

NARCAN[®] (naloxone HCl) **NASAL SPRAY**

QUICK START GUIDE **Opioid Overdose Response Instructions**

Use NARCAN Nasal Spray (naloxone hydrochloride) for known or suspected opioid overdose in adults and children.

Important: For use in the nose only.

Do not remove or test the NARCAN Nasal Spray until ready to use.

1 Identify Opioid Overdose and Check for Response

Ask person if he or she is okay and shout name.

Shake shoulders and firmly rub the middle of their chest.

Check for signs of opioid overdose:

- Will not wake up or respond to your voice or touch
 - Breathing is very slow, irregular, or has stopped
 - Center part of their eye is very small, sometimes called “pinpoint pupils”
- Lay the person on their back to receive a dose of NARCAN Nasal Spray.



2 Give NARCAN Nasal Spray

Remove NARCAN Nasal Spray from the box.

Peel back the tab with the circle to open the NARCAN Nasal Spray.

Hold the NARCAN nasal spray with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle.

Gently insert the tip of the nozzle into either nostril.

- Tilt the person’s head back and provide support under the neck with your hand. Gently insert the tip of the nozzle into **one nostril**, until your fingers on either side of the nozzle are against the bottom of the person’s nose.

Press the plunger firmly to give the dose of NARCAN Nasal Spray.

- Remove the NARCAN Nasal Spray from the nostril after giving the dose.

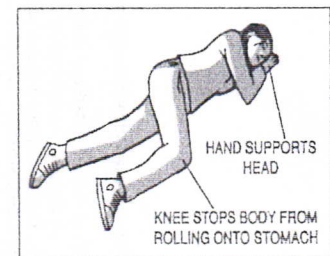
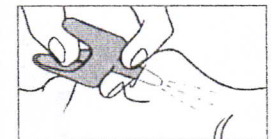
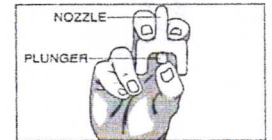
Get emergency medical help right away.

Move the person on their side (recovery position) after giving NARCAN Nasal Spray.

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.

Repeat Step 2 using a new NARCAN Nasal Spray to give another dose in the other nostril. If additional NARCAN Nasal Sprays are available, repeat step 2 every 2 to 3 minutes until the person responds or emergency medical help is received.



3 Call for emergency medical help, Evaluate, and Support

For more information about NARCAN Nasal Spray, go to www.narcannasalspray.com, or call 1-844-4NARCAN (1-844-462-7226).



Emergency Naloxone Administration Protocol

This protocol addresses the training of the Unlicensed Assistant to administer naloxone injections to students experiencing signs of an opioid overdose. The training session must allow enough time for the trainee (trained unlicensed assistant) to read through the protocol, observe the procedure for administering naloxone, provide a return demonstration, ask questions, and complete the evaluation tool. The trainee's experience with giving injections and/or their current comfort level should be assessed to determine how to best demonstrate the procedure and provide a viable practice opportunity.

TWO KEY OUTCOMES:

- The trainee will be trained to recognize signs and symptoms of opioid overdose.
- The trainee will successfully administer naloxone using a naloxone demonstration kit.

Overview of Opioid Overdose

In 2017 the U.S. Department of Health and Human Services declared the opioid epidemic a public health emergency. At the end of the 1990s pharmaceutical companies assured healthcare community that opioid pain relievers would not lead to addiction and medical providers started prescribing opioid pain relievers at higher rates. The increase of opioid prescriptions resulted in an epidemic of prescription and illicit opioid uses. In the United States in 2016-2017 11.4 million people misused prescription opioids. It is estimated that 2.1 million people have an opioid use disorder and 130+ people died every day from opioid overdoses. In 2016 there were 42,000 deaths due to opioids with 40% involving a prescription opioid. In 2012 Alabama dispensed 143 opioid prescriptions per 100 people, the highest in the nation. In 2016 Alabama still had the highest dispensing rate with 121 opioid prescriptions dispensed per 100 people.

What is an Opioid and Opioid Abuse:

An opioid is any drug that acts on the opioid receptor in the brain. Previous nomenclature differentiated opioids as opiates (found in the opium poppy – codeine and morphine), semi-synthetic opioids (structurally related to codeine or morphine – heroin, hydrocodone, and oxycodone) and synthetic opioids (no structural similarities to codeine or morphine – fentanyl and methadone). An opioid can be a prescription or an illicit drug. Prescription opioids are therapeutically used to relieve moderate to severe pain. When prescription or non-prescription opioids are abused, opioids trigger the release of endorphins, which decrease your perception of pain, increase your feeling of pleasure (euphoria) and sense of well-being, making the abuser feel relaxed.

Administration of Naloxone

Naloxone is the generic name for Narcan®. It is a rapid opioid reversal agent also known as an opioid antagonist. Naloxone blocks the effects on the respiratory control center and restores respirations. It also blocks the depressant effects on the central nervous system and can restore alertness.

The Evzio (naloxone HCL injection): The Evzio auto injector contains 2mg of naloxone in 0.4 mL for intramuscular or subcutaneous use in adults and children.



Opioids
Buprenorphine - Suboxone®
Codeine - Tylenol #3 ®
Fentanyl - Actiq®, Duragesic®, Sublimaze®
Heroin – 1898-1910
Hydrocodone - Lorcet®, Lortab®, Norco®, Vicodin®
Hydromorphone - Dilaudid®
Levorphanol - Levo-Dromoran®
Meperidine - Demerol®
Methadone - Dolophine®
Morphine - Roxanol®, Duramorph®
Opium - Paragoric®
Oxycodone – Percocet®, Percodan, ® Tylox, ® Oxycontin®
Tramadol – Ultram®, Ultracet®
Tramadol – Ultram®, Ultracet®



Opioid Overdose:

An opioid overdose can occur both unintentionally and intentionally after ingestion, injection, or inhalation of an opioid. An opioid overdose occurs when above therapeutic doses are taken or when an illicit drug potency is higher, or a drug is contaminated a stronger opioid. Signs of an opioid overdose include depressed mental status, depressed or absent breathing, and pinpoint pupils.

Opioid High	Opioid Overdose
Person responds to commands Slow/slurred speech Breathing appears normal Pinpoint pupils (with some exceptions)	Depressed mental status Unconscious – does not respond to voice, sternal rub, limp body Depressed or absent breathing Suppressed breathing <8 breaths/minute, shallow Cyanosis – blue or gray lips or fingernails Pale, clammy skin Slow or irregular pulse Snoring, gurgling, or choking sounds (a.k.a. death rattle) Pinpoint pupils