

Opioid Overdose Response-*Naloxone* Administration Training

Training Objectives

- Understand administration of naloxone products, including “Good Samaritan” protection law
- Recognize the signs of an opioid overdose and identify its causes and risks
- Describe what NOT to do during an opioid overdose
- Know the steps to follow when encountering an opioid overdose
- Earn a certificate of completion of naloxone administration training

Background

- **Examples of opioids include:**
 - Illegal drugs such as heroin
 - Prescription medications used to treat pain:
 - Codeine
 - Morphine (Avinza®, Kadian®, MS Contin®)
 - Oxycodone (OxyContin®, Percocet®)
 - Oxymorphone (Opana®)
 - Hydrocodone
 - Hydromorphone (Dilaudid®, Exalgo®)
 - Methadone
 - Fentanyl (Actiq®, Duragesic®, Fentora®)
 - Buprenorphine

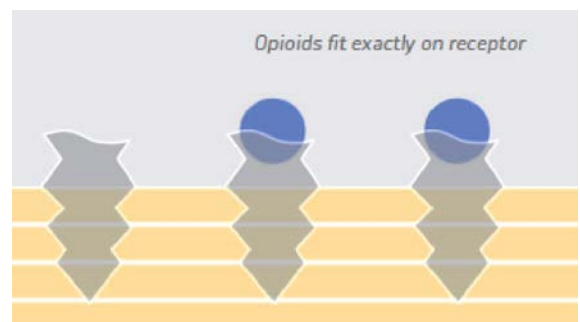
- **What is naloxone?**

Opioids bind to specific sites in the brain that affect breathing, as well as minimize the perception of pain.

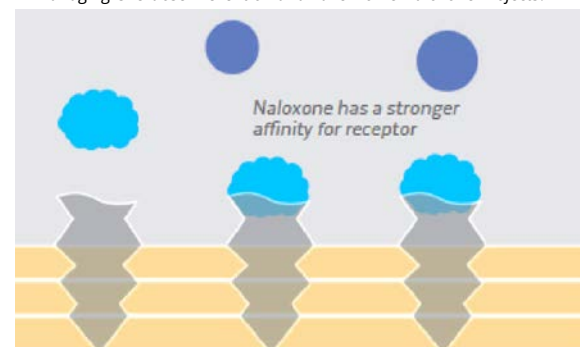
Naloxone reverses the effects of opioids by binding to these same sites more closely (stronger affinity) than opioids. It knocks the drug off these sites for a period of time so that breathing can be restored.

- It **DOES NOT** have the potential for abuse and does not increase risk-taking behavior.*
- It **DOES NOT** work for overdoses caused by substances such as cocaine, amphetamines, ecstasy, GHB, or alcohol.
- Naloxone is available as an auto-injector and an intranasal spray.

*Stated in Naloxone training guidelines published by SAMHSA, NaloxoneInfo.org, TowardTheHeart.com, and the DOPE Project.



Adapted from the Harm Reduction Coalition: *Guide to Developing and Managing Overdose Prevention and Take-Home Naloxone Projects.*



Risks factors for an Overdose

- Mixing opioids with other drugs, especially alcohol and benzodiazepines (Xanax®, Valium®, Ativan®)
- If a person hasn't been taking an opioid for an extended period of time and then starts taking it again, such as after being in:
 - Jail
 - Detox program
 - Rehab treatment facility
- Using these medications while alone

Recognizing an Overdose

- An overdose happens when a toxic amount of a drug (or combination of drugs) overwhelms the body and causes it to shut down. Opioid drugs or “downers” cause this by slowing or stopping breathing, which will eventually cause the heart to stop.
- Overdoses often happen slowly, over the course of several hours.
 - If someone seems extremely “high” but is still awake and able to walk:
 - Get them up and walking around
 - Keep them talking to you

THIS MAY PREVENT THE PERSON FROM CROSSING “THE LINE” INTO AN OVERDOSE

SIGNS OF OVERMEDICATION
<ul style="list-style-type: none">➤ Heavy nodding, sleepiness, but responsive➤ Difficulty staying awake➤ Slurred or slow speech
SIGNS OF OVERDOSE - “the line”
<ul style="list-style-type: none">➤ Unresponsive to shouting, pain stimulation➤ Unconsciousness➤ Slow and shallow breathing or <u>NOT</u> breathing➤ Pale, clammy skin, loss of color➤ Blue, purple, or gray face, especially around lips/fingernails➤ Faint or <u>NO</u> pulse➤ Extremely small “pinpoint” pupils

Adapted from Naloxone guidelines published by SAMSHA, NaloxoneInfo.org, TowardTheHeart.com, and the DOPE Project.

