiver, and any other provisions deemed necessary by the Board of Medical Examiners and the Board of Pharmacy. S.C. Code Ann. § 44-130-40(B). See below for more information on South Carolina’s joint protocol.

A prescriber may also prescribe an opioid antidote, directly or by standing order, to a community distributor for distribution to a person at risk of overdose or a caregiver of a person at risk. S.C. Code Ann. § 44-130-70(A). Pharmacists may also dispense to a community distributor pursuant to a prescription or standing order. S.C. Code Ann. § 44-130-70(B).

“Community distributor” is defined as “an organization, either public or private, which provides substance use disorder assistance and services, such as counseling, homeless services, advocacy, harm reduction, alcohol and drug screening, and treatment to individuals at risk of experiencing an opioid-related overdose.” S.C. Code Ann. § 44-130-20(2).

Hospitals, through an employed health care provider, may also distribute opioid antidotes to people at risk of overdose or a caregiver of a person at risk. S.C. Code Ann. § 44-130-75(A). Hospitals and their employed health care providers who do so are not subject to criminal or civil liability and the health care provider is not subject to disciplinary action by their licensing board. S.C. Code Ann. § 44-130-75(B).

A prescriber who issues a prescription or standing order for an opioid antidote, or a pharmacist who dispenses an opioid antidote, is not civilly or criminally liable, and is not subject to professional discipline, for any act or omission. S.C. Code Ann. § 44-130-30(D); S.C. Code Ann. § 44-130-40(C).

A caregiver, first responder, coroner, deputy coroner or coroner’s designee who administers naloxone in good faith to a person experiencing an overdose is immune from civil or criminal penalties. S.C. Code Ann. § 44-130-50(B); S.C. Code Ann. § 44-130-60(C); S.C. Code Ann. § 44-130-90(C).

Community distributors are immune from civil or criminal liability as a result of distribution of naloxone. S.C. Code Ann. § 44-130-70(D).

Naloxone Standing Order

South Carolina’s joint protocols act as a standing order. There are separate protocols for individuals (located here) and community distributors (located here).

Both protocols allow pharmacists to dispense the following formulations, intranasal naloxone 2 mL as pre-filled syringes with generic atomizer, 4mg nasal spray, or 1mL single dose vials intramuscular naloxone.

Both protocols require educating the receiver of the naloxone on overdose risk factors, signs of overdose, responding to an overdose, and how to use naloxone. The community distributor protocol also requires that a person dispensed or distributed naloxone call 911 before administration and stay on the line until first responder arrival.
The individual protocol allows pharmacists to dispense naloxone to persons who voluntarily request naloxone and who are at risk of overdose or are the caregivers of a person at risk of overdose and includes an additional formulation, 8mg nasal spray naloxone.

The community distributor protocol allows pharmacists to dispense naloxone to a community distributor of services to people at risk of overdose, as approved by the South Carolina Department of Alcohol and Other Drug Abuse Services. It also includes an additional formulation, auto-injector naloxone HCI.

**Good Samaritan Law**

A person may not be prosecuted for certain types of possession, use, or delivery of a controlled substance or paraphernalia so long as they sought medical assistance in good faith for another person. S.C. Code Ann. § 44-53-1920(A)-(B).

The protection applies only if:
- The person reasonably believed he was the first person to call for medical assistance;
- The person remained with the person experiencing the overdose;
- The person provided their own name to 911 or law enforcement and cooperated with medical or law enforcement help;
- The evidence for the offense was obtained because the person called for medical assistance; and,
- The person did not seek medical assistance during the execution of a warrant or legal search. S.C. Code Ann. § 44-53-1920(B), (D).

The same immunity applies for the person who overdosed, so long as the person who called for medical assistance used their own name and fully cooperated with medical and law enforcement personnel. S.C. Code Ann. § 44-53-1930.

Calling for help may be used as a mitigating factor in other prosecutions for drug or alcohol related offenses. S.C. Code Ann. § 44-53-1940.

Immunity is not guaranteed for the caller if they had previously sought immunity under the law. S.C. Code Ann. § 44-53-1920(C).

**South Dakota**

**Legality of Injection and Smoking Equipment**

Any equipment, products, or materials that are primarily used, intended for use, or designed for use to inject or inhale controlled substances in violation of the law are considered drug paraphernalia. S.D. Codified Laws § 22-42A-1.

Use or possession with intent to use drug paraphernalia is a class 2 misdemeanor. S.D. Codified Laws § 22-42A-3.

A class 2 misdemeanor is punishable by 30 days maximum in county jail and/or a $500 maximum fine. S.D. Codified Laws § 22-6-2(2).

Delivery, possession with intent to deliver, or manufacture with intent to deliver drug paraphernalia is a class 6 felony. S.D. Codified Laws § 22-42A-4.

A class 6 felony is punishable by 2 years maximum in a state correctional facility and/or a $4,000 maximum fine. S.D. Codified Laws § 22-6-1(9).

Syringe services programs are not authorized by law.
Legality of Drug Checking Equipment

» Any equipment, products, or materials that are used, intended for use, or designed for use to test or analyze controlled substances in violation of the law are considered drug paraphernalia. **S.D. Codified Laws § 22-42A-1.**

» Use, possession with intent to use, delivery, possession with intent to deliver and manufacture with intent to deliver is punishable the same as above.

» Products to test for fentanyl and fentanyl analogs are exempt from the definition of drug paraphernalia. **S.D. Codified Laws § 22-42A-1.** Therefore, it is not against the law to possess, use and distribute fentanyl testing products such as fentanyl test strips.

Naloxone Access Law

» South Dakota's naloxone access laws use the term “opioid antagonist” defined as “naloxone hydrochloride or any other similarly acting and equally safe drug approved by the federal Food and Drug Administration for the treatment of drug overdose.” **S.D. Codified Laws § 34-20A-99.**

» A prescriber may prescribe an opioid antagonist, directly or by standing order, to a person at risk of overdose or a family member, friend, or other “close third party” that the prescriber reasonably believes to be able to help someone experiencing an overdose. **S.D. Codified Laws § 34-20A-105.**

» Any family member, friend, or other “close third party” to a person at risk of overdose may be prescribed, possess, distribute, and administer an opioid antagonist if it is lawfully acquired through a licensed health care professional. **S.D. Codified Laws § 34-20A-104.**

» A health care professional who prescribes or dispenses an opioid antagonist, and is authorized to do so, has immunity from civil, criminal, and disciplinary actions. **S.D. Codified Laws § 34-20A-106.**

» First responders operating under a standing order may possess and administer an opioid antagonist if they first receive training. **S.D. Codified Laws § 34-20A-98; 34-20A-101.**

» First responders, and physicians who issue a standing order to first responders, are not civilly liable for any outcome of the administration of an opioid antagonist. **S.D. Codified Laws § 34-20A-103.**

» An employer may obtain from a licensed healthcare professional and make an opioid antagonist available on their premises if:
» They develop a protocol for where the opioid antagonist with be located as well as how it will be stored, transported, and maintained.
» They provide the Department of Health’s training to employees and personnel authorized to administer on the premises and
» “prominently” post instructions on administration and post-administration of opioid antagonists, if it will be accessible to the public. **S.D. Codified Laws § 34-20A-105.1.**

» The employer, employee and authorized personnel are not civilly liable for any outcome of the administration of an opioid antagonist or failure to administer so long as the actions are only ordinary negligence. **S.D. Codified Laws § 34-20A-105.1.**

Naloxone Standing Order

» South Dakota’s naloxone standing order is available [here](#).

