

PACE/CRDP/SPBP

PROVIDER BULLETIN

November 20, 2018

“Stop Overdoses in PA: Get Help Now”

Outreach Campaign

December 10-16, 2018

December 10-16, 2018, in support of the Governor’s efforts to mitigate the opioid epidemic and related overdoses, Pennsylvania is sponsoring a “Stop Overdoses in PA: Get Help Now” outreach campaign.

- **December 13, 2018**, as part of this campaign, the Department of Health will dispense **free** naloxone to the public through the state and local health departments.
- At pharmacies, it is anticipated that requests for naloxone may increase during this campaign. Be prepared, keep naloxone in stock. Educate staff members on the naloxone standing order (DOH-001-2018).

Accompanying this bulletin are the Naloxone Standing Order (DOH-001-2018), the letter to pharmacists on the “Stop Overdoses in PA: Get Help Now” outreach campaign, and the Pennsylvania Public Health Infrastructure map.



OPIOID COMMAND CENTER

During the week of December 10-16, 2018, Pennsylvania is sponsoring a Stop Overdoses in PA: Get Help Now outreach campaign. The commonwealth is promoting that we must all be prepared to save lives during this medical crisis. Throughout the campaign the message will be that overdoses occur at a higher rate during the holiday season, but help is available. Naloxone, the lifesaving, non-addictive, medicine will also be dispensed across the commonwealth.

On December 13, 2018, the Department of Health will be dispensing free naloxone to the public through the state and local health centers. This will be the largest naloxone give away nationwide. Anyone who feels they can benefit from having a dose of naloxone on hand can participate. Because we know that some individuals who would like access to naloxone will not be able to participate on this day, we will encourage them to acquire naloxone through their local pharmacies. As you know, Pennsylvania's Secretary of Health, Dr. Rachel Levine, issued a standing order permitting every Pennsylvanian access to naloxone through a pharmacy. During our awareness campaign, we will emphasize that individuals can access naloxone through their local pharmacy at any time under the standing order.

Pharmacists play an integral role in helping to battle the opioid epidemic. Because of this, we wanted you to be aware that you may experience an increase in the number of individuals requesting naloxone during and in the weeks following this event. We ask that you keep naloxone in stock during this time, so these requests can be filled promptly. Also, please educate your staff regarding the standing order in order to properly assist clients looking to receive naloxone.

We appreciate your support during this week-long campaign, and with battling the opioid epidemic in Pa.

Thank you,

Pa. Opioid Command Center

STANDING ORDER DOH-001-2018

Naloxone Prescription for Overdose Prevention

Naloxone Hydrochloride (Naloxone) is a medication indicated for reversal of opioid overdose in the event of a drug overdose that is the result of consumption or use of one or more opioid-related drugs causing a drug overdose event.

I. PURPOSE

This standing order applies to Commonwealth of Pennsylvania firefighters and law enforcement officers (collectively Eligible Persons) who are providing care with an employer who meets the requirements under section II below. This standing order does not apply to Department of Health (Department) certified emergency medical services (EMS) providers or Department-licensed EMS agencies, except as specifically provided herein.

II. DEPARTMENT-CERTIFIED EMS PROVIDERS AND DEPARTMENT-LICENSED EMS AGENCIES

This standing order authorizes Department-certified EMS providers or Department-licensed EMS agencies who have responded to an individual experiencing an opioid-related overdose (At-Risk Person), and who are therefore in a position to assist that At-Risk Person, to leave behind naloxone with the At-Risk Person or with family members, friends, or other persons who are in a position to assist the At-Risk Person, along with instructions to follow the naloxone package insert directions and the guidance provided in Standing Order DOH-002-2017, available on the Department's website.

III. AUTHORITY

This standing order is issued pursuant to Act 139 of 2014 (Act 139) (amending The Controlled Substance, Drug, Device and Cosmetic Act (35 P.S. §§ 780-101 *et seq.*)), which permits health care professionals otherwise authorized to prescribe Naloxone to prescribe it via standing order to Eligible Persons, and to persons who are in a position to assist an individual at risk of experiencing an opioid-related overdose.