- If the person becomes unconscious, follow the steps outlined in this training.

What NOT to do During an Overdose

- **DO NOT** put the individual into a cold bath or shower. They could drown.
- **DO NOT** inject the person with any substance other than naloxone (saltwater, milk, “speed”, etc.). This does not work.
- **DO NOT** try to make the person vomit or give them something to eat or drink. They could choke.
- **DO NOT** give over-the-counter drugs or vitamins (No-Doz, Niacin). These do not help.

What TO DO During an Overdose

Step 1: Try to Maintain Responsiveness

- Call the person's name
- Shake the person
- Utilize the "sternum rub"
 - Make a fist and use the middle joints of your fingers (not the knuckles) to firmly rub the center of the person's chest to wake them up

Step 2: Administer Naloxone*

- Administer a naloxone product per package insert instructions.

Step 3: Dial 911*

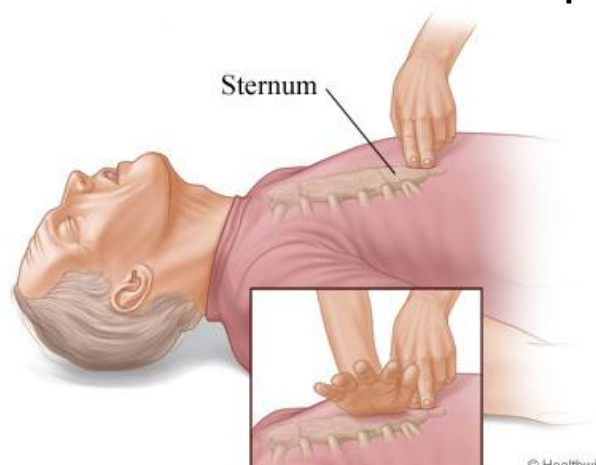
- If there is no response, CALL 911
 - Stay with person until emergency medical services arrive
 - Tell 911:
 - Address or location of where to find the person
 - If they are not breathing
 - If you gave naloxone and how much
 - What medications the person took if you know

Steps 2 and 3 can occur interchangeably depending on which can be achieved more quickly

**** If not trained to give or comfortable giving CPR please skip to Step 5 ****

Step 4: Give Chest Compressions**

- Provide support to help blood circulation and oxygen delivery
 - Place one hand over the other on the person's sternum



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Retrieved Aug 23, 2016 from <http://www.webmd.com/first-aid/cpr-in-adults-positioning-your-hands-for-chest-compressions>



Retrieved Aug 23, 2016 from [http://resuscitation-guidelines.articleinmotion.com/article/S0300-9572\(10\)00435-1/aim/adult-bl-quence](http://resuscitation-guidelines.articleinmotion.com/article/S0300-9572(10)00435-1/aim/adult-bl-quence)