» The standing order allows pharmacists to dispense naloxone to anyone at risk of overdose or a family member, friend, or close third party to a person at risk.
» Pharmacies must provide notification of participation and pharmacists must maintain a copy of the standing order at the pharmacy, complete a 1 hour training on naloxone dispensing, administration and recipient education, and educate and distribute education materials at the time of dispensing.
» Allows pharmacists to dispense prepackaged FDA-approved naloxone HCI nasal spray (like Narcan), intramuscular naloxone with syringes (2 vials of 1mL naloxone with syringes and needles or 2mg/2ml syringes with needles), or FDA-approved prepackaged auto-injector naloxone (with 2 doses)

**Good Samaritan Law**
» A person may not be arrested or prosecuted for misdemeanor or felony offenses involving "possession, inhalation ingestion, or otherwise taking into the body any controlled drug or substance" if:
  o The person contacted law enforcement or emergency medical services to report that another person experiencing a drug overdose is in need of medical assistance;
  o The other person is in need of medical assistance for "an immediate health or safety concern"
  o The person cooperated with law enforcement and medical personnel;
  o The person stayed with the person needing help until help arrived and;
  o The evidence for the charge or prosecution was found because the person sought medical assistance for another. [S.D. Codified Laws § 34-20A-110](#).
» The person calling for help, either for themselves or others, can only receive this immunity one time. [S.D. Codified Laws § 34-20A-113](#).
» There appears to be no immunity for the person who overdosed unless they contact law enforcement or emergency medical services for themself and report that they are in need of medical assistance due to an overdose. A person who calls for help for themself qualifies for immunity so long as the evidence is obtained as a result of the overdose and need for medical assistance; they don’t need to cooperate with responders and do the other things that a person who calls for help for someone else must do to get immunity. [S.D. Codified Laws § 34-20A-111](#).
» Giving first aid or medical assistance (but not necessarily just calling for help) may be used as a mitigating factor in other prosecutions. [S.D. Codified Laws § 34-20A-112](#).

**Tennessee**

**Legality of Injection and Smoking Equipment**
» All equipment, products and materials used, intended for use, or designed for use in injecting or inhaling controlled substances are considered drug paraphernalia. [Tenn. Code Ann. § 39-17-402(12)](#).
» Use or possession with intent to use drug paraphernalia to inject or inhale controlled substances in violation of the law is a class A misdemeanor. [Tenn. Code Ann. § 39-17-425(a)](#).
  o A class A misdemeanor is punishable by maximum 11 months and 29 days imprisonment and/or $2,500 maximum fine. [Tenn. Code Ann. § 40-35-111(e)(1)](#).
» Delivery or possession with intent to deliver drug paraphernalia "knowing, or under circumstances where one reasonably should know" that it will be used to inject or inhale a
  - A class E felony is punishable by 1 to 6 years imprisonment and/or a $3,000 fine maximum. Tenn. Code Ann. § 40-35-111(b)(5).

» If a person alerts law enforcement prior to searching a person, their premises or their vehicle that there is a hypodermic or other sharp object on their person, their premises, or their vehicle, the person will not be charged or prosecuted for possession of drug paraphernalia for the hypodermic or sharp but could be charged or prosecuted for any other paraphernalia. Tenn. Code Ann. § 40-7-124.

» Syringe services programs are authorized by law if approved by the department of health. Tenn. Code Ann. § 68-1-136(a). Programs may not be located within 1,000 or 2,00 feet of a school or public park depending on the size of the municipality. Tenn. Code Ann. § 68-1-136(g).

» Employees, volunteers, and participants in a syringe services program may possess syringes or other injection supplies that they got from or are returning to an established program (including controlled substance residue), but only with written verification that the supplies came from the program. For participants, the exception only applies while the person is engaged in the program or going to or from the program. Tenn. Code Ann. § 68-1-136(c).

Legality of Drug Checking Equipment

» All equipment, products and materials used, intended for use, or designed for use in testing or analyzing controlled substances is considered drug paraphernalia. Tenn. Code Ann. § 39-17-402(12).

» The punishments for use, possession with intent to use, delivery and possession with intent to deliver are the same as above.

» Until July 1, 2025, narcotic testing equipment for the purposes of testing for a synthetic opioid is exempt from the definition of drug paraphernalia so long as it is not used in the process of delivering, selling, manufacturing controlled substances or possessing controlled substances with the intent to manufacture, deliver or sell it. Tenn. Code Ann. § 39-17-402(12); Tenn. Code Ann. § 39-17-417.

Naloxone Access Law

» Tennessee’s naloxone access laws use the term “opioid antagonist” which is defined as “a formulation of naloxone hydrochloride or another similarly acting and equally safe drug approved by the United States food and drug administration for the treatment of a drug-related overdose.” Tenn. Code Ann. § 63-1-152(a)(2).

» A prescriber may prescribe, directly or by standing order, an opioid antagonist to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose. Tenn. Code Ann. § 63-1-152(b).

» A prescriber may also prescribe directly or by standing order to an organization, municipal or county entity for the purposes of distribution to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose. Tenn. Code Ann. § 63-1-152(b). Entities that distribute are immune from civil liability so long as they did not act with gross negligence or willful misconduct. Tenn. Code Ann. § 63-1-152(f)(2).
Pursuant to standing order, an individual or entity may receive, store, and distribute an opioid antagonist to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose. Tenn. Code Ann. § 63-1-152(c).

A licensed healthcare provider who prescribes, dispenses, administers, or issues a standing order for an opioid antagonist, in good faith and with reasonable care, is immune from civil liability and professional discipline so long as they did not act with gross negligence or willful misconduct. Tenn. Code Ann. § 63-1-152(f)(1), (3); Tenn. Code Ann. § 63-1-152(g).

A person who administers an opioid antagonist in good faith to a person experiencing an overdose is immune from civil penalties, so long as they exercise reasonable care and are not acting with gross negligence or willful misconduct. Tenn. Code Ann. § 63-1-152(f)(3).

**Naloxone Standing Order**

Tennessee doesn’t have a statewide standing order, but it does have a statewide collaborative practice agreement that works like a standing order located here.

The collaborative practice agreement permits pharmacists to dispense the following formulations to people who are at risk of overdose or are a friend, family member, or other person in the position to help in the case of an overdose: intramuscular naloxone (1 (one) 10mL multi-dose flip top vial, or 2 (two) 1 mL vials), 4mg Narcan or 8mg Kloxxado nasal spray, or prefilled syringes with generic atomizer (concentration: 1mg/1mL).

A pharmacist may substitute another formulation at their discretion “using reasonable care and clinical judgement.”

It also permits pharmacists to dispense naloxone to certain agencies or organizations.