IV. WRITTEN AGREEMENT REQUIRED

Prior to obtaining and using naloxone under this standing order, employers of Eligible Persons shall enter into a written agreement with a Department-licensed EMS agency to obtain the supply of naloxone. Eligible Persons also shall complete a Department approved training program.

V. TRAINING AND INSTRUCTIONAL MATERIALS

Prior to obtaining Naloxone under this standing order, Eligible Persons are strongly advised to complete a training program approved by the Pennsylvania Department of Health (DOH) in consultation with the Pennsylvania Department of Drug and Alcohol Programs (DDAP), such as the one found on line at www.getnaloxonenow.org or at the DOH website at <http://bit.ly/OpioidsinPA> and obtain a certificate of completion. Act 139 does not require training; however, training is necessary in order to ensure that Eligible Persons are protected from legal liability to the extent that Act 139 provides that the receipt of DOH/DDAP-approved training and instructional materials and prompt seeking of additional medical assistance creates a rebuttable presumption that an Eligible Person acted with reasonable care in administering Naloxone.

VI. SIGNS AND SYMPTOMS OF OPIOID OVERDOSE

1. A history of current narcotic or opioid use or fentanyl patches on skin or needle in the body.
2. Unresponsive or unconscious individuals.
3. Not breathing or slow/shallow respirations
4. Snoring or gurgling sounds (due to partial upper airway obstruction).
5. Blue lips and/or nail beds.
6. Pinpoint pupils.
7. Clammy skin.
8. Note that individuals in cardiac arrest from all causes share many symptoms with someone with a narcotic overdose (unresponsiveness, not breathing, snoring/gurgling sounds, and blue skin/nail beds). If no pulse, these individuals are in cardiac arrest and require CPR.

VII. APPROPRIATE USE AND DIRECTIONS

This standing order may be used by Eligible Persons in the event that there is no other protocol, prescription, standing order or guidance for the administration of naloxone. Existing naloxone protocols, prescriptions, standing orders or guidance for the administration of naloxone that was created by an Act 139 authorized person for Eligible Persons supersedes this standing order.

Upon completion of a Department-approved training program and documentation of training to his or her employer, eligible persons may administer either intra-nasal naloxone or auto-injector naloxone (intra-muscular) (whichever is available) to a person suspected of a drug overdose event as follows:

1. **Call 911 for EMS to be dispatched.**

2. In cardiac arrest or pulseless patients: Call 911 for EMS and start CPR if able and trained to do so. In cardiac arrest, CPR is the most important treatment, and any attempt to administer Naloxone should not interrupt chest compressions and rescue breathing.
3. Naloxone should only be given to someone suspected of opioid overdose as noted in the signs and symptoms listed in Section V above.
4. In respiratory arrest or a non-breathing patient: If able to do rescue breathing, rescue breathing takes priority over Naloxone administration. Administer Naloxone if possible while doing rescue breathing.
5. Administration of Naloxone (only give to someone with suspected opioid overdose based on signs and symptoms listed in Section V above).

A. INTRA-NASAL NALOXONE

Eligible Persons should be provided with the following:

1. Luer-lock syringes and mucosal atomization devices (MAD)

- a. Two 2 mL Luer-Jet luer-lock syringes prefilled with naloxone (concentration 1 mg/mL);
- b. Two mucosal atomization devices
- c. Patient information pamphlet containing dosage and administration instructions.

2. NARCAN Nasal Spray

- a. Carton containing two blister packages each with single 4 mg dose of naloxone in a 0.1 mL intranasal spray
- b. Package insert containing dosage and administration instructions.