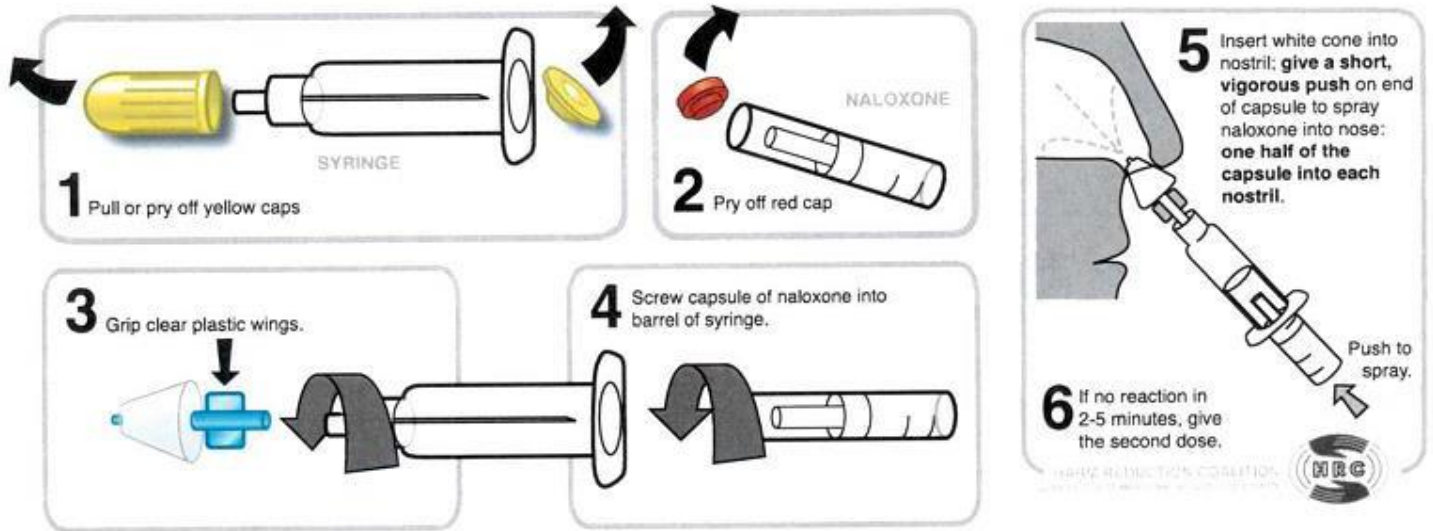
- o **Repeatedly compress the chest at least 2 in (5 cm) for 2 minutes**



- Put them on their back
- Pull the chin forward to keep the airway open put one hand on the chin, tilt the head back, and pinch the nose closed
- Make a seal over their mouth with yours and breathe in two breaths. The chest, not the stomach, should rise
- Give one breath every 5 seconds

NALOXONE NASAL ATOMIZER

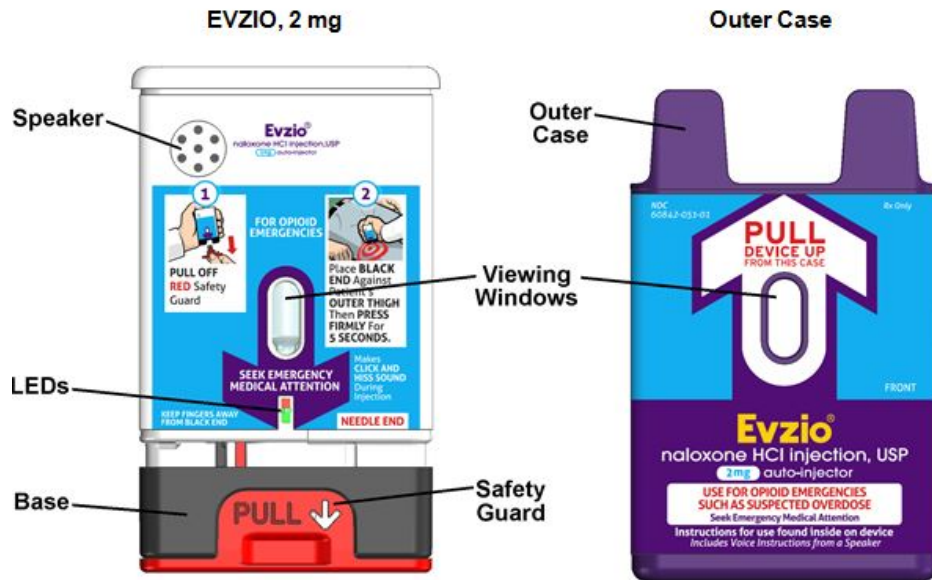
HOW TO GIVE NASAL SPRAY NALOXONE



1. Take **YELLOW** caps off the needleless syringe
2. Grip the clear plastic wings and gently screw the **WHITE cone** (nasal atomizer) onto the barrel of the syringe
3. Take the **RED** cap off the naloxone vial
4. Screw the naloxone vial into the barrel of the syringe without pressing down hard
5. Tilt the person's head back and put the **WHITE cone** into **one nostril**
 - Give a short, firm push on the end of the syringe
 - Spray **one-half** of the dosage into **each nostril**
- **If the person's symptoms return after the first dose of naloxone, an additional dose may be given after 2 to 3 minutes**
 6. If another dose needs to be given, a new auto-injector must be used

EVZIO®

Figure A



You do not need to assemble your EVZIO. EVZIO comes already assembled for use.