Pharmacists must provide basic training on using naloxone to the recipient and must also complete an opioid antagonist training program approved by the Tennessee Department of Health.

Because this agreement requires pharmacies to opt-in, check with the pharmacy before attempting to get naloxone to see if they participate.

**Good Samaritan Law**

Any person who acts in good faith and seeks medical assistance for themself or someone they think is experiencing an overdose cannot be arrested, charged, or prosecuted with simple possession or casual exchange of drugs or possession of drug paraphernalia if the evidence for the offense resulted from seeking medical assistance. Tenn. Code Ann. § 63-1-156(a)(3), (b).

“Seeks medical assistance” is defined as “[a]ccesses or assists in accessing medical assistance or the 911 system;” “[c]ontacts or assists in contacting law enforcement or a poison control center;” or “[p]rovides care or contacts or assists in contacting any person or entity to provide care while awaiting the arrival of medical assistance to aid a person who is experiencing or believed to be experiencing a drug overdose.” Tenn. Code Ann. § 63-1-156(a)(5).

Any person protected from charges under this law also cannot be penalized for violation of a protective or restraining order or for violation of a condition of pretrial release, probation, or parole based on simple possession or casual exchange of drugs or possession of drug paraphernalia. Tenn. Code Ann. § 63-1-156(a)(3), (b).
Providing first aid or other medical assistance to a person experiencing an overdose can be used as a mitigating factor in another prosecution, but it is unclear whether “providing first aid” includes simply calling for help. Tenn. Code Ann. § 63-1-156(c)(1).

This immunity also applies to the person who overdosed, but only one time. Tenn. Code Ann. § 63-1-156(b). Subsequent immunity is subject to the responding law enforcement officer or district attorney. Tenn. Code Ann. § 63-1-156(b).

Texas

Legality of Injection and Smoking Equipment

All equipment, products and materials used, or intended for use in injecting or inhaling controlled substances into the human body in violation of the Texas Controlled Substances Act are considered drug paraphernalia. Tex. Health & Safety Code Ann. § 481.002(17).

Knowing or intentionally using or possessing with intent to use drug paraphernalia to inject or inhale a controlled substance in violation of the Texas Controlled Substances Act is a class C misdemeanor. Tex. Health & Safety Code Ann. § 481.125(a), (d).

A class C misdemeanor is punishable by a maximum fine of $500. Tex. Penal Code Ann. § 12.23.

Knowing or intentionally delivering, possessing with intent to deliver, or manufacturing with intent to deliver drug paraphernalia to an adult knowing that the receiver intends to use it to inject or inhale a controlled substance in violation of the Texas Controlled Substances Act is a class A misdemeanor. Tex. Health & Safety Code Ann. § 481.125(b-f).

A class A misdemeanor is punishable by confinement in jail for maximum 1 year and/or a $4,000 maximum fine. Tex. Penal Code Ann. § 12.21.

Authorization for a pilot syringe services program in Bexar County exists in the law but, there are no explicit protections for the program from drug paraphernalia charges. Tex. Gov't Code Ann. § 531.0972. Texas Attorney General guidance has stated the authorization is not an exception “from prosecution persons who possess drug paraphernalia while participating in a pilot needle- and syringe-exchange program authorized for Bexar County. Participants in the program may, in the discretion of the prosecutor, be prosecuted under the Texas Controlled Substances Act.” Tex. Att'y Gen. Op. GA-0622 (2008).

Legality of Drug Checking Equipment

All equipment, products and materials used, or intended for use in testing or analyzing controlled substances in violation of the Texas Controlled Substances Act are considered drug paraphernalia. Tex. Health & Safety Code Ann. § 481.002(17).

The punishments for use, possession with intent to use, delivery, possession with intent to deliver and manufacture with intent to deliver are the same as above.

Naloxone Access Law

Texas’s naloxone access laws use the term “opioid antagonist” defined as any drug that binds to opioid receptors and blocks or otherwise inhibits the effects of opioids acting on those receptors.” Tex. Health & Safety Code Ann. § 483.101(2).
A prescriber may prescribe an opioid antagonist, directly or by standing order, to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose. Tex. Health & Safety Code Ann. § 483.102(a).

A pharmacist may dispense an opioid antagonist pursuant to a prescription to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose. Tex. Health & Safety Code Ann. § 483.103(a).

A prescriber or pharmacist, acting in good faith and with reasonable care, is not subject to criminal or civil liability or professional discipline for prescribing or dispensing an opioid antagonist or any future use of the opioid antagonist. Tex. Health & Safety Code Ann. §§ 483.102; 483.103.

A person or organization acting under a standing order may store and distribute opioid antagonists for free. Tex. Health & Safety Code Ann. § 483.104.

Any person may possess an opioid antagonist, even if they don’t have a prescription for it. Tex. Health & Safety Code Ann. § 483.105.

A person who, in good faith and with reasonable care, administers (or chooses not to administer) an opioid antagonist to a person experiencing an overdose is not subject to criminal prosecution, civil liability, or professional licensing sanction. Tex. Health & Safety Code Ann. § 483.106(a).

**Naloxone Standing Order**

Texas does not have a statewide standing order; pharmacists may request a standing order here and must complete a training before receiving a standing order.

The order permits pharmacists to dispense intranasal naloxone (Narcan spray or equivalent or generic atomizer) and intramuscular naloxone with syringe, but explicitly excludes auto-injector naloxone.

**Good Samaritan Law**

Texas’s drug overdose Good Samaritan law applies when:

- (1) A person is the first person to request emergency medical assistance in response to the possible overdose of another person;
- (2) The person makes the request during an ongoing medical emergency;
- (3) The person remained on the scene until the medical assistance arrives; and

Texas’s drug overdose Good Samaritan law applies to the person who overdosed when:


Offenses the Good Samaritan laws apply to are:

The protection does not apply if:
- (1) the request for aid occurred in the midst of a law enforcement arrest or execution of a search warrant;
- (2) the request for aid occurred while the eligible person committed another offense not subject to the protection;
- (3) the individual had a prior conviction for or a prior placement on deferred adjudication community supervision for an offense under the Texas Controlled Substances Act, the Texas Dangerous Drug Act, or the chapter governing “abusable volatile chemicals”;
- (4) the individual successfully relied on the defense to gain acquittal previously; or
- (5) the individual previously requested emergency medical assistance for a possible overdose of themselves or another during the prior 18 months.

