

Opioid Overdose Rescue With Naloxone Nasal Spray

Patient Guide



U.S. Department of Veterans Affairs

Veterans Health Administration PBM Academic Detailing Services

What is an opioid?

Opioids are a type of medicine used to treat pain, cough, and addiction. Examples of prescribed opioid medicines are hydrocodone, morphine, and oxycodone.

Opioids can also be non-prescribed substances like heroin. Fentanyl is an opioid that can be prescribed, but also is made illegally. Non-prescribed fentanyl can be sold separately or mixed in heroin and other drugs like cocaine and methamphetamine.

Opioid overdose

Opioids can slow or stop a person's breathing. Opioid overdose occurs when a person takes more opioids than the body can handle. The person may pass out and have difficulty breathing and sometimes it may lead to death.



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Overdose prevention

Safer use of opioids

ANY OPIOID



- There is no safe dose of opioids.
- Naturally found opioids have the same risks as those made in a lab.
- Go slow! If you have not used opioids in a few days, your usual dose may cause an overdose.
- Wait! If you use an opioid, wait long enough to feel the effects before taking more.
- Many who overdose do so when using opioids alone. Tell someone so they can check on you.
- Avoid mixing opioids with alcohol, benzodiazepines (like clonazepam or alprazolam), or medicines that can make you sleepy. In some cases, this can cause an overdose.
- Naloxone is a medicine that can reverse the effects of an opioid overdose.

Safer use of opioids (continued)

PRESCRIBED OPIOIDS

- Know the name of the opioid, strength, and amount taken each day.
- Take prescribed medicines exactly as instructed by your healthcare provider.
- Review the booklet <u>Safe and Responsible Use of Opioids</u> with your healthcare provider. **Download using the QR code at the right.**



NON-PRESCRIBED OPIOIDS

- If you choose to use, go slow!
- Even a few days without opioids could make you more sensitive to them.
- Reduce your dose to half or less after any period of not using (even a couple of days).

Safety check: Look for signs of an overdose			
	D		(J)
Check	Listen	Look	Touch
 sleepy heavy nodding deep sleep hard to wake vomiting 	 slow or shallow breathing (1 breath every 5 seconds) snoring raspy, gurgling, or choking sounds 	bluish or grayish: • lips • fingernails • skin	 clammy sweaty skin

Responding to an opioid overdose





Check for a response





Shout for help, call 911, and get naloxone





Check for breathing—if not breathing normally, give naloxone and start cardiopulmonary resuscitation (CPR)





Consider a second dose of naloxone





Place in recovery position



Check for a response

Give the person a light shake. Yell their name. Firmly rub their sternum (bone in center of chest where ribs connect) with knuckles and your hand in a fist.



If the person does not respond by waking up and staying awake, go to step 2.



Shout for help, call 911, and get naloxone

- Shout for nearby help.
- Call 911 or if someone else is around, have them call 911.
- Give your address and location. Say the person is not responding and may have overdosed.
- Get naloxone.
- If available, get an automatic external defibrillator (AED).









Check for breathing

Look at the chest to see if it rises and falls. Check mouth to make sure airway is clear.



The person is not breathing normally if:

- the chest does not rise or fall.
- you see slow or shallow breathing. This means about 1 breath every 5 seconds or longer.
- you hear snoring, raspy, gurgling, or choking sounds.

Is the person breathing normally?





If the person is NOT breathing normally: Start life saving treatment (see next page)

- Give naloxone.
- Use an AED if available.
- Perform cardiopulmonary resuscitation (CPR) until emergency medical services (EMS) arrives.

If the person is breathing normally: Prevent worsening (see page 11 for more)

- Tap and shout.
- Reposition into the recovery position.
- If person stops responding, give naloxone.
- Continue to observe until EMS arrives.

If the person is not breathing normally



- Give naloxone and use an AED if available. See page 15 for detailed instructions for giving naloxone.
- ✓ **Start CPR.** See next page for instructions.