Instructions for use:

1. Luer-lock syringes and mucosal atomization devices (MAD)

- a. Pop off two yellow caps from the delivery syringe and one red cap from the naloxone vial.
- b. Screw the Naloxone vial gently into the delivery syringe.
- c. Screw the mucosal atomizer device onto the top of the syringe.
- d. Spray half (1ml) of the Naloxone in one nostril and the other half (1ml) in the other nostril.

- e. Note: Administer the Naloxone in a quick burst to ensure that it is atomized. A slow administration will cause liquid to trickle in without being atomized properly, which will slow delivery to the bloodstream.
- f. Continue to monitor breathing and pulse. **IF NOT BREATHING, give rescue breathing. IF NO PULSE, start CPR, if able and trained to do so.**
- g. If patient does not awaken after 4 minutes, administer second dose of Naloxone (if available) (1mL) briskly in one nostril and the other half (1mL) briskly in the other nostril.
- h. Remain with the person, monitor breathing/pulse, and provide rescue breathing or provide CPR if needed, until he or she is under care of a medical professional, such as a physician, nurse, or EMS.

2. NARCAN Nasal Spray

- a. Lay person on their back to receive a dose of NARCAN Nasal Spray.
- b. Remove NARCAN from the box. Peel back the tab with the circle to open the NARCAN Nasal Spray.
- c. Hold the NARCAN Nasal Spray with your thumb on the bottom of the plunger and first and middle fingers on either side of the nozzle.
- d. Tilt the person's head back and provide support under the neck with your hand. Gently insert tip of nozzle into one nostril until fingers on either side of the nozzle are against the bottom of the person's nose.
- e. Press the plunger firmly to give the dose of NARCAN Nasal Spray.
- f. Remove the NARCAN Nasal Spray from the nostril after giving the dose.
- g. Move the person onto their side after giving NARCAN Nasal Spray.
- h. Remain with the person, monitor breathing/pulse. **IF NOT BREATHING, give rescue breathing. IF NO PULSE, start CPR, if able and trained to do so.**
- i. Remain with the person, monitor breathing/pulse, and provide rescue breathing or provide CPR if needed, until he or she is under care of a medical professional, such as a physician, nurse, or EMS.
- j. Watch the person closely. If the person does not respond by waking up, to voice or touch, or breathing normally another dose may be given. NARCAN

Nasal Spray may be dosed every 2 to 3 minutes, if available, until the person responds or emergency medical help is received.

B. INTRA-MUSCULAR NALOXONE, BY WAY OF AUTO-INJECTOR

Eligible Persons should be provided with the following:

1. Two EVZIO (naloxone hydrochloride injection, USP) 0.4 mg or 2.0 mg auto-injectors
2. A single Trainer for EVZIO
3. Patient instructions

Instructions for use:

1. Currently the only available auto injector comes with automated voice instructions (EVZIO®) and has a speaker that provides voice instructions to help guide you through each step of the injection.
 - a. Follow automated voice instructions.
2. If the auto-injection device does not come with automated voice instruction or the automated voice instruction is otherwise disabled, follow below. The auto-injection device should still work even if the automated voice instructions do not.
 - a. Prepare device
 - i. For EVZIO®
 1. Pull off the Red safety guard. Note: The Red safety guard is made to fit tightly. Pull firmly to remove. To reduce the chance of an accidental injection, do not touch the Black base of the auto-injector, which is where the needle comes out.
 - b. Hold injector with a fist if possible and press firmly against outer thigh, until you hear a click or hiss. EVZIO® can be used through clothing. One auto injector delivers 0.4 mg or 2.0 mg naloxone.
 - c. Continue to hold pressure for a full 10 seconds to ensure full delivery of medication. Note: The needle will inject and then retract back up into the EVZIO® auto-injector and is not visible after use. Do not look for the needle as this will put you at risk for needle stick injury.

- d. Continue to monitor breathing and pulse. If not breathing, give rescue breathing. If no pulse, start CPR.
- e. If no response in 3-5 minutes, repeat the above instruction with a new auto-injection device.
- f. Remain with the person, monitor and support breathing until he or she is under the care of a medical professional, such as a physician, nurse, or EMS.

