

PROJECT



Naloxone Administration Training

What is an Overdose?



The brain has many opioid receptors. An overdose occurs when too much of an opioid (heroin, OxyContin, Percocet) fits in too many receptors, stopping the person's breathing.

Opioid receptor in the brain



How does Naloxone

work?

Naloxone

Opioid receptor in the brain



Opioids being knocked free of receptors

Naloxone bonds more strongly to the opioid receptors than opioid drugs, so it knocks the opioids off the receptors for a short time. This blocks the effects of the overdose allowing the person to breathe again.

Naloxone is effective

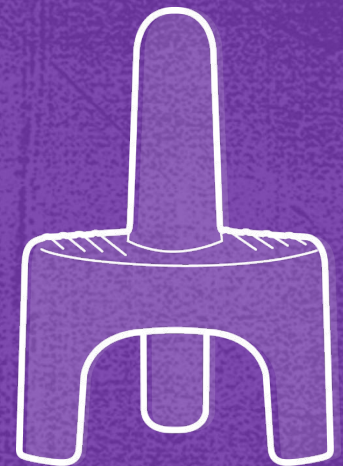
against opioids such as:

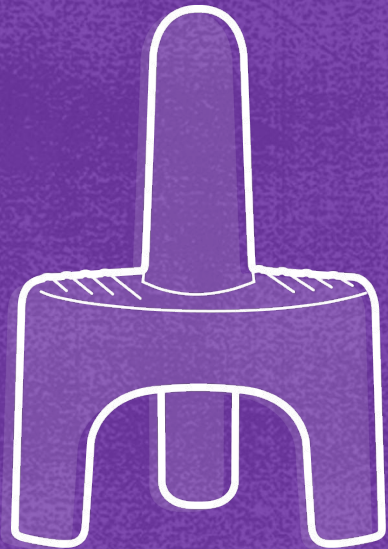
- Heroin
- Methadone
- OxyContin
- Vicodin
- Percocet
- Codeine
- Fentanyl

Naloxone will NOT reverse overdose from drugs such as:

- Cocaine
- Meth (Methamphetamine)
- Alcohol
- Stimulants
- Benzos (Benzodiazepines such as Xanax and Valium)

Naloxone is the ONLY effective response to an opioid overdose emergency!





How To
Administer
Naloxone Nasal
Spray for a
Known or
Suspected
Opioid/Heroin
Overdose



Always call 911

Naloxone does not replace professional medical attention.

Call 911 after administering.

Recognize an overdose

1

If any of these signs are present, continue to Step 2:



FACE

is clammy to touch and has lost color. Has trouble speaking. Center part of their eye very small, sometimes called “pinpoint pupils.”



BOD

is limp. Fingernails or lips are turning blue or purple.



Y
SLEE

is deep and cannot be woken. Will not respond to your voice or touch.



P
BREATHI

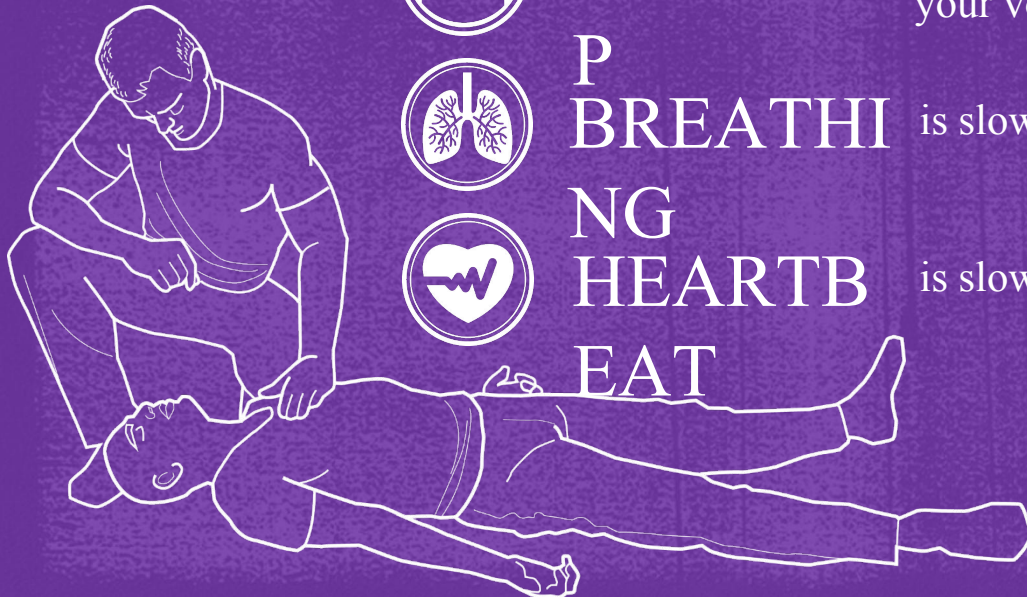
is slow or has stopped. Gurgling sounds.