Utah

Legality of Injection and Smoking Equipment

- All equipment, products and materials used, or intended for use in injecting or inhaling controlled substances into the human body in violation of the Utah Controlled Substances Act are considered drug paraphernalia. Utah Code Ann. § 58-37a-3(1).
- Use or possession with intent to use drug paraphernalia to inject or inhale a controlled substance in violation of the Utah Drug Paraphernalia Act is a class B misdemeanor. Utah Code Ann. § 58-37a-5(1).
- A class B misdemeanor is punishable by 6 months imprisonment maximum and/or a $1,000 maximum fine. Utah Code Ann. § 76-3-204(2); Utah Code Ann. § 76-3-301(1)(d).
- Delivery, possession with intent to deliver, or manufacture with intent to deliver drug paraphernalia to an adult knowing it will be used to inject or inhale a controlled substance into the human body in violation of the Utah Drug Paraphernalia Act is a class A misdemeanor. Utah Code Ann. § 58-37a-5(2).
- A class A misdemeanor is punishable by a maximum of 364 days imprisonment and/or a $2,500 maximum fine. Utah Code Ann. § 76-3-204(1); Utah Code Ann. § 76-3-301(1)(c).
- If syringes are in a sealed sterile package, it is not unlawful to sell or distribute them if they are for a legitimate medical purpose, including for injection of prescriptions prescribed by a practitioner or to prevent disease transmission. Utah Code Ann. § 58-37a-5(5)(a).
- A person also cannot be charged with possession of syringes as drug paraphernalia if it is unused and in a sealed, sterile package. Utah Code Ann. § 58-37a-5(5)(b).
- Syringe services programs are authorized by law and can be operated by governmental and non-governmental agencies. Utah Code Ann. § 26B-7-117.
- Operating requirements issued by the Department of Health and Human Services include but are not limited to:
• Meeting with local stakeholders prior to beginning a program and submitting meeting summaries to the department;
• Written notice to the department of intent to begin a program 15 days prior to beginning;
• Submission of safety protocols and sharps disposal plans;
• Facilitation of exchanging syringes and providing for disposal; and
• Providing verbal and written instructions to clients on preventing transmission of blood borne pathogens, drug and alcohol treatment information and referrals, HIV and HCV testing information and referrals, and how and where to obtain opiate antagonists.


o Violations of the operating requirements for syringe services programs may result in an assessment of a $5,000 maximum civil or administrative penalty by the Department of Health and Human Services. Utah Admin. Code r. R386-900-7(1); Utah Code Ann. §26B-1-224(2).

Legality of Drug Checking Equipment

» All equipment, products and materials used, or intended for use in testing or analyzing controlled substances in violation of the Utah Controlled Substances Act are considered drug paraphernalia. Utah Code Ann. §58-37a-3(1).

» However, drug checking equipment, including but not limited to, fentanyl test strips, is excluded from the definition of drug paraphernalia. Utah Code Ann. §58-37a-3(3). Therefore, it is not against the law to use, possess, or distribute, drug checking equipment.

Naloxone Access Law

» Utah’s naloxone access laws use the term "opiate antagonist" which is defined as "naloxone hydrochloride or any similarly acting drug that is not a controlled substance and that is approved by the federal Food and Drug Administration for the diagnosis or treatment of an opiate-related drug overdose." Utah Code Ann. §26B-4-501(13).

» A prescriber may prescribe and dispense an opiate antagonist, directly or by standing order, without a prescriber-patient relationship, to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose, or to an overdose outreach provider. Utah Code Ann. §26B-4-509(2).

» A prescriber must provide education on how to recognize and respond to an overdose. Utah Code Ann. §26B-4-509(3).

» A pharmacist may dispense an opiate antagonist under a standing order. Utah Code Ann. §26B-4-510(1).

» An overdose outreach provider may store and distribute an opiate antagonist that has been obtained via prescription to a family member, friend or other person in a position to help, but must provide overdose education. Utah Code Ann. §26B-4-511. The overdose outreach provider may also administer an opiate antagonist to someone experiencing an overdose. Utah Code Ann. §26B-4-509(2)(a)(iii)(B).

» Overdose outreach providers include individuals, pharmacists, law enforcement, health departments, drug and alcohol treatment providers, service providers to the homeless or to people with substance use disorder, and organizations that provide substance use or mental
health services under contract with a local substance abuse authority, or a local mental health
» Prescribers are immune from civil liability for prescribing or administering an opiate antagonist
so long as they are not acting in the scope of their responsibilities or duty of care. Utah Code
Ann. § 26B-4-509(1)(b).
» Overdose outreach providers and other people are immune from civil liability for administering
an opiate antagonist. Utah Code Ann. § 26B-4-509(1)(a)(ii). Overdose outreach providers are
also immune from civil liability for furnishing opioid antagonists. Utah Code Ann. § 26B-4-
511(1).

Naloxone Standing Order
» Utah’s standing order is available here.
» The order permits pharmacists to dispense at least two doses of the following formulations to
people who are at risk of overdose or are a friend, family member, other person in the position
to help in the case of an overdose, or to an individual on behalf of an outreach provider: 4mg
nasal spray, 1 mg/mL in a 2 mL pre-filled syringe with atomizer, intramuscular mL in a 1 mL
unit dose vial or prefilled syringe device, or 2 mg/0.4 ml auto-injector.
» Pharmacy registration is voluntary.

Good Samaritan Law
» It is an affirmative defense to an allegation of drug possession or possession of paraphernalia
if:
o The person reports or assists a person who reports an overdose to “a medical provider, an
emergency medical service provider….a law enforcement officer, a 911 emergency call
system, or an emergency dispatch system” or is the subject of a report
o The person provides the location of the overdose and remains at the location with the
person experiencing overdose until a responding law enforcement officer or emergency
medical provider arrives
o The person cooperates with the responding emergency personnel, including providing
information about the person experiencing the overdose and on what substance may have
caused the overdose
o The allegation of drug possession or possession of drug paraphernalia is a result of the
same events that caused the report of the overdose
» The affirmative defense does not apply if the medical assistance is called for during the
» Reporting an overdose is a mitigating factor in prosecution for other crimes subject to the same
requirements. Utah Code Ann. § 76-3-203.11.

Vermont
Legality of Injection and Smoking Equipment
» All equipment, products, devices, and materials are drug paraphernalia if used, intended for
use, or designed for use in injecting or inhaling controlled substances into the human body in


» Vermont has no other drug paraphernalia offenses and specifically exempts the distribution and possession of syringes as part of a syringe services program from the prohibition on sale to a minor. Vt. Stat. Ann. tit. 18, § 4476(b).

» Syringe services programs are authorized by law, subject to approval by the Commissioner of Health if the program complies with operating guidelines issued by the Department of Health. Vt. Stat. Ann. tit. 18, § 4478. Syringes and other harm reduction supplies distributed and possessed by syringe services programs are not considered drug paraphernalia. Vt. Stat. Ann. tit. 18, § 4475(a)(1).

Legality of Drug Checking Equipment
» All equipment, products, devices, and materials are drug paraphernalia if used, intended for use, or designed for use in testing or analyzing controlled substances in violation of the law. Vt. Stat. Ann. tit. 18, § 4475.

» As explained above, Vermont only criminalizes the sale of drug paraphernalia and has no other drug paraphernalia offenses. Vt. Stat. Ann. tit. 18, § 4476. Therefore, possession, free distribution, and sale to adults of drug checking equipment is not unlawful.

» Vermont also specifically allows approved drug checking services providers to test and analyze substances for an individual. Vt. Stat. Ann. tit. 18, § 4240a(b).

» Service providers may not be arrested, charged, or prosecuted for violations of most drug related offenses and may not have their property taken or receive any civil, administrative, or professional penalty. Vt. Stat. Ann. tit. 18, § 4240a(d).

