

SACRAMENTO OPIOID & METHAMPHETAMINE COALITION

EMS-Initiated Buprenorphine

Sacramento County rollout · November 1, 2026

Sacramento County EMS Policies 8069 & 5057

Bryan DuPertuis, Battalion Chief · Sacramento Metropolitan Fire District

Informational briefing

WHY IT MATTERS

Why EMS starts buprenorphine

The right moment

Paramedics often meet people in withdrawal or just after an overdose, when interest in treatment can be highest.

Treatment comes to the patient

A first dose in the field relieves withdrawal before the person has to find a clinic on their own.

A bridge, not an endpoint

Every encounter ends with naloxone, a list of local MAT clinics, and a path to follow-up care.

TIMELINE

How we got to November 1

Mar 2024

First versions of Policies 8069 and 5057 approved by MAC/OAC (effective May 1, 2024)

Sept 2025

Public Health Advisory Board backs a grant to expand EMS buprenorphine and launch an EMS MAT hotline

Mar 2026

Revised Policy 8069.02 approved on March 12, 2026

Jun 2026

Start moved from July 1 to November 1 to match the normal policy cycle

Nov 1, 2026

Countywide rollout under Policy 8069.02

Sources: SCEMSA policy documents 8069.01, 8069.02, 5057.01; PHAB letter, Sept 15, 2025; SCEMSA memo, June 3, 2026

THE POLICIES

Two policies, two pathways

POLICY 8069 • BUPRENORPHINE

Paramedic gives the dose on scene

Dose: 16 mg sublingual, plus 8 mg if needed; 24 mg maximum per encounter

Version: 8069.02, effective November 1, 2026

POLICY 5057 • MIH BUPRENORPHINE

Crew calls in Mobile Integrated Health Health

Dose: MIH titrates 8 mg every 20 minutes as needed, 24 mg maximum, in person or by telemedicine

Plus: MIH can prescribe one week of Suboxone

Both share the same withdrawal criteria and exclusions • Sources: SCEMSA Policies 8069.02 and 5057.01

WHO QUALIFIES

Confirming opioid withdrawal

COWS $\geq$ 8

plus at least 2 objective signs of withdrawal

Raised from COWS $\geq$ 7 in the 2024 version (8069.01)

Objective signs

- Fast heart rate
- Sweating
- Restlessness or agitation
- Dilated pupils
- Runny nose or tearing
- Vomiting, diarrhea
- Yawning
- Goosebumps

Subjective symptoms

- Nausea
- Stomach cramps
- Body aches
- Achy bones or joints
- Restlessness
- Hot and cold
- Nasal congestion

WHO DOES NOT RECEIVE IT IN THE FIELD

Exclusion criteria

Under 16 years of age

Altered mental status, unable to consent

Suspected intoxication or recent benzodiazepine or alcohol use

Unable to understand the risks and benefits

Any methadone use in the last 10 days

Severe medical illness (sepsis, respiratory distress)

No clinical opioid use disorder symptoms

Not a candidate for any other reason

Excluded patients still receive naloxone, the MAT brochure and an offer of transport · Source: SCEMSA Policy 8069.02

POLICY 8069 IN PRACTICE

Treatment on scene



Paramedics may contact the base hospital physician for complex cases or extra support.

AFTER THE ENCOUNTER

Every patient leaves with a next step

Treated, symptoms improve

- Transport recommended to an ED or designated overdose receiving center
- Contact info verified (two phone numbers preferred)
- Naloxone and MAT brochure

Treated, declines transport transport

- Naloxone
- Leave-behind kit, including the overdose response and MAT clinic handout

Declines or not eligible

- Transport offered or recommended
- Naloxone
- MAT brochure

The Mobile Integrated Health pathway

How it works

1. Field crew confirms withdrawal and exclusions, then contacts MIH
2. MIH treats in person or by telemedicine and re-verifies COWS and exclusions
3. Titrates 8 mg every 20 minutes as needed, 24 mg maximum (may also follow the EMS dose)
4. Prescribes one week of Suboxone

Where the patient goes next

Symptoms resolve: discharge on scene with a naloxone leave-behind kit, or a referral for follow-up the next week at SANE

Accepts transport: referral to the Substance Use Navigator (SUN) at the receiving hospital

THE LEAVE-BEHIND

What the patient leaves with

EMERGENCY RESPONSE
FOR OPIOID OVERDOSE WITH NASAL NALOXONE

1 TRY TO WAKE THE PERSON UP

- Shake them and shout.
- If no response, grind your knuckles into their breast bone for 5 to 10 seconds.
- Tell them you will give them naloxone if they don't respond.

2 CALL 911

If you report an overdose, California State Good Samaritan Law protects you and the overdosed person from being charged with drug possession.

3 ADMINISTER NASAL NALOXONE

- Remove naloxone nasal spray from the package. Hold with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle.
- Press the plunger firmly to release the dose.
- If still not conscious after 2-3 minutes, repeat at the other nostril with a new device.

4 CHECK FOR BREATHING

If they are not breathing, CPR or rescue breathing is optional but encouraged.

Give CPR if you have been trained or do rescue breathing:

- Tilt the head back, open the mouth, and pinch the nose.
- Start with 2 breaths into the mouth. Then 1 breath every 5 seconds.
- Continue until help arrives.