- o EVZIO® is an auto-injector that gives voice instructions for each of the steps
 - A practice or “trainer” device is included.
 - As part of your opioid emergency plan, practice using the Trainer for EVZIO. Make sure your family or caregiver also practice using the EVZIO training device.
 - If the audio instruction system malfunctions, the device will still deliver the dose if the printed directions are followed.

1. Pull EVZIO from outer case



Pull EVZIO from the outer case.

2. Pull off the **RED** safety guard



Pull off the red safety guard.

- **PULL FIRMLY** – the safety guard is made to fit tightly
- **Do not replace the RED safety guard after it is removed**
- To reduce the chance of an accidental injection, do not touch the **BLACK** base of the auto-injector, which is where the needle comes out
- If an accidental injection happens, get medical help right away

3. Place the **BLACK** end of the product on the outer thigh

- It **can** be given through clothing
- In children under 1 year of age, the person giving Evzio should pinch the thigh muscle while administering the dose



- A distinct “click and hiss” sound will be heard – this is normal and means that it is working correctly
- Keep firmly pressed on the thigh for 5 seconds after you hear the click and hiss sound
- The needle will inject and then retract back into the auto-injector and is not visible after use

4. After use, place the auto-injector back into its outer case.

- The **BLACK** base will lock into place
- The voice instruction system will state that EVZIO has been used and the LED will blink red
- The **RED** safety guard cannot be replaced
- The viewing window will no longer be clear – You will see a red indicator

- **If the person’s symptoms return after the first dose of naloxone, an additional dose may be given after 2 to 3 minutes**

- If another dose needs to be given, a new auto-injector must be used



See How EVZIO Works



Evzio® Video Demonstration: Click [See How EVZIO Works](#) (as shown above)

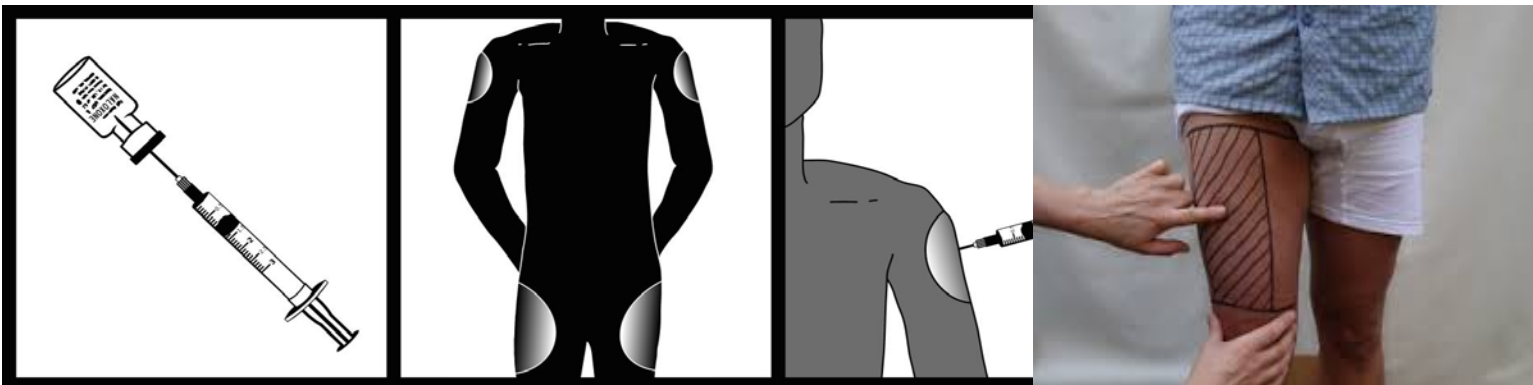
6. Does your Evzio look different than this?
 - The EVZIO 0.4 mg device and carton are yellow and purple and are no longer being manufactured. The EVZIO 2 mg device and carton are blue and purple and are now available. Although EVZIO 0.4 mg, with the yellow and purple packaging, is no longer available for prescribing, it remains a safe and effective treatment for opioid emergencies. Always carry your EVZIO with you in case of an opioid emergency.
 - EVZIO 0.4 mg remains a safe, effective option for treatment of an opioid emergency until the expiration date.

For more information: [EVZIO®](#)

All images and information pertaining to the Evzio® product and its administration was obtained from instructional materials retrieved from the product's website: <http://www.evzio.com>.

