

PATIENT HANDOUT: HOW TO USE NALOXONE

What are opioids?

Opioids are generally used to **treat pain** and include both prescription painkillers and heroin.

What is an opioid emergency or overdose?

Opioids can cause a person's **breathing to slow or even stop**—this is considered an overdose. **All opioids put people at risk.**

What is naloxone?

Naloxone temporarily **blocks the effects** of opioids, and can reverse overdose. Naloxone only works if **opioids** are in the body and has no effects on alcohol or other drugs. It takes **2-5 minutes** to start working, and may require more than one dose. The effects of naloxone last for between **30-90 minutes**.

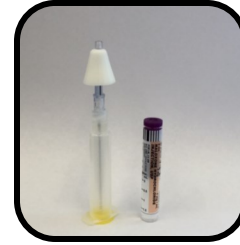
Naloxone may cause an opioid dependent person to go into **withdrawal** (e.g. *nausea, vomiting, agitation, muscle aches*). These symptoms **will go away** as the naloxone wears off.

Signs of an opioid emergency or overdose:

- A person is **unresponsive** and won't wake up even if you shake them or say their name loudly
Try to wake the person by vigorously rubbing knuckles up and down the front of their rib cage (sternal rub)
- Breathing slows or even stops
- Lips and/or fingernails turn blue, pale or gray

IN CASE OF OVERDOSE:

- 1 Call 911**
Follow dispatcher instructions.
- 2 Give naloxone.**
See reverse for instructions. If no reaction in 3 minutes, give second dose.
- 3 After naloxone**
Stay with the person for 3 hours (as long as you can) or until help arrives. Make sure the person **does not take more opioids** even if they don't feel well. **If the person is still unresponsive**, lay them on their side, wait for help.
- 4 If you know how, do rescue breathing and/or CPR**
See reverse for instructions or follow 911 dispatcher instructions.



Opioids include:

GENERIC	BRAND NAME
Hydrocodone	Vicodin, Lorcet, Lortab, Norco, Zohydro
Oxycodone	Percocet, OxyContin, Roxicodone, Percodan
Morphine	MSContin, Kadian, Embeda, Avinza
Codeine	Tylenol with Codeine, TyCo, Tylenol #3
Fentanyl	Duragesic
Hydromorphone	Dilaudid
Oxymorphone	Opana
Meperidine	Demerol
Methadone	Dolophine, Methadose
Buprenorphine	Suboxone, Subutex, Zubsolv, Bunavail, Butrans

Heroin

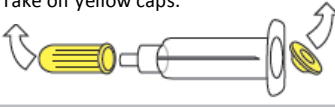
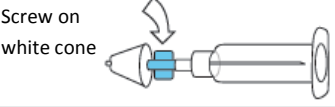
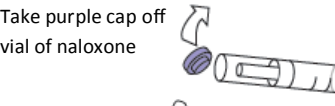
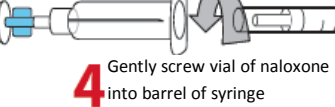
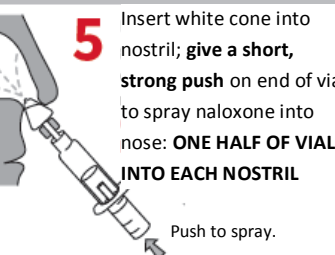
It is important to **share this information** with family and friends. Create a plan of action so others are prepared to respond in case of emergency. Tell people **where your naloxone is** so it is easily accessible in case of emergency.

NOTE: The New York State 911 Good Samaritan Law provides substantial protection to anyone calling 911 to save a life, even if drugs are present.

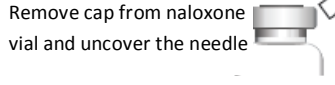
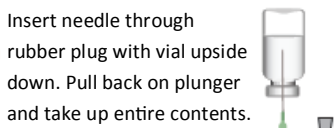
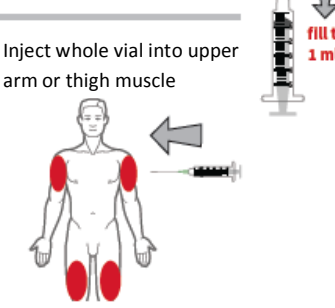
Administering naloxone:

4 mg Narcan nasal spray (from Adapt Pharma)

Nasal spray naloxone

- 1 Take off yellow caps. 
- 2 Screw on white cone. 
- 3 Take purple cap off vial of naloxone. 
- 4 Gently screw vial of naloxone into barrel of syringe. 
- 5 Insert white cone into nostril; give a short, strong push on end of vial to spray naloxone into nose: **ONE HALF OF VIAL INTO EACH NOSTRIL**.  Push to spray.
- 6 If no reaction in 3 minutes, give 2nd dose.

Injectable naloxone

- 1 Remove cap from naloxone vial and uncover the needle. 
- 2 Insert needle through rubber plug with vial upside down. Pull back on plunger and take up entire contents. 
- 3 Inject whole vial into upper arm or thigh muscle.  fill to 1 ml
- 4 If no reaction in 3 minutes, give 2nd dose.

Auto-injector

The naloxone auto-injector is FDA approved for use by anyone in the community. It contains a speaker that provides instructions to inject naloxone into the outer thigh, through clothing if needed.

1 PEEL



Peel back the package to remove the device. Hold the device with your thumb on the bottom of the plunger and 2 fingers on the nozzle.

2 PLACE



Place and hold the tip of the nozzle in either nostril until your fingers touch the bottom of the patient's nose.

3 PRESS



Press the plunger firmly to release the dose into the patient's nose.

4 REPEAT

If there is no reaction in 2 to 3 minutes, give another dose with a new device. Repeat process until emergency assistance arrives.

REDUCE RISK

Certain factors can increase risk of opioid emergency or overdose:

- **Changes in tolerance** (*how much of the drug your body can handle*) Resuming opioid use after a period of abstinence and changing medicines can increase risk.
- **Mixing other drugs or medications** —such as alcohol, benzodiazepines (e.g. Xanax® or Valium®), or cocaine—with opioids can increase risk of overdose.
- **Taking opioids by yourself** increases the chance that if anything happens, you will not get help.

Resuscitation

- If you are trained in CPR you may do this.
- If you only know rescue breathing or chest compressions do one of those
- Follow the instructions of the 911 dispatcher

When to get a refill:

Please get a refill if:

- One of more doses of naloxone are used
- Naloxone or any piece of the applicator is lost or damaged
- Naloxone is nearing expiration date or is expired

If possible, store naloxone at room temperature, away from direct light.

For a list of New York State registered Opioid Overdose Prevention Programs where you can access free naloxone, please visit:

<http://www.health.ny.gov/overdose>

For information on treatment options call the OASAS HOPEline:

1-877-8-HOPENY (877-846-7369) or visit

<http://www.oasas.ny.gov/>



www.harmreduction.org



www.erie.gov/health