C. REFILLS

Refills may be obtained as needed under this standing order.

VIII. CONTRADICTIONS

Do not administer Naloxone to a person with known hypersensitivity to Naloxone or to any of the other ingredients contained in the packaging insert for Naloxone.

IX. PRECAUTIONS

A. DRUG DEPENDENCE

Those who may be chronically taking opioids are more likely to experience adverse reactions from Naloxone. (See adverse reactions under section X below).

Additionally, after administration, they may awaken disoriented. Being disoriented can sometimes lead to combative behavior, especially if Naloxone is given by someone unfamiliar.

B. RESPIRATORY DEPRESSION DUE TO OTHER DRUGS

Naloxone is not effective against respiratory depression due to non-opioid drugs. Initiate rescue breathing or CPR as indicated and contact 911.

C. PAIN CRISIS

In patients taking an opioid medication for a painful illness such as cancer, administration of Naloxone can cause a pain crisis, which is an intense increase in the experience of pain as the Naloxone neutralizes the pain-relieving effect of the opioid medication. Comfort the patient as much as possible and contact 911 as the patient may need advanced medical treatment to ease the pain crisis.

X. USE IN PREGNANCY (Teratogenic Effects: Pregnancy Category C)

Based on animal studies, no definitive evidence of birth defects in pregnant or nursing women exists to date. There also have not been adequate studies in humans to make a determination.

XI. ADVERSE REACTIONS

A. OPIOID DEPRESSION

Abrupt reversal of opioid depression may result in nausea, vomiting, sweating, abnormal heart beats, fluid development in the lungs and opioid acute withdrawal syndrome (see part B below), increased blood pressure, shaking, shivering, seizures and hot flashes.

B. OPIOID DEPENDENCE

Abrupt REVERSAL of opioid effects in persons who are physically dependent on opioids may cause an acute withdrawal syndrome.

Acute withdrawal syndrome may include, but not be limited to, the following signs and symptoms: body aches, fever, sweating, runny nose, sneezing, yawning, weakness, shivering or trembling, nervousness, or irritability, diarrhea, nausea or vomiting, abdominal cramps, increased blood pressure, and fast heart beats.

Most often the symptoms of opioid depression and acute withdrawal syndrome are uncomfortable, but sometimes can be severe enough to require advanced medical attention.

XII. DEFINITIONS

A. DRUG OVERDOSE EVENT:

This event is an acute medical condition, including, but not limited to, severe physical illness, coma, mania, hysteria or death, which is the result of consumption or use of one or more controlled substances causing an adverse reaction. A patient's condition shall be deemed to be a drug overdose if a prudent layperson, possessing an average knowledge of medicine and health, would reasonably believe that the condition is in fact a drug overdose and requires immediate medical attention

B. LAW ENFORCEMENT OFFICER:

A person who by virtue of the person's office or public employment is vested by law with a duty to maintain public order or to make arrests for offenses, whether that duty extends to all offenses or is limited to specific offenses, or a person on active State duty under 51 Pa.C.S. § 508 (relating to active duty for emergency).

C. RESCUE BREATHING:

A skill performed for a victim who is not breathing at all, or whose breaths are too slow or irregular to be effective. In rescue breathing, breaths are delivered to the victim by pinching the nose shut and breathing into the victim's mouth. Masks and other barrier devices are available to decrease the risk of disease transmission when giving rescue breaths.

D. CARDIOPULMONARY RESUSCITATION (CPR):

A lifesaving technique that is useful when someone's breathing or heartbeat has stopped. CPR is offered by such organizations as the American Heart Association and the American Red Cross. Rescue breathing is combined with chest compressions to send oxygen-containing blood to the brain and vital organs for a person who is not breathing and whose heart is not beating.

