First Responder Naloxone Program

Department of Public Safety

Division of EMS

September 2020
Objectives

1. What is Narcan/Naloxone?
2. When Should it be Used?
3. Recognizing Signs & Symptoms of Overdose
4. Reporting Procedures
Naloxone

• Naloxone blocks opiate receptors and reverses the effect of opiate drugs.
• If there are no opiates in the body, Naloxone has no effect.
• Less than 0.1% of the population is allergic to Naloxone.

This is an extremely low risk / high benefit medication.
Opiate Drugs

- Naloxone only reverses opiate drugs, such as:
  - Heroin
  - Morphine
  - Fentanyl
  - Codeine
  - Oxycontin
  - Hydrocodone/Oxycodone
Non-Opiate Substances

• Naloxone does NOT reverse the effects of non-opiate drugs such as alcohol, Valium, Xanax, muscle relaxers, or other non-opiate medications.

• If administrated in the presence of these substances, naloxone will not harm the victim either.

*Narcan has been proven to be a very safe drug with a low risk of adverse effects.*
Signs & Symptoms of Overdose

- Pinpoint pupils
- Vomiting
- Decreased level of consciousness (LOC)
- Respiratory depression
  - Agonal breathing (sporadic snoring or gasping respirations)
- Respiratory arrest
- Cardiac arrest
Naloxone Administration

- In the event of an overdose, Call 911 (immediately)
- If the patient is not breathing begin CPR.
- CPR takes priority over the administration of Naloxone!

View a brief Hands-Only CPR instructional video
Naloxone Administration

• Naloxone Nasal Spray is safest & quickest device to administer Narcan.

• To use:
  — Remove applicator from foil package
  — Place applicator fully into patient’s nose
  — Press plunger to administer medication
  — Follow post-administration instructions
Naloxone Administration

• Naloxone usually takes effect within 2-3 minutes.
  – If the victim remains unstable, you may administer a second dose as needed after 3-5 minutes. DO NOT ADMINISTER A 3\textsuperscript{RD} DOSE, WAIT FOR FIRST RESPONDERS.

• Depending on amount of opiates on board, reversal with Narcan may be temporary (30 – 90 mins).
  – Overdose symptoms (e.g., respiratory depression, unconsciousness) can recur and additional doses may become necessary.

You cannot overdose the victim with Narcan.
Post-Administration

• Carefully monitor victim’s level of responsiveness and breathing.

• Be sure to place victim on left side (see below) to protect their airway from vomit/aspiration.

• Used devices can be disposed of in any trash receptacle.

Hand should support head.

Knee prevents body from rolling on to stomach.
Naloxone Side Effects

• Naloxone administration can induce rapid withdrawal causing:
  – Nausea/Vomiting
  – Agitation
  – Seizures
  – Plural Effusion

• Monitor the victim for changes in responsiveness.

• Monitor the victim’s breathing carefully.

CAUTION: As victims regain consciousness, they may become agitated or angry.
Naloxone will be distributed by the CCE (MCDPS).

Each box contains 2 doses of Naloxone (4 mg each).

The medication MUST be stored at room temperature.

— Do NOT expose to extreme temperatures.

Check the expiration date regularly.

Per FDA, if stored at room temperature, naloxone may be administered 1-year past expiration.
• The Narcan Administration form is for use by **ALL** first responders.
  
  – Not all sections may be applicable to you.
  – Fill it out with as much information as you have available.
  – Each person who delivers a dose of Narcan must fill out a form.
  – In order to get a replacement dose, this form must be received.
### Narcan Administration - Montgomery County

**Submit within 24 hours to:** [SPSintel@montcoops.org](mailto:SPSintel@montcoops.org) **by fax to:** 610-631-8536.

#### INCIDENT INFORMATION
- **Reporting Agency:**
- **CAD Incident Numbers:**
- **DATE:**
- **TIME:**
- **Incident Street Address:**
- **Incident City:**
- **State:**
- **Incident Zip Code:**

#### VICTIM INFORMATION
- **Victim First Name:**
- **Victim Last Name:**
- **Age:**
- **Date of Birth:**
- **Victim Residence - Street Address:**
- **City:**
- **State:**
- **Zip Code:**
- **Gender:**
- **Race/Ethnicity:**
- **Native American:**
- **Pacific Islander:**
- **Other:**

#### Naloxone Administration
- **Total Doses Given:**
- **Dose Per Administration:**
- **Administered By:**
- **Administered IV:**
- **Administered by Other:**
- **Dose Per Administration:**
- **Administered by:**
- **Administered IV:**
- **Administered by Other:**
- **Dose Per Administration:**
- **Administered by:**
- **Administered IV:**
- **Administered by Other:**

#### Suspected Substance (Check all that apply)
- **Methamphetamine**
- **Alcohol**
- **Cocaine/Crack**
- **Unknown**
- **Prescription Opiates**
- **Method/Substance**
- **Other**

#### Evidence Observed on Scene
- **Drugs**
- **Narcotic Baggie**
- **Plastic Bag**
- **Ampule**
- **Naloxone**
- **Paraphernalia**
- **Drugs**
- **Narcotic Baggie**
- **Plastic Bag**
- **Ampule**
- **Naloxone**
- **Paraphernalia**

#### Comments/Additional Information
- **Naloxone Device Manufacturer:**
- **Naloxone Lot Number:**
- **Expiration Date:**
- **Username:**
- **Date:**
- **Contact Number or Email:**

For Peer Review Only. Not part of the medical record. Confidential pursuant to Peer Review Protection Act, 54 P.S. 425.1 et seq. Health Care Quality Improvement Act.
The Naloxone Administration Report must be submitted within **24 hours** after use.

- Electronic submissions should be sent to DPSintel@montcopa.org
- Submissions by Fax should be sent to 610-631-6536.
Questions?

Department of Public Safety
610-631-6500
emstraining@montcopa.org

Thank you for your time and participation!