Draw Up Naloxone (Narcan®) Study

**MFR/BLS Opioid Overdose/Narcan Administration**
*(OPTIONAL FOR EACH MFR and BLS LIFE SUPPORT AGENCY)*

**Indications:**
Naloxone (Narcan) is indicated for the complete or partial reversal of opioid induced respiratory depression caused by opioid narcotic medications such as: Heroin, Morphine, Hydromorphone (Dilaudid), Methadone, Meperidine (Demerol), Fentanyl (Sublimaze), Oxycodone (Percocet, Percodan), Hydrocodone (Vicodin, Norco) or Codeine (Tylenol 3, Tylenol 4).

**Pre-Medical Control**

**MFR/BLS**
1. Follow the General Pre-Hospital Care Protocol.
2. If in cardiac arrest, refer to Cardiac Arrest – General Protocol.
3. If altered mental status due to hypoglycemia, refer to Altered Mental Status Protocol.
4. If respiratory distress, support ventilation and refer to the Respiratory Distress Protocol and the Emergency Airway Procedure.
5. Using a vial access cannula on a 3 ml syringe, draw up 0.4 mg (1 ml) Naloxone (Narcan) 0.4 mg/ml.
6. Remove the vial access cannula from the syringe.
7. Attach atomizing device to syringe.
8. Holding the syringe with the atomizing device up, remove excess air from the syringe without wasting the Naloxone (Narcan).
9. Use one hand to support back of patient’s head as needed.
10. Place tip of atomizing device snuggly against nostril aiming slightly upward and outward.
11. Rapidly administer the entire dose of medication, briskly pushing plunger.
12. Repeat with other nostril if no effect in 3 minutes. Treatment goal is adequate patient breathing effort; the patient need not be woken up completely. Note: Maximal dose per nostril is 1 ml.