XIII. KEY INFORMATION

1. If you believe, someone is experiencing an opioid overdose, call 911!
2. Remain with the person until first responders arrive. Act 139 provides that you will not be arrested or charged with parole violations or drug offenses if you call 911, provide all necessary information and remain with the person in distress.
3. Become familiar with how to use Naloxone before someone needs it, through the pharmacist, your medical provider, or online training.
4. If you have questions about the proper use of Naloxone, ask the pharmacist, contact your health care provider, or go to the DOH website at <http://bit.ly/NaloxoneinPA>

XIV. REVIEW

This standing order will automatically expire 30 days after the current physician whose signature appears below has ceased being Physician General or until a health care professional otherwise authorized to prescribe naloxone to the eligible persons does so as authorized under Act 139-2014, whichever occurs first. This standing order will be reviewed, and may be updated, if there is relevant new science about naloxone administration, or at least in 4 years.

CLZ no MD050119-L 1/10/18
Physician General's Signature and License Number Effective Date

Rachel L. Levine MD
Physician General's Name (Print)

This standing order may be revised or withdrawn at any time.

| Center Name | Address | City | State | Zip | Phone |
|--|---|---------------|-------|------------|----------------|
| Allegheny County Health Department | 542 Fourth Ave | Pittsburgh | PA | 15219 | |
| Allentown City Bureau of Health | Alliance Hall, 245 N. 6th St. | Allentown | PA | 18102 | |
| Bethlehem City Bureau of Health | 10 East Church Street | Bethlehem | PA | 19404 | |
| Bucks County Department of Health | 1282 Almshouse Road, Neshaminy Manor Center | Doylestown | PA | 18901 | |
| Chester County Department of Health | 601 Westtown Road, Suite 290 | West Chester | PA | 19382 | |
| Erie County Department of Health | 606 West 2nd Street | Erie | PA | 16507 | |
| Montgomery County Office of Public Health | P.O. Box 311 | Norristown | PA | 19404 | |
| Philadelphia Department of Public Health | 1401 JFK Boulevard, Room 1380 | Philadelphia | PA | 19102 | |
| Wilkes-Barre City Health Department | 71 N. Franklin Str. Kirby Health Center | Wilkes-Barre | PA | 18701 | |
| York City Bureau of Health | PO Box 509 | York | PA | 17405 | |
| Centre Life Link EMS | 125 Puddintown Rd. | State College | PA | 16801 | |
| Dushore Fire Department | 212 Julia St. | Dushore | PA | 18614 | |
| Cameron County Recreation Center | 300 S. Chestnut St. | Emporium | PA | 15834 | |
| Northcentral District | | | | | |
| Point of contact: Susan Judlin, District Nurse Administrator - sjudlin@pa.gov | | | | | |
| Water Tower Square, Suite 109 1000 Commerce Park Drive Williamsport, PA 17701 | | | | | |
| Bradford/Sullivan | 142 Colonial Drive | Towanda | PA | 18848 | (570) 265-2194 |
| Centre County | 2580 Park Center Blvd. | State College | PA | 16801 | (814) 865-0932 |
| Clinton County | 215 East Church St. | Lock Haven | PA | 17745 | (570) 893-2437 |
| Columbia County | 327 Columbia Blvd. Suite 2 | Bloomsburg | PA | 17815 | (570) 387-4258 |
| Lycoming County | 1000 Commerce Park Drive, Suite 109 | Williamsport | PA | 17701 | (570) 327-3440 |
| Montour County | 329 Church Street | Danville | PA | 17821 | (570) 275-7092 |
| Northumberland County | 247 Pennsylvania Avenue | Sunbury | PA | 17801-2248 | (570) 988-5513 |
| Potter County | 295 US Route 6 West, Suite 1 | Coudersport | PA | 16915 | (814)-274-3626 |
| Snyder County, c/o Selingsgrove Center | 1000 Route 522 | Selingsgrove | PA | 17870 | (570) 837-5915 |
| Tioga County | 44 Plaza Lane | Wellsboro | PA | 16901 | (570) 724-2911 |
| Union County | 1610 Industrial Blvd. Suite 100 | Lewisburg | PA | 17837-9220 | (570) 523-1124 |
| Northeast District | | | | | |
| Point of contact: Kathy Finsterbusch, District Nurse Administrator - kfinsterbu@bg.gov | | | | | |
| Scranton State Office Building 100 Lackawanna Ave. Room 316 Scranton, PA 18503 | | | | | |
| Carbon County | 281 N. 12 th St., Ste. A | Lehighton | PA | 18235 | (570) 574-9607 |
| Lackawanna County | Scranton State Office Building, 100 Lackawanna Avenue, Room 110 | Scranton | PA | 18503-1973 | (570) 963-4567 |
| Lehigh County | 3730 Lehigh Street, Suite 206 | Whitehall | PA | 18052-3403 | (610) 821-6770 |
| Luzerne County | 665 Carey Avenue, Suite 2 | Wilkes-Barre | PA | 18706-5484 | (570) 826-2071 |
| Monroe County | 1972 West Main St., Suite 102 | Stroudsburg | PA | 18360 | (570)424-3020 |
| Northampton County | 1600 Northampton Street | Easton | PA | 18042-3132 | (610) 250-1825 |
| Pike County | 10 Buist Rd., Ste. 401 | Milford | PA | 18337 | (570) 296-6512 |
| Susquehanna County SHC | 157 Spruce St. | Montrose | PA | 18801 | (570) 278-3889 |
| Wayne County | 615 Erie Heights | Honesdale | PA | 18431-1017 | (570) 253-7141 |
| Wyoming County | 5632 SR 6 | Tunkhannock | PA | 18657 | (570) 836-2981 |