» Individuals who have their drugs tested cannot be arrested, charged, or prosecuted for possession of regulated drug or receive any civil, administrative, or professional penalty, only if the evidence for the offense is obtained as a result of the person seeking the drug checking services. Vt. Stat. Ann. tit. 18, § 4240a(e).

» Test results of the drugs are not admissible in criminal and civil proceedings. Vt. Stat. Ann. tit. 18, § 4240a(g).

Naloxone Access Law
» Vermont uses the term “opioid antagonist” in its naloxone access law which is defined as “a drug that, when administered, negates or neutralizes in whole or part the pharmacological effects of an opioid in the body.” Vt. Stat. Ann. tit. 18, § 4240(a)(2).

» A prescriber may, in good faith and within their scope of practice, prescribe, directly or by standing order, and dispense an opioid antagonist to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose. Vt. Stat. Ann. tit. 18, § 4240(c)(1).


» A health care professional who prescribes, dispenses, or distributes an opioid antagonist in good faith within their scope of practice is not subject to criminal or civil liability for prescribing, dispensing, or distributing an opioid antagonist or any future use of the opioid antagonist.
unless the professional acts with recklessness, gross negligence, or intentional misconduct. *Vt. Stat. Ann. tit. 18, § 4240(c)(2).*

» A person is immune from civil or criminal liability for administering an opioid antagonist to a person they believe in good faith to be suffering an opioid-related overdose as long as they don’t act with recklessness, gross negligence, or intentional misconduct. *Vt. Stat. Ann. tit. 18, § 4240(d)(2).*

» A person acting on behalf of an overdose prevention program is immune from civil or criminal liability for providing education on opioid overdose prevention or for buying, receiving, distributing, or possessing an opioid antagonist unless the person acts with recklessness, gross negligence, or intentional misconduct. *Vt. Stat. Ann. tit. 18, § 4240(e).*

**Naloxone Standing Order**

» Vermont’s standing order is located [here](#).

» The order permits pharmacists to dispense naloxone nasal spray (including Narcan) to Vermont residents who are at risk of overdose or are a friend, family member, or other person in the position to help in the case of an overdose.

» Naloxone must be distributed with informational materials.

**Good Samaritan Law**

» A person who seeks medical assistance for themself or another person experiencing an overdose, in good faith and in a timely manner, may not be cited, arrested, or prosecuted for most drug offenses if evidence for the crime was found because the person called for help. *Vt. Stat. Ann. tit. 18, § 4254(b)-(d).*

» The person who calls for help may also not be found in violation of a protection order or any condition of pretrial release, probation, furlough, or parole. *Vt. Stat. Ann. tit. 18, § 4254(e).*

» The person who calls for help may not be subject to forfeiture, except for obvious contraband. *Vt. Stat. Ann. tit. 18, § 4254(h).*

» Calling for help will be considered a mitigation factor for any other offense. *Vt. Stat. Ann. tit. 18, § 4254(f).*

» The person who overdosed has the same protections. *Vt. Stat. Ann. tit. 18, § 4254(c).*

**Virginia**

**Legality of Injection and Smoking Equipment**

» All equipment, products, and materials designed for use or intended for use in injecting or inhaling a controlled substance is drug paraphernalia. *Va. Code Ann. § 18.2-265.1.*

» Simple possession of drug paraphernalia is not illegal, but possession with intent to sell paraphernalia, knowing, or under circumstances where one reasonably should know, that it is designed or intended for use to inject or inhale a controlled substance is illegal. *Va. Code Ann. § 18.2-265.3(A).* However, a separate law makes possession or distribution of “controlled paraphernalia,” including syringes, but not including smoking equipment, a class 1 misdemeanor. *Va. Code Ann. § 54.1-3466(A)-(D).* This does not include syringes that are dispensed and possessed with naloxone as part of an organization that provides services to people at risk of overdose nor to syringes distributed and possessed by an authorized comprehensive harm reduction program. *Va. Code Ann. § 54.1-3466(F)-(G); Va. Code Ann. § 54.1-3467(B)-(C).*
Sale or possession with intent to sell drug paraphernalia to an adult, knowing, or under circumstances where one reasonably should know, that it is designed or intended for use to inject or inhale a controlled substance is a class 1 misdemeanor. Va. Code Ann. § 18.2-265.3(C).

A class 1 misdemeanor is punishable by imprisonment for maximum 12 months and/or $2,500 maximum fine. Va. Code Ann. § 18.2-11(a).

Possession and distribution of controlled paraphernalia to an adult, is a class 1 misdemeanor as well. Va. Code Ann. § 54.1-3466(A)-(D).

Syringe services programs, called “comprehensive harm reduction programs,” are explicitly authorized under Va. Code Ann. § 32.1-45.4.

The programs must be operated by local health department or “affiliated organizations” contracted with the state health department. Va. Code Ann. § 32.1-45.4(A).

Programs must have verification that syringes, or other injection supplies were obtained from the program. Va. Code Ann. § 32.1-45.4(B).

The crimes of possession of a controlled substance for residual amounts of drugs and possession, sale, or distribution of drug paraphernalia or controlled paraphernalia do not apply to people participating in a harm reduction program when the controlled substance is in a syringe obtained or returned to the program or the paraphernalia is obtained from the program evidenced by the required verification. Va. Code Ann. § 32.1-45.4(G).

Legality of Drug Checking Equipment

All equipment, products, and materials designed for use or intended for use in identifying or testing or analyzing the strength or effectiveness of a controlled substance is drug paraphernalia, except for “narcotic testing products” used to test or fentanyl or its analogs. Va. Code Ann. § 18.2-265.1(4). Therefore, products such as fentanyl test strips are not drug paraphernalia.

Sale and possession with intent to sell other drug checking equipment would be against the drug paraphernalia law and subject to the penalties above.

Simple possession and free distribution of drug checking equipment are not prohibited as simple possession of drug paraphernalia is generally not prohibited and the definition of “controlled paraphernalia” does not apply to drug checking equipment. Va. Code Ann. § 54.1-3466.

Naloxone Access Law

A prescriber may prescribe, directly or by standing order, and pharmacists or other authorized medical personnel may dispense “naloxone or other opioid antagonist used for overdose reversal” to any person. Va. Code Ann. § 54.1-3408(X). A person who has been given naloxone in this way may possess naloxone and administer naloxone to a person experiencing an overdose. Va. Code Ann. § 54.1-3408(X)-(Z).

Pursuant to a standing order and protocol, a person acting on behalf of a harm reduction organization may dispense naloxone to any person who has received training in using it but may not charge more than the organization paid for the naloxone. If the organization dispensing naloxone wants to dispense injectable naloxone that uses a syringe, the person dispensing the naloxone must be authorized by the Department of Behavioral Health and
Developmental Services on the proper use and disposal of syringes and obtain a controlled substance registration from the Board of Pharmacy. *Va. Code Ann. § 54.1-3408(Y).*

» A person who has received naloxone may possess and administer it to a person who is experiencing an overdose. *Va. Code Ann. § 54.1-3408(X)-(Z).*

» Any person who in good faith prescribes, dispenses, or uses naloxone in an emergency overdose situation is not liable for civil damages for ordinary negligence, in most cases. *Va. Code Ann. § 8.01-225(20), (21).*

**Naloxone Standing Order**

» Virginia’s naloxone standing order is located [here](#).