NG
HEARTB

is slow or has stopped.

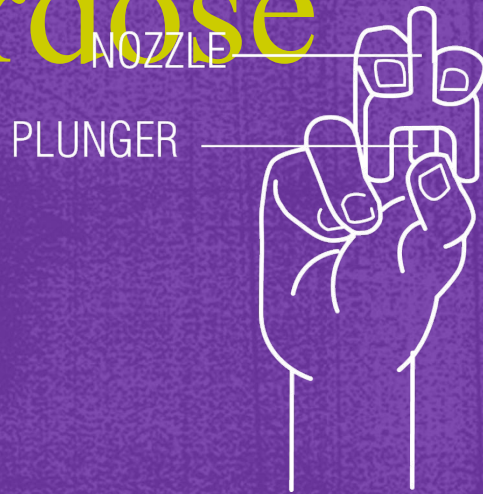
EAT



What to do for an

overdose

2



Administer a dose of Naloxone nasal spray (each sprayer contains one dose)

- Turn them on their back
- Tilt their head back
- Support their neck with your hand
- Insert the tip of the nozzle into either nostril
- Press the plunger firmly to deliver dose

What to do for an

overdose

Watch closely for response

Give them a second dose in the other nostril if they do not respond in 2 to 3 minutes by:

- waking up
- responding to voice or touch
- breathing normally

Naloxone nasal spray can be given every 2 to 3 minutes if available.

3

Call 911 for help and continue to evaluate their condition. Roll them on their side in this position:



What to expect after administering Naloxone nasal Spray

In some cases, Naloxone may cause sudden opioid withdrawal syndrome, so it is important to provide a safe revival space and to be ready for symptoms of withdrawal, which may include:

- Vomiting
- Agitation
- Restlessness
- Diarrhea
- Goosebumps



The recovery position illustrated above is the safest position for the person to be in if vomiting occurs.

Always call 911

Naloxone effects last 30 – 45 minutes. The person may go back into overdose after the Naloxone has worn off.

If the person is not experiencing an opioid overdose, trained help will be on the way

If the person is still not responsive and you know CPR, you may do CPR. If you do not know CPR you may do rescue breathing by giving them 1 breath every 5 seconds.

If the person is breathing on their own but not fully conscious, place them in the recovery position

If the person is fully responsive inform them you had to revive them from an overdose and that help is on the way.



After administering Naloxone for overdose

Report to our online survey at:
<https://www.surveymonkey.com/r/3G6L623>

4

PROJECT HOPE NEEDS TO HEAR FROM YOU.

Please take this short survey. Your reporting
is important.



Naloxone:

Have you used Project HOPE
Naloxone to revive someone
from an opioid overdose?



*Please complete the
survey here*

AS 09.65.340. Immunity for prescribing, providing, or administering an opioid overdose drug.

(a) Except as provided in (c) of this section, a person is not liable for civil damages resulting from an act or omission in prescribing or providing an opioid overdose drug to a person at risk of experiencing an opioid overdose or to a family member, friend, caregiver, or other person in a position to administer an opioid overdose drug to a person at risk of experiencing an opioid overdose if