Northwest District
Point of contact: Kristine Ghering, District Nurse Administrator - kghering@pa.gov
19 McQuiston Drive
Jackson Center, PA 16133

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|----------------------|---|----------------|----|------------|----------------|
| Clarion County | Applewood Center, 162 S. 2nd Street, Suite D | Clarion | PA | 16214 | (814) 226-2170 |
| Clearfield County | 1125 Linden Street Suite 1 | Clearfield | PA | 16830 | (814) 765-0542 |
| Crawford County | 847 N. Main St. Suite 101, Parkside Commons | Meadville | PA | 16335 | (814) 332-6947 |
| Elk/Cameron Counties | 778 Washington Road | St. Marys | PA | 15857 | (814) 834-5351 |
| Forest County | 305 South Elm Street, Post Office Box 405 | Tionesta | PA | 16353-0405 | (814) 755-3564 |
| Jefferson County | 200 Prushnok Dr. Suite 202A | Punxsutawney | PA | 15767 | (814) 938-6630 |
| Lawrence County | 106 Margaret Street | New Castle | PA | 16101 | (724) 656-3088 |
| McKean County | 84-90 Boylston Street, Gleason Building, P.O. Box 160 | Bradford | PA | 16701-2011 | (814) 368-0426 |
| Mercer County | 25 McQuiston Drive | Jackson Center | PA | 16133 | (724) 662-4000 |
| Venango County | P.O. Box 191 (letter mail), 3298 State Route 257 (packages) | Seneca | PA | 16346 | (814) 677-0672 |
| Warren County | 2027 Pennsylvania Avenue East | Warren | PA | 16365 | (814) 728-3566 |

Southeast District
Point of contact: Susan Judlin, District Nurse Administrator - sjudlin@pa.gov
30 Kline Plaza
Harrisburg, PA 17104