» The order authorizes pharmacists and emergency medical personnel to dispense naloxone, as well as the following individuals, so long as they have completed a training program:

» Law enforcement

» Firefighters

» Employees of the Departments of Forensic Science, and General Services Division of Consolidated Laboratory Services

» Office of the Chief Medical Examiner employees

» Probation, parole, or correctional officers in the Department of Corrections

» Regional jail employees

» School nurses, school board employees or school health services contractors

» Local health department employees and Medical Reserve Corps volunteers acting on local health department behalf

» Local community service board employees

» Community based organizations, harm reduction sites and any other site approved by the Department of Health to provide naloxone

» Disaster Health Services volunteers of the American Red Cross of Virginia.

» Authorized individuals may dispense the following formulations: 4 mg or 8mg nasal spray, prefilled syringe with generic atomizer, or 2mg auto-injector.

» Pharmacists may also dispense injectable naloxone in 0.4mg/ml #2 single-use 1ml vials

**Good Samaritan Law**

» A person who seeks or obtains emergency medical attention, in good faith, for themselves or another person experiencing an overdose cannot be arrested or prosecuted for possession of a controlled substance, unlawful purchase, possession or consumption of marijuana, public intoxication, or possession of controlled paraphernalia if:

  o The person remains at the scene until a law enforcement officer arrives;

  o The person identifies themselves to law enforcement; and,

  o The evidence for the offense was collected because the person sought or obtained medical attention or rendered emergency care or assistance. *Va. Code Ann. § 18.2-251.03(B)(1).*

» This immunity also applies to the person who overdosed and a person who renders emergency care or assistance, including administering naloxone or providing CPR while another person seeks or obtains medical attention. *Va. Code Ann. § 18.2-251.03(B)(1).*

» The immunity does not apply during the execution of a lawful search warrant or during a lawful search or arrest. *Va. Code Ann. § 18.2-251.03(C).*
Legality of Injection and Smoking Equipment

» All equipment, products and materials used, intended for use or designed for use in injecting or inhaling a controlled substance are considered drug paraphernalia. Wash. Rev. Code Ann. § 69.50.102(a).

» However, use, delivery, possession with intent to deliver, or manufacture with intent to deliver drug paraphernalia is a misdemeanor only if used to “plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, or prepare a controlled substance other than cannabis.” Wash. Rev. Code Ann. § 69.50.412(1)—(3). Language related to inhaling, injecting and otherwise introduced a controlled substance into the body has been removed from the prohibition. Therefore, it is not unlawful to use, possess, deliver, possess with intent to deliver, or manufacture with intent to deliver syringes or smoking equipment.

» Another law prohibits drug paraphernalia from being sold, but specifically exempts legal distribution of syringes and smoking equipment through pharmacies, public health programs, community-based HIV prevention programs, and outreach, shelter, and housing programs. Wash. Rev. Code Ann. § 69.50.4121. The same law previously prohibited free distribution, but the language was removed effective July 1, 2023.


» Adult possession of syringes for the purpose of reducing blood-borne disease is allowed. Wash. Rev. Code Ann. § 69.50.412(5).

» Syringe services programs are authorized by law. Wash. Rev. Code Ann. § 69.50.4121(3).

» Public health and syringe services programs staff who take substance samples for testing and analyzing the substance are exempt from arrest and prosecution for possession or use in a public place of a counterfeit substance or prescription drug without a prescription and possession or use of a controlled substance or cannabis. Wash. Rev. Code Ann. § 69.50.4121(3).

Legality of Drug Checking Equipment

» All equipment, products and materials used, intended for use or designed for use in testing or analyzing a controlled substance are considered drug paraphernalia. Wash. Rev. Code Ann. § 69.50.102(a).

» Like above, use, delivery, sale, possession with intent to deliver and manufacture with intent to deliver drug paraphernalia is a misdemeanor only if used to “plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, or prepare a controlled substance other than cannabis.” Wash. Rev. Code Ann. § 69.50.412(1)—(3). Effective May 13, 2021, language related to testing and analyzing controlled substances was removed from the prohibition.

» Sale of drug paraphernalia, as explained above, is prohibited, however, pharmacies, public health programs, community-based HIV prevention programs, and outreach, shelter, and housing programs may distribute drug checking equipment. Wash. Rev. Code Ann. § 69.50.4121(3).

» As explained above, public health and syringe service program staff are allowed to perform drug checking services and when doing so are exempt from most controlled substances possession and use offenses. Wash. Rev. Code Ann. § 69.50.4121(3).
Naloxone Access Law


» A prescriber may prescribe, dispense, distribute and deliver an opioid overdose reversal medication to a person at risk of overdose or a first responder, family member, or other person in a position to help someone experiencing an overdose, either directly or by standing order, collaborative agreement, or protocol. Wash. Rev. Code Ann. § 69.41.095(1)(a).

» The prescriber must tell the person receiving an opioid overdose reversal medication to transport the person to a hospital or call a first responder when they have administered the opioid overdose reversal medication. Wash. Rev. Code Ann. § 69.41.095(1)(b).

» The State Secretary of Health or their designee may issue a standing order. Wash. Rev. Code Ann. § 69.41.095(5).

» A pharmacist may dispense an opioid overdose reversal medication prescribed, or under a collaborative agreement, standing order, or protocol, if they provide written instructions, “including instructions for seeking immediate medical attention.” Wash. Rev. Code Ann. § 69.41.095(2). They may also administer an opioid overdose reversal medication. Wash. Rev. Code Ann. § 69.41.095(2).

» Any person or entity may possess, store, deliver, distribute, or administer an opioid overdose reversal medication prescribed, or under a collaborative agreement, standing order, or protocol. Wash. Rev. Code Ann. § 69.41.095(3).

» A prescriber who prescribes, dispenses, distributes, or delivers an opioid overdose reversal medication, a pharmacist who dispense an opioid overdose reversal medication, or a person who possesses, stores, distributes, or administers an opioid overdose reversal medication is immune from criminal or civil liability or disciplinary action, if they act in good faith. Wash. Rev. Code Ann. § 69.41.095(4).

Naloxone Standing Order

» Washington’s standing order is located here.

» The order permits pharmacists to dispense the following formulations to people who are at risk of overdose or in the position to help in the case of an overdose: up to 5 kits of two doses of 4mg nasal spray or up to ten vials of 1mL single-dose vials of intramuscular naloxone

» Pharmacists must provide written instructions with naloxone on the proper response to an overdose.

» The order suggests bringing a copy with you to the pharmacy.

Good Samaritan Law

» A person may not be charged or prosecuted for drug possession if they seek medical assistance in good faith for a drug overdose, and evidence of drug possession was found because they sought medical assistance. Wash. Rev. Code Ann. § 69.50.315(1).

West Virginia

Legality of Injection and Smoking Equipment


» Pipes and smoking equipment are drug paraphernalia “if marketed for use or designed for the use with controlled substances.” W. Va. Code § 47-19-3(a).