(1) the person

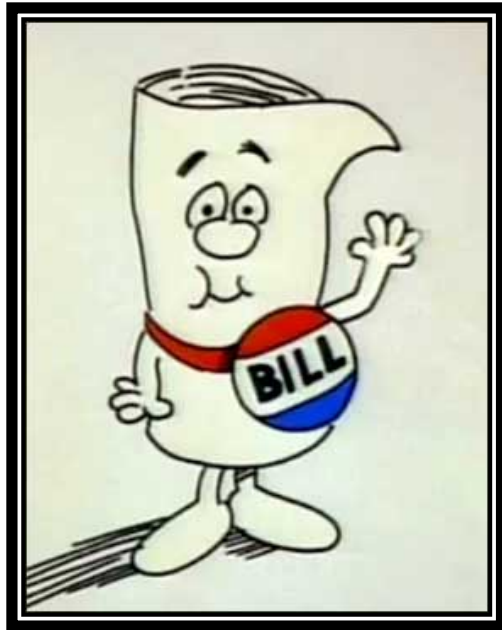
(A) prescribing or providing the opioid overdose drug is a health care provider; or

(B) providing the opioid overdose drug is an employee or volunteer of an opioid overdose program; and

(2) each person to whom the opioid overdose drug is prescribed or provided has been educated and trained in the proper emergency use and administration of the opioid overdose drug by the health care provider or the opioid overdose program; education and training under this paragraph may be provided by any reasonable means, including through the use of electronic, video, or automated education or training resources.

(b) Except as provided in (c) of this section, a person who administers an opioid overdose drug to another person who the person reasonably believes is experiencing an opioid overdose emergency is not liable for civil damages resulting from an act or omission in the emergency administration of the opioid overdose drug.

(c) This section does not preclude liability for civil damages that are the result of gross negligence or reckless or intentional misconduct.



Good Samaritan Law

(Alaska Statute: 11.71.311)

Sec. 11.71.311. Restriction on prosecution for certain persons in connection with a drug overdose.

(a) **A person may not be prosecuted for a violation** of AS 11.71.040(a)(3), (4), or (12), 11.71.050(a)(4) or (5), or 11.71.060(a)(1) or (2) if that person

(1) **sought, in good faith, medical or law enforcement assistance for another person who the person reasonably believed was experiencing a drug overdose** and

(A) the evidence supporting the prosecution for an offense under AS 11.71.040(a)(3), (4), or (12), 11.71.050(a)(4) or (5), or 11.71.060(a)(1) or (2) was obtained or discovered as a result of the person seeking medical or law enforcement assistance;

(B) **the person remained at the scene** with the other person until medical or law enforcement assistance arrived; and

(C) **the person cooperated with medical or law enforcement personnel**, including by providing identification;

(2) **was experiencing a drug overdose and sought medical assistance**, and the evidence supporting a prosecution for an offense under AS 11.71.040(a)(3), (4), or (12), 11.71.050(a)(4) or (5), or 11.71.060(a)(1) or (2) was obtained as a result of the overdose and the need for medical assistance.

Additional Facts

Narcan[®] has a shelf life of three years.

Kloxxado[®] has a shelf life of two years

Nasal applicators should be stored at temperatures between 59 and 86 degrees Fahrenheit. The nasal applicator will not work if it frozen. If it does freeze, thaw it out.

If your organization does not have procedures for disposing of expired medications, expired Naloxone is safe to be disposed of in the regular trash.

You can also consider donating expired Naloxone to nextdisrto.org



After the overdose what can be done?

- Sometimes an overdose can make a person consider quitting use of illicit drugs. If you are related to the person who overdosed, you may be able to support them in this decision. All overdose kits include a resource guide to assist with recovery initiation.
 - Do not be insistent, but be ready if they seek help
- Encourage the person to at minimum seek Emergency Department visitation after the incident:
 - They may need monitoring to prevent going back into respiratory depression.
 - There is a high risk of brain damage and stroke with overdose.
 - Nasal spray administration is the least friendly method of administration

Fentanyl Test Strips

Fentanyl is a synthetic opioid that is 50 to 100 times more potent than Morphine. In recent years Fentanyl has been showing up as an adulterant in everything. Marijuana, Methamphetamine, Cocaine and in Counterfeit pressed pills that look just like the real thing; Xanax, Oxy, Percs, Norcos. Test Everything with a Fentanyl Test Strip using the suggested methods in this video.



How to use
Fentanyl Test Strips

For more information
www.opioids.alaska.gov

Have questions about Project HOPE?
Please contact ProjectHOPE@alaska.gov

Alaska Department of Health