INJECTABLE NALOXONE:

Inject into the upper arm or upper outer top of thigh muscle **1cc** at a time. Always start from a new vial



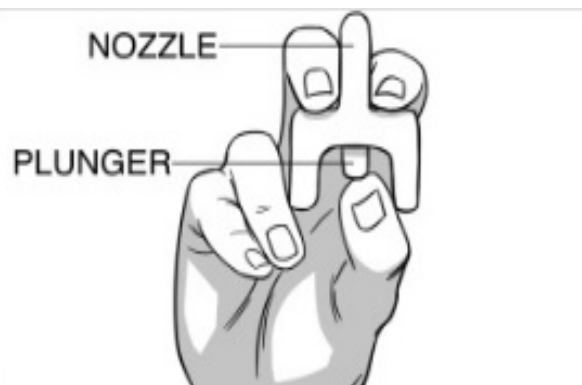
The best place to inject naloxone is into the upper outer top of the thigh as shown above.

NARCAN®



**DO NOT REMOVE OR TEST THE NARCAN® NASAL SPRAY UNTIL READY TO USE
EACH PACKAGE HAS 1 DOSE AND CANNOT BE REUSED
YOU DO NOT NEED TO PRIME THE NASAL SPRAY**

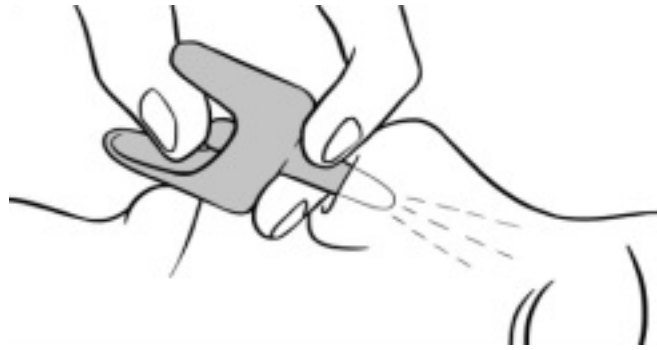
1. Lay the person on their back to administer dose
2. Remove the spray from the box
 - Peel back the tab with the circle to open
3. Hold the spray with your thumb over the bottom of the plunger and your first and middle fingers on either side of the nozzle



4. Tilt the person's head back and provide support under the neck with your other hand



- Gently insert the tip of the nozzle into **one nostril** until your fingers on the nozzle are against the bottom of the person's nose
5. Press the plunger firmly to deliver the dose



6. Remove spray nozzle out of the nostril after dose is given
- **If the person's symptoms return after the first dose of naloxone, an additional dose may be given after 2 to 3 minutes**
7. If another dose needs to be given, a new nasal spray must be used
8. Put the used nasal spray back into its box

[Narcan® Video Demonstration](#)

For more information: [Narcan®](#)

All images and information pertaining to the Narcan® product and its administration was obtained from instructional materials retrieved from: <http://www.narcan.com> and [Access Data - FDA](#).

Step 5: Post Naloxone Administration Support

- **If the person is still not breathing on their own, continue providing chest compressions and rescue breathing until the naloxone starts working or paramedics arrive**
- **If the person is breathing, turn person onto their side as seen in the picture below. This position will help prevent the person from potentially inhaling vomit**



- If the person **is breathing**, turn person onto their side as seen in the picture
- This position will help prevent the person from potentially inhaling vomit

Step 6: Stay and Watch Individual

- The person may have no memory of overdosing and you may have to explain that you've just given them naloxone
- Comfort the person being treated, as withdrawal symptoms triggered by the naloxone can feel unpleasant
- Help the person to remain calm
- Discourage the person from using more opioids for at least 2 hours
 - Continued opioid use will not help with withdrawal sickness
- Encourage the person to receive treatment from paramedics
 - To prevent another overdose
 - To receive care for withdrawal symptoms

Step 7: Inform Paramedics

- When emergency medical services arrive tell them that naloxone was given
- If known, tell them what the person took and how much

What If the Police Show Up?

- **"Good Samaritan" protection law**
 - Grants civil immunity for administering naloxone to someone they reasonably believe is overdosing on an opioid
 - Any person who in good faith seeks medical assistance for a person experiencing or believed to be experiencing a drug overdose shall not be arrested, charged, or prosecuted for a drug violation if the evidence for the arrest, charge, or prosecution of the drug violation resulted from seeking such medical assistance.