» There are no state laws prohibiting the possession or giving away of drug paraphernalia. However, sale to minors and sale at certain events and outdoors is prohibited. W. Va. Code § 47-19-6; W. Va. Code § 47-19-8.

» Syringes services programs are authorized as part of harm reduction programs. W. Va. Code Ann. § 16-64-3. Programs must:
  o Offer services from a “qualified licensed health care provider” at every visit;
  o Exclude minors from the SSP but can offer them harm reduction services;
  o Ensure syringes are unique to the program;
  o Distribute with a “goal of a 1:1 model”;
  o Distribute syringes directly to the recipient;
  o Require proof of West Virginia ID upon dispensing syringes;
  o Provide training for staff;
  o Maintain a program for reporting of syringe litter and “endeavor” to collect all community syringe litter; and
  o Maintain a “syringe dispensing plan.” W. Va. Code Ann. § 16-64-3(b), (c).

Legality of Drug Checking Equipment

» Drug checking equipment, except for fentanyl test strips, is considered drug paraphernalia. W. Va. Code § 47-19-3(a)(4). However, as explained above, West Virginia only criminalizes certain sale of drug paraphernalia.

Naloxone Access Law

» West Virginia’s naloxone access law uses the term “opioid antagonist” which is defined as “a federal Food and Drug Administration-approved drug for the treatment of an opiate-related overdose, such as naloxone hydrochloride or other substance, that, when administered, negates or neutralizes, in whole or in part, the pharmalogical [sic] effects of an opioid in the body.” W. Va. Code Ann. § 16-46-2(4).

» A licensed health care provider, acting in good faith and good reasonable care, may prescribe, directly or by standing order, an opioid antagonist to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose, or to a health department, law enforcement agency, or a harm reduction organization for the purpose of distributing opioid antagonists to others. W. Va. Code § 16-46-3(a).

» Harm reduction organizations, health departments, and law enforcement agencies may distribute opioid antagonists to a person at risk of overdose or a family member, friend, or other person able to help someone experiencing an overdose. When doing so, they must provide educational materials on opiate-related overdose prevention, treatment programs, and administering an opioid antagonist. W. Va. Code § 16-46-3(c).

» Pharmacists and pharmacy interns under their supervision may dispense opioid antagonists without a prescription under the state protocol but must provide training on how to administer
an opioid antagonist, the importance of calling for emergency services immediately, and educational materials. **W. Va. Code § 16-46-3a(a)-(b), (d).**

» Any prescriber who prescribes or dispenses an opioid antagonist in good faith is not subject to civil or criminal liability so long as the prescribing was not an act of gross negligence or willful misconduct. **W. Va. Code § 16-46-5(a).**

» Any pharmacist or pharmacy intern, in good faith, dispenses or refuses to dispense an opioid antagonist is immune from civil or criminal liability so long as the dispensing (or not dispensing) of an opioid antagonist was not an act of gross negligence or willful misconduct. **W. Va. Code § 16-46-5(e).**

» A person who lawfully receives an opioid antagonist may, in good faith, administer it to a person experiencing an overdose. **W. Va. Code § 16-46-3(d), (e).**

» Any person or organization can possess an opioid antagonist with or without a prescription. **W. Va. Code § 16-46-3(f).**

» Any person or organization acting in good faith and according to the law is immune from civil or criminal liability. **W. Va. Code § 16-46-3(e).**

» Any person who uses an opioid antagonist on a person experiencing an overdose must call for additional medical treatment immediately after use. **W. Va. Code § 16-46-5(d).**

**Naloxone Standing Order**

» West Virginia’s standing orders for pharmacists is located [here](#).

» The order permits pharmacists to dispense any opioid antagonist approved by the FDA to people who are at risk of overdose or are a friend, family member, or other person in the position to help in the case of an overdose.

» West Virginia’s standing order for distribution by recipient organizations is located [here](#).

» The distributing organization must educate and counsel the person receiving naloxone every time the person receives naloxone on opioid overdose, naloxone administration and what to do after administrating naloxone.

» The order allows dispensing of opioid antagonists and necessary paraphernalia without requiring specific formulations.

**Good Samaritan Law**

» A person who in good faith and in a timely manner seeks emergency medical assistance for a person experiencing an overdose may not be held criminally responsible for possession of a controlled substance or imitation controlled substance without a prescription or public intoxication, provided:
  o The person SEEKING medical assistance remains with the person experiencing overdose;
  o The person identifies themself if requested; and,
  o The person cooperates with medical personnel or law enforcement. **W. Va. Code § 16-47-4(a).**

» The person calling for medical assistance cannot be punished for a violation of pretrial release, probation, furlough, or parole. **W. Va. Code § 16-47-4(g).**

» Seeking medical assistance may be used as a mitigating factor in other prosecutions if the prosecution was “instituted based on conduct or evidence obtained as a result of the defendant seeking emergency medical assistance.” **W. Va. Code § 16-47-4(d).**
The person who overdosed does not get this immunity unless they complete a substance abuse treatment or recovery program approved by the court. The court can consider alternative sentencing and clemency options. W. Va. Code § 16-47-5(a).

Wisconsin

Legality of Injection and Smoking Equipment

» All equipment, products and materials used, designed for use or intended for use in injecting or inhaling controlled substances in violation of the Uniform Controlled Substance Act is considered drug paraphernalia. Wis. Stat. Ann. § 961.571(1)(a).

» Use and possession with intent to use drug paraphernalia in violation of the Uniform Controlled Substance Act is a misdemeanor punishable by a maximum of 90 days imprisonment and/or a maximum fine of $1,000. Wis. Stat. Ann. § 961.573(1); Wis. Stat. Ann. § 939.60.

» Delivery to an adult, possession with intent to deliver to an adult and possession with intent to manufacture drug paraphernalia knowing that it will primarily be used to inject or inhale controlled substances in violation of the Uniform Controlled Substance Act is a misdemeanor punishable by a maximum of 90 days imprisonment and/or a maximum fine of $1,000. Wis. Stat. Ann. § 961.574(1); Wis. Stat. Ann. § 939.60.


» There is no state law explicitly permitting syringe services programs; however, as syringes are not drug paraphernalia, there are no laws that forbid it and there are SSPs operating in Wisconsin.

Legality of Drug Checking Equipment

» All equipment, products and materials used, designed for use or intended for use in testing or analyzing controlled substances in violation of the Uniform Controlled Substance Act is considered drug paraphernalia subject to the same penalties as above. Wis. Stat. Ann. § 961.571(1)(a).

» However, products that test for fentanyl and fentanyl analogs are specifically excluded from the definition of drug paraphernalia. Wis. Stat. Ann. § 961.571(1)(b)(3).

Naloxone Access Law

» Wisconsin's naloxone access law uses the term “opioid antagonist” which is defined as “a drug, such as naloxone, that satisfies all of the following: (a) The drug binds to the opioid receptors and competes with or displaces opioid agonists at the opioid receptor site but does not activate the receptors, effectively blocking the receptor and preventing or reversing the effect of an opioid agonist. (b) The drug is not a controlled substance." Wis. Stat. Ann. § 450.01(13v).