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|-------------------|---------------------------------|----------------|----|------------|----------------------------------|
| Adams County | 424 East Middle Street, Suite I | Gettysburg | PA | 17325-1926 | (717) 334-2112 |
| Blair County | 615 Howard Avenue, Suite 101 | Altoona | PA | 16601 | (814) 946-7300 |
| Bedford County | 130 Vondersmith Avenue, Suite A | Bedford | PA | 15522-1727 | (814) 623-2001 |
| Cumberland County | 431 East North Street | Carlisle | PA | 17013-2693 | (717) 243-5151 |
| Dauphin County | 30 Kline Plaza | Harrisburg | PA | 17104 | (717) 346-1470 or (717) 346-1471 |
| Franklin County | 375 Floral Avenue, Suite I | Chambersburg | PA | 17201-3494 | (717) 263-4143 |
| Fulton County | 182 Buchanan Trail, Suite C | McConnellsburg | PA | 27233-0248 | (814) 627-1251 |
| Huntingdon County | 6311 Margy Drive, Suite I | Huntingdon | PA | 16652-1836 | (814) 627-1251 |
| Juniata County | 809 Market Street | Port Royal | PA | 17082-7213 | (717) 527-4185 |
| Lebanon County | 9 North 9th Street | Lebanon | PA | 17046-4902 | (717) 272-2044 |
| Mifflin County | 21 South Brown St., Suite 2A | Lewistown | PA | 17044 | (717) 242-1452 |
| Perry County | 153 Red Hill Road | Newport | PA | 17074-8603 | (717) 567-2011 |
| York County | 1750 North George Street | York | PA | 17404-1807 | (717) 771-4505 |

Southeast District
Point of contact: Kathy Finsterbusch, District Nurse Administrator - kfinsterbu@pa.gov
Reading State Office Building
625 Cherry St, Room 442
Reading, PA 19602

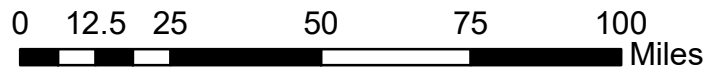
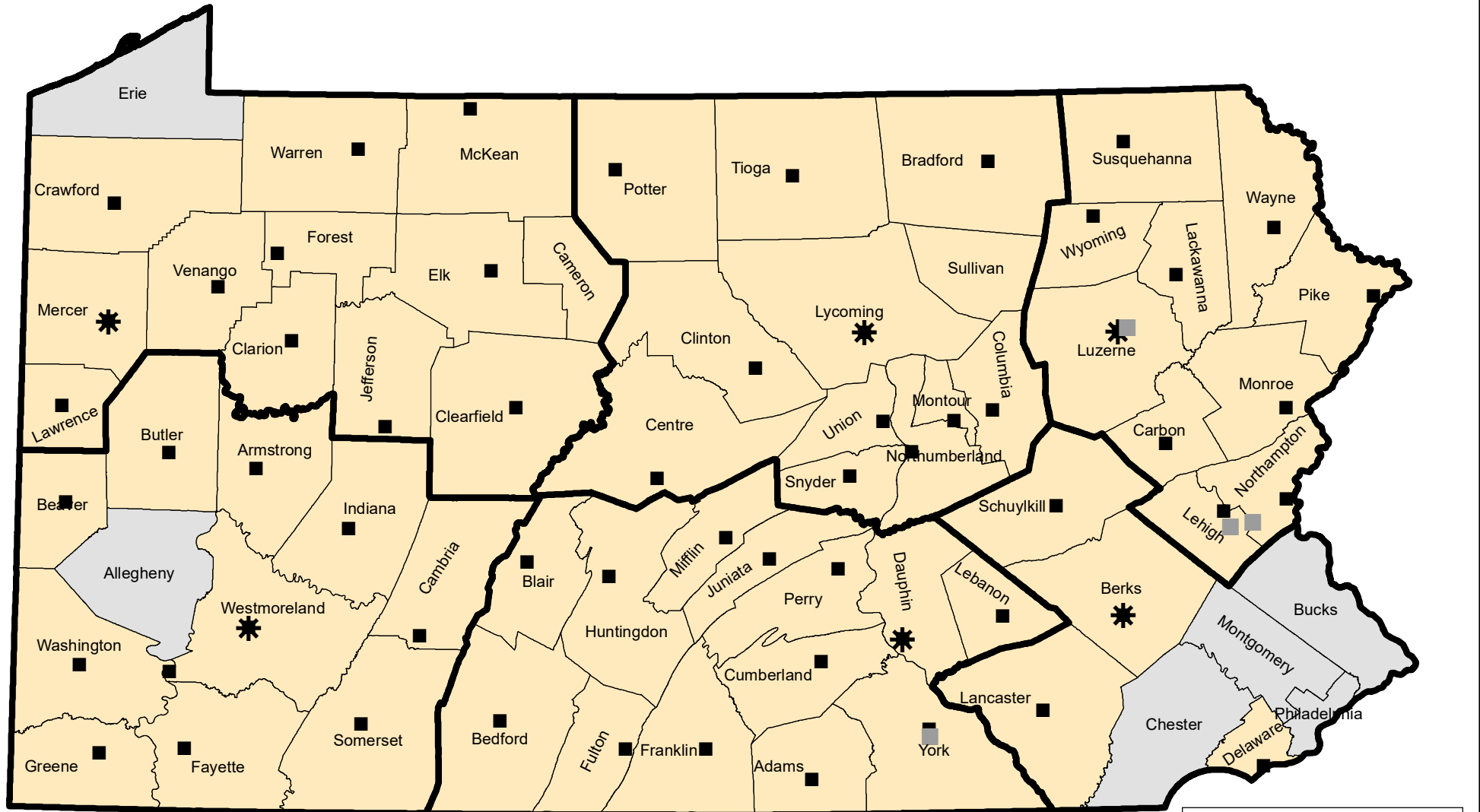
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|-------------------|--|------------|----|------------|----------------|
| Berks County | Reading State Office Building, 625 Cherry Street, Room 401 | Reading | PA | 19602 | (610) 378-4377 |
| Delaware County | 151 West Fifth Street, Suite I | Chester | PA | 19013-4415 | (610) 447-3250 |
| Lancaster County | 1661 Old Philadelphia Pike | Lancaster | PA | 17602-2676 | (717) 299-7597 |
| Schuylkill County | One Norwegian Plaza, Suite 103 | Pottsville | PA | 17901 | (570) 621-3112 |