- o Any person who is experiencing a drug overdose and who in good faith seeks medical assistance for or is the subject of a request for medical assistance shall not be arrested, charged, or prosecuted for a drug violation if the evidence for the arrest, charge, or prosecution of the drug violation resulted from seeking such medical assistance.

Resources for Communities:

- o Tennessee
 - o Tennessee Together:
www.tn.gov/opioids
 - o Substance Abuse Prevention:
<https://www.tn.gov/behavioral-health/substance-abuse-services/prevention.html>
 - o Community anti-drug coalitions:
<https://www.tn.gov/behavioral-health/substance-abuse-services/prevention/prevention/join-an-anti-drug-coalition0.html>
 - o Council for Alcohol & Drug Abuse Services (CADAS)
<http://www.cadas.org>
- o Substance Abuse and Mental Health Services Administration (SAMHSA)
 - o National Helpline:
1-800-662-HELP (4357) or 1-800-487-4889 (TDD – for hearing impaired)
 - o Publications:
<http://store.samhsa.gov> or 1-877-SAMHSA (726-4727)
- o American Association for the Treatment of Opioid Dependence (AATOD)
 - o Prevalence of Prescription Opioid Abuse
<http://www.aatod.org/projectseducational-training/prevalence-of-prescription-opioid-abuse>
- o National Association of State and Alcohol Drug Abuse Directors (NASADAD)
 - o Overview of State Legislation to Increase Access to Treatment for Opioid Overdose
<http://nasadad.org/wp-content/uploads/2015/09/Opioid-Overdose-Policy-Brief-2015-Update-FINAL1.pdf>

Resources for Opioid Overdose Recovery:

- o Tennessee
 - o Crisis Detoxification
<https://www.tn.gov/behavioral-health/substance-abuse-services/treatment---recovery/treatment---recovery/crisis-detoxification.html>
 - o Substance Abuse Services:
<https://www.tn.gov/behavioral-health/substance-abuse-services.html>
 - o Treatment & Recovery:
<https://www.tn.gov/behavioral-health/substance-abuse-services/treatment---recovery.html>
 - o Medication Assisted Treatment:
<https://www.tn.gov/behavioral-health/substance-abuse-services/treatment---recovery/treatment---recovery/opioid-treatment-programs.html>
 - o Recovery Support Services:

<https://www.tn.gov/behavioral-health/substance-abuse-services/treatment---recovery/treatment---recovery/recovery-support-services.html>

- o Adult Substance Abuse Treatment

<https://www.tn.gov/behavioral-health/substance-abuse-services/treatment---recovery/treatment---recovery/adult-substance-abuse-treatment.html>

- o Project Lazarus

<http://www.projectlazarus.org>

- o Harm Reduction Coalition

<http://harmreduction.org>

- o Overdose Prevention Alliance

<http://overdosepreventionalliance.org>

- o Toward the Heart

<http://www.towardtheheart.com/naloxone>

Resources used to prepare this training:

- o http://www.accessdata.fda.gov/drugsatfda_docs/label/2015/208411lbl.pdf. Accessed August 4, 2016
- o overdoseprevention@pppgh.org. Accessed August 2, 2016
- o <https://eccguidelines.heart.org/index.php/circulation/cpr-ecc-guidelines-2/part-10-special-circumstances-of-resuscitation/>. Accessed August 2, 2016
- o <https://eccguidelines.heart.org/wp-content/uploads/2015/10/2015-AHA-Guidelines-Highlights-English.pdf> accessed August 23, 2016
- o <http://www.narcan.com>. Accessed August 3, 2016
- o Recommended video for naloxone: <http://prescribetoprevent.org/video/>. Accessed August 3, 2016
- o Harm Reduction Coalition: Guide to Developing and Managing Overdose Prevention and Take-Home naloxone Projects. Retrieved from <http://harmreduction.org/issues/overdose-prevention/> on Aug. 3, 2016.
- o Toward the Heart: A project of the provincial harm reduction program. <http://towardtheheart.com>
- o Naloxone Info. <http://www.naloxoneinfo.org>
- o SAMHSA Opioid Overdose Prevention Toolkit. <http://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit-Updated-2016/SMA16-4742>
- o DOPE Project / San Francisco Department of Public Health: Overdose Rescue / Naloxone Training. Retrieved from <http://harmreduction.org/wp-content/uploads/2012/02/DOPE-narcan-group-curriculum.pdf> on Aug 2, 2016.