5 STAY WITH THE PERSON

- Naloxone wears off in 30 to 90 minutes.
- When the person wakes up, explain what happened.
- If you have to leave, move the person on their side to prevent choking.

July 2023 More resources available www.bridgeofmat.org 2

SACRAMENTO COUNTY
PUBLIC HEALTH
Promote • Prevent • Protect
EMERGENCY MEDICAL SERVICES AGENCY

Substance Use Prevention and Treatment Services

Medication-Assisted Treatment (MAT)
The use of medications, in combination with counseling and behavioral therapies, to provide a whole-patient approach to the treatment of substance use disorders.

MAT for Opioid Use Disorder

Agency	Medications	Agency	Medications
Aegis Treatment Centers 541 S Ham Lane, Suite A Lodi, CA 95242 209-224-8940	• Methadone • Buprenorphine • Naltrexone	C.O.R.E. Medical Clinic 3990 Industrial Boulevard West Sacramento, CA 95691 916-796-0020	• Methadone • Buprenorphine • Naltrexone
Aegis Treatment Centers 1133 Coloma Way, Suite C Roseville, CA 95661 916-774-6647	• Methadone • Buprenorphine • Naltrexone	MedMark Treatment Centers 7240 East Southgate Drive Suites B, G, E Sacramento, CA 95823 916-391-4293	• Methadone • Buprenorphine • Naltrexone
Bi-Valley Medical Clinic 310 Harris Ave, Suite A Sacramento, CA 95838 916-649-6793	• Methadone • Buprenorphine • Naltrexone	Sunrise Health and Wellness 10089 Folsom Blvd, Suite A and C Rancho Cordova, CA 95823 916-366-6531	• Methadone • Buprenorphine • Naltrexone
Bi-Valley Medical Clinic 6177 Fair Oaks Boulevard Carmichael, CA 95816 916-974-8090	• Methadone • Buprenorphine • Naltrexone	Transitions Buprenorphine Clinic of Sacramento 3647 40th Street Sacramento Ca, 95817 916-452-1068	• Buprenorphine • Naltrexone
C.O.R.E. Medical Clinic 2100 Capital Ave Sacramento, CA 95816 916-442-4985	• Methadone • Buprenorphine • Naltrexone	Treatment Associates 7225 East Southgate Drive, Suite D Sacramento, CA 95823 916-394-1000	• Methadone • Buprenorphine • Naltrexone

MAT for Methamphetamine Use Disorder

Agency	Medications
Transitions Buprenorphine Clinic of Sacramento 3647 40th Street Sacramento Ca, 95817 916-452-1068	- Bupropion (Wellbutrin) - Mirtazapine (Remeron) - Topiramate (Topamax) - Atomoxetine (Strattera) - Modafinil (Provigil)
WellSpace Health 1820 J Street, Sacramento, CA 95811 916-822-8950	- Naltrexone - Wellbutrin

***Provided through the Federally Qualified Health Centers (not their QAC/COO program). Patients receiving MAT must be assigned to WellSpace Health as their provider with Medi-Cal. ***

Page 1 • Overdose response

Five steps for nasal naloxone: wake, call 911, give naloxone, check breathing, stay. Notes the Good Samaritan law and that naloxone wears off in 30 to 90 minutes.

Page 2 • MAT clinics

Sacramento County's list of 10 clinic locations for opioid use disorder and 2 for methamphetamine use disorder, with addresses and phone numbers.

Handout: CA Bridge (July 2023) and Sacramento County Public Health EMS Agency MAT list

MAT clinics on the patient handout

Opioid use disorder	Location	Phone	Meds
Aegis Treatment Centers	Lodi	209-224-8940	M · B · N
Aegis Treatment Centers	Roseville	916-774-6647	M · B · N
Bi-Valley Medical Clinic	Sacramento (Harris Ave)	916-649-6793	M · B · N
Bi-Valley Medical Clinic	Carmichael	916-974-8090	M · B · N
C.O.R.E. Medical Clinic	Sacramento (Capital Ave)	916-442-4985	M · B · N
C.O.R.E. Medical Clinic	West Sacramento	916-796-0020	M · B · N
MedMark Treatment Centers	Sacramento (Southgate)	916-391-4293	M · B · N
Sunrise Health and Wellness	Rancho Cordova	916-366-6531	M · B · N
Transitions Buprenorphine Clinic	Sacramento (40th St)	916-452-1068	B · N
Treatment Associates	Sacramento (Southgate)	916-394-1000	M · B · N

M methadone · **B** buprenorphine · **N** naltrexone. **Methamphetamine use disorder:** Transitions Buprenorphine Clinic, and WellSpace Health (1820 J St, 916-822-8950; Medi-Cal patients assigned to WellSpace).

AFTER NOVEMBER 1

What coalition partners may see

A first dose already given

Patients may reach an ED or clinic having received up to 24 mg of buprenorphine in the field.

The handout as a referral

Patients leave with the County MAT clinic list; listed clinics may hear from new callers.

Hospital follow-up

Crews collect contact details and send a referral so treated patients can be reached afterward.

More naloxone in the community

Every encounter includes naloxone, whether or not the patient accepts buprenorphine.

EMS-INITIATED BUPRENORPHINE · NOVEMBER 1, 2026

Questions

POLICIES

Sacramento County EMS Policies 8069 and 5057 at
dhs.saccounty.gov/pub/ems

CONTACT

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