» A physician, physician’s assistant or advance practice nurse certified to issue prescription orders may prescribe and deliver an opioid antagonist, directly or by standing order, to a person able to help someone experiencing an overdose, so long as they make sure the person is able to safely administer it and able to teach others how to safely administer it. Wis. Stat. Ann. § 448.037(1)-(2); Wis. Stat. Ann. § 448.9727(1)-(2); Wis. Stat. Ann. § 441.18(2).
A physician, physician's assistant or advance practice nurse certified to issue prescription orders who prescribes or delivers an opioid antagonist in good faith is not subject to criminal or civil liability or professional discipline for any outcomes relating to the prescription or distribution of an opioid antagonist. Wis. Stat. Ann. § 448.037(3); Wis. Stat. Ann. § 448.9727(3); Wis. Stat. Ann. § 441.18(3).

A pharmacist may dispense an opioid antagonist according to prescription or standing order and must provide a consultation to the person receiving an opioid antagonist. Wis. Stat. Ann. § 450.11(1i)(a)(1).

A pharmacist who dispenses an opioid antagonist in good faith is immune from criminal or civil liability or professional discipline for any result of the distribution of an opioid antagonist. Wis. Stat. Ann. § 450.11(1i)(a)(2).

Any person may possess an opioid antagonist, and any layperson may deliver or dispense an opioid antagonist. Wis. Stat. Ann. § 450.11(1i)(b)(1).

Any person who delivers or dispenses an opioid antagonist in good faith, or administers an opioid antagonist to a person they reasonably believe to be experiencing a drug overdose, is immune from criminal or civil liability. Wis. Stat. Ann. § 450.11(1i)(c).

**Naloxone Standing Order**

Wisconsin’s standing order is located here.

Pharmacies must enroll to receive a signed standing order.

The order permits pharmacists to dispense the following formulations to people who are at risk of overdose or to another person in the position to help in the case of an overdose: 4mg nasal spray (like Narcan), two 2 mL prefilled syringes with atomizer, or 2 1mL vials of intramuscular naloxone.

The pharmacist must complete at least one hour of training before giving out naloxone and must give educational materials to the person receiving naloxone.

**Good Samaritan Law**

A person may not be prosecuted for drug or drug paraphernalia possession or possession of a masking agent during an overdose emergency if they do any of the following:

“Brings another person to an emergency room, hospital, fire station, or other health care facility and makes contact with an individual who staffs the emergency room, hospital, fire station, or other health care facility if the other person is, or if a reasonable person would believe him or her to be, suffering from an overdose of, or other adverse reaction to, any controlled substance or controlled substance analog.” Wis. Stat. Ann. § 961.443(1)(a).

“Summons and makes contact with a law enforcement officer, ambulance, emergency medical services practitioner, … or other health care provider, in order to assist another person if the other person is, or if a reasonable person would believe him or her to be, suffering from an overdose of, or other adverse reaction to, any controlled substance or controlled substance analog.” Wis. Stat. Ann. § 961.443(1)(b).

Calls 911 or another number for emergency services providers and makes contact with the answerer to get help for the person believed to be overdosing. Wis. Stat. Ann. § 961.443(1)(c).

The person who overdosed does not appear to have the same protections (they did under a previous version of the law, but that law expired July 31, 2020). Wis. Stat. Ann. § 961.443.
Wyoming

Legality of Injection and Smoking Equipment

» Drug paraphernalia is any equipment, product, and materials when used, intended for use, or designed for use to inject or inhale controlled substances into the body in violation of Wyoming Controlled Substances Act of 1971. Wyo. Stat. Ann. § 35-7-1002(a)(xxvii).

» There are no state laws prohibiting the use or possession of drug paraphernalia.

» Delivery or possession with intent to deliver drug paraphernalia to an adult is a crime punishable by 6 months maximum in prison, $750 maximum fine, or both. Wyo. Stat. Ann. § 35-7-1056.

» There is no law authorizing or forbidding SSPs.

Legality of Drug Checking Equipment

» Wyoming does not criminalize the use or possession with intent to use drug paraphernalia. See generally, Wyo. Stat. Ann. § 35-7-1056. Further, unlike in most states, the definition of “drug paraphernalia” under Wyoming law does not include “testing,” “analyzing,” or similar terms. Wyo. Stat. Ann. § 35-7-1002.


» While Wyoming’s definition of drug paraphernalia does not explicitly include drug checking equipment, it does include “all equipment, products and materials of any kind when used, advertised for use, intended for use or designed for use for manufacturing, converting, preparing, packaging, repackaging, storing, containing, concealing, injecting, ingesting, inhaling or otherwise introducing into the human body a controlled substance in violation of this act.” Wyo. Stat. Ann. § 35-7-1002(a)(xxvii). There is no case law on the application of this definition to drug checking equipment.

Naloxone Access Law

» Wyoming uses the term “opiate antagonist” in its naloxone access law which is defined as “any device or medication approved by the United States food and drug administration for the treatment of an opiate related drug overdose.” Wyo. Stat. Ann. § 35-4-902(a)(i).

» Practitioners and pharmacists, acting in good faith and with reasonable care, may prescribe an opiate antagonist to a person at risk of experiencing an overdose or a person in a position to help someone experiencing an overdose, including a person who may encounter an overdose in their official duties or business. Wyo. Stat. Ann. § 35-4-903(a).

» The practitioner or pharmacist must provide basic education to the person receiving an opiate antagonist on recognizing and responding to an overdose as well as ensuring the person administered an opiate antagonist receives medical care and evaluation as soon as possible. Wyo. Stat. Ann. § 35-4-903(b).

» A practitioner may prescribe by standing order to an entity that, in the course of their official duties or business, may be in a position to help someone experiencing an overdose. Wyo. Stat. Ann. § 35-4-904(a).

» A person acting in good faith may administer an opiate antagonist to a person who appears to be experiencing an overdose, and is immune from civil or criminal liability. Wyo. Stat. Ann. § 35-4-906(a)-(b).
A practitioner or pharmacist who prescribes an opiate antagonist is immune from civil or criminal liability, and the prescribing is not unprofessional conduct. Wyo. Stat. Ann. § 35-4-904(a), (e).

An entity that establishes a drug overdose treatment policy is immune from civil or criminal liability. Wyo. Stat. Ann. § 35-4-906 (d).

**Naloxone Standing Order**

Wyoming does not appear to have a statewide standing order.

**Good Samaritan Law**

Wyoming does not have an overdose Good Samaritan law.

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This document was created by Corey Davis, Ashleigh Dennis, and Amy Lieberman at the Network for Public Health Law’s Harm Reduction Legal Project (harmreduction@networkforphl.org). The information provided in this document does not constitute legal advice or legal representation. You should always consult with an attorney barred in your state for specific legal advice. This document provides a snapshot of the state of the law as of August 1, 2023.

This document was updated with support from RTI. It was originally developed with the support of NEXT Distro, an online and mail-based harm reduction platform designed to reduce opioid overdose death, prevent injection-related disease transmission, and improve the lives of people who use drugs. The information contained in this document is available in an easy to access format on the NEXT website at https://nextdistro.org/policies.