Southwest District
Point of contact: Kristine Ghering, District Nurse Administrator - kghering@pa.gov
233 West Otterman St.
Greensburg, PA 15601

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|------------------|---|-------------|----|------------|----------------|
| Armstrong County | 245 Butler Rd. Ste. 1 | Kittanning | PA | 16201-1366 | (724) 543-2700 |
| Beaver County | Stone Point Landing, 500 Water St., Suite 104 | Bridgewater | PA | 15009 | (724) 774-1385 |
| Butler County | Monarch Building, 100 Brugh Avenue, Suite 201 | Butler | PA | 16001 | (724) 287-1769 |

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|---------------------|----------------------------------|------------|----|------------|----------------|
| Cambria County | 184 Donald Lane, Suite 1 | Johnstown | PA | 15904 | (814) 248-3120 |
| Fayette County | 100 New Salem Road, Suite 102 | Uniontown | PA | 15401-8936 | (724) 439-7400 |
| Greene County | 108 Greene Plaza | Waynesburg | PA | 15370-9729 | (724) 627-3168 |
| Indiana County | 75 North 2nd Street | Indiana | PA | 15701-2047 | (724) 357-2995 |
| Washington County | 167 North Main Street, Suite 100 | Washington | PA | 15301-4354 | (724) 223-4540 |
| Monesson | 1 Wendell Ramey Lane, Ste. 140 | Monesson | PA | 15062-1399 | (724) 684-2945 |
| Somerset County | 651 South Center Ave. | Somerset | PA | 15501 | (814) 445-7981 |
| Westmoreland County | 233 West Otterman St | Greensburg | PA | 15601-2201 | (724) 832-5315 |

Pennsylvania Public Health Infrastructure



Legend

- Municipal Health Dept
- * DOH District Offices
- State Health Centers

Counties

- State Jurisdiction
- County Health Department