

Overdose Prevention and Treatment

Patient Education Module

Overdose Prevention

It is vitally important that you only take the medications that are prescribed to you in the manner in which they are prescribed. Mixing your medications with other non-prescribed medications can result in overdose and death.

Taking your medications more frequently than prescribed or in a manner other than what is prescribed can result in overdose and death. Be sure to tell your doctor ALL of the medications that you are taking.

If you are prescribed medications from more than one provider, then make sure that you notify ALL of your providers about ALL medications that you are taking – including over the counter medications. Do not take other people's medications. Not only is taking other people's medications illegal, it is also dangerous due to medication interactions and potential allergic reactions.

Do not sell, share, or give away your medications to other people. A person must be evaluated by a physician before taking any medication to ensure patient safety.

Overdose Treatment

STEP 1: CALL FOR HELP (DIAL 911) - AN OPIOID OVERDOSE NEEDS IMMEDIATE MEDICAL ATTENTION.

An essential step is to get someone with medical expertise to see the patient as soon as possible, so if no EMS or other trained personnel are on the scene, dial 911 immediately. All you have to say is: "Someone is not breathing." Be sure to give a clear address and/or description of your location.

STEP 2: CHECK FOR SIGNS OF OPIOID OVERDOSE	
Body is limp	
Signs of O/E/DOS that, if not treated, include:	The patient is vomiting or making gurgling noises
He or she cannot be awakened from sleep or is unable to speak	Heartbeat is very slow or stopped.
Breathing is very slow or stopped	

Signs of *OVERMEDICATION*, which may progress to overdose, include:

Unusual sleepiness or drowsiness	Pinpoint pupils
Slow heartbeat, low blood pressure	Difficulty waking the person from sleep.
Slow or shallow breathing	Mental confusion, slurred speech, intoxicated behavior

Because opioids depress respiratory function and breathing, one telltale sign of a person in a critical medical state is the "death rattle." If a person emits a "death rattle" — an exhaled breath with a very distinct, labored sound coming from the throat — emergency resuscitation will be necessary immediately, as it almost always is a sign that the individual is near death

STEP 3: SUPPORT THE PERSON'S BREATHING

Ideally, individuals who are experiencing opioid overdose should be ventilated with 100% oxygen before naloxone is administered so as to reduce the risk of acute lung injury. In situations where 100% oxygen is not available, rescue breathing can be very effective in supporting respiration. Rescue breathing involves the following steps:

1. Be sure the person's airway is clear (check that nothing inside the person's mouth or throat is blocking the airway).
2. Place one hand on the person's chin, tilt the head back and pinch the nose closed.
3. Place your mouth over the person's mouth to make a seal and give 2 slow breaths.
4. The person's chest should rise (but not the stomach).
5. Follow up with one breath every 5 seconds.

STEP 4: ADMINISTER NALOXONE – see next page

Naloxone (Narcan) should be administered to any person who shows signs of opioid overdose, or when overdose is suspected. Naloxone injection is approved by the FDA and has been used for decades by emergency medical services (EMS) personnel to reverse opioid overdose and resuscitate individuals who have overdosed on opioids.

Naloxone can be given by intramuscular or intravenous injection every 2 to 3 minutes. The most rapid onset of action is achieved by intravenous administration, which is recommended in emergency situations. The dose should be titrated to the smallest effective dose that maintains spontaneous normal respiratory drive.

Opioid-naïve patients may be given starting doses of up to 2 mg without concern for triggering withdrawal symptoms. The intramuscular route of administration may be more suitable for patients with a history of opioid dependence because it provides a slower onset of action and a prolonged duration of effect, which may minimize rapid onset of withdrawal symptoms.

STEP 5: MONITOR THE PERSON'S RESPONSE

All patients should be monitored for recurrence of signs and symptoms of opioid toxicity for at least 4 hours from the last dose of naloxone or discontinuation of the naloxone infusion. Patients who have overdosed on long-acting opioids should have more prolonged monitoring. Most patients respond by returning to spontaneous breathing, with minimal withdrawal symptoms. The response generally occurs within 3 to 5 minutes of naloxone administration. (Rescue breathing should continue while waiting for the naloxone to take effect.)

Naloxone will continue to work for 30 to 90 minutes, but after that time, overdose symptoms may return. Therefore, it is essential to get the person to an emergency department or other source of medical care as quickly as possible, even if he or she revives after the initial dose of naloxone and seems to feel better.

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.



3 Call for emergency medical help, Evaluate, and Support

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.