How to give naloxone:

- 1. Peel back the tab and remove the nasal spray device.
- **2.** Hold the device with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle.
- **3. DO NOT PRIME OR TEST THE SPRAY DEVICE.** Gently insert the tip of the nozzle into one nostril. Your fingers will be on either side of the nozzle and against the bottom of the person's nose.
- **4.** Press the plunger firmly to give the entire dose of naloxone nasal spray. Remove the naloxone nasal spray from the nostril after giving the dose.

Start CPR until emergency medical services (EMS) arrives

Start chest compressions:

- Place heel of one hand over center of the person's chest (between nipples).
- Place one hand on top of your other hand, keep elbows straight, shoulders directly above hands.
- Use body weight to push straight down, at least 2 inches. Push at a rate of 100 to 120 per minute.
- Continue until EMS arrives.



Start rescue breathing (*if trained in CPR*):

- After 30 chest compressions, open airway using the head-tilt, chin lift maneuver.
- Put your palm on the person's forehead and gently tilt the head back. Then gently lift the chin forward with the other hand.
- Give 2 rescue breaths.
- Continue chest compressions and rescue breaths at a rate of 2 breaths for every 30 compressions.



If the person is breathing normally



Prevent worsening:

- Tap and shout to keep the person awake.
- Reposition into the recovery position. This will make it easier to breathe and prevent choking if the person vomits (see page 13 for more details).
- If the person stops responding, give naloxone.
- Continue to observe until EMS arrives.



Consider a second dose of naloxone

Two situations in which to consider a second dose of naloxone:



If the person does not start breathing in 2 to 3 minutes after the first dose of naloxone.



Naloxone may wear off in 30 to 90 minutes. A second dose may be needed if the person stops breathing again.

Stay with the person until EMS takes over or for at least 90 minutes to make sure the person does not stop breathing again.



Place in recovery position

If the person is breathing but unresponsive, put the person on their side to prevent choking if they vomit.



Medicine instructions

- Always keep two naloxone nasal sprays with you.
- Contact your provider as soon as possible if:
 - you use your naloxone nasal sprays
 - your naloxone nasal sprays are close to expiring
- Each nasal spray contains one dose and cannot be reused.
- Store naloxone nasal sprays:
 - at room temperature (59° to 77° F)
 - away from light
 - avoid extremes of heat or cold
- Throw away (dispose of) any used naloxone

nasal spray device in a place that is away from children.





Download the video *How to use the VA Naloxone Nasal Spray* by scanning this QR code with your phone.

Detailed instructions for naloxone nasal spray*



Remove naloxone nasal spray from the box.

Peel back the tab and remove the nasal spray device.



Hold the device with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle.

* This guide is not meant to replace the naloxone nasal spray instructions. Please review the instructions included with your naloxone nasal spray.

Detailed instructions for naloxone nasal spray (continued)



Do not prime or test the spray device.

Gently insert the tip of the nozzle into one nostril. Your fingers will be on either side of the nozzle and against the bottom of the person's nose.

- 5 Press the plunger firmly to give the entire dose of naloxone nasal spray. Remove the naloxone nasal spray from the nostril after giving the dose.
- 6 If th
 - If there is no reaction in 2 to 3 minutes or if the person stops breathing again, give a second dose of naloxone. Use a new naloxone nasal spray device in the other nostril.







VA Substance Use Disorder Treatment Program Locator: www.va.gov/directory/guide/SUD.asp



Resources for Pain Management: www.va.gov/PainManagement/ Veteran Public/index.asp

Cut out the card on the right to keep on hand as a resource in case of an emergency.



Consider seeking long-term help at your local VA Substance Use Disorder Treatment Program:



VA Substance Use Disorder Treatment Program Locator: www.va.gov/directory/guide/SUD.asp

- Local Emergency Services: 911
- National Poison Hotline: 1-800-222-1222
- Veterans Crisis Line: 988 or text 838255

Buddies take care of Buddies.

Share this card with a friend or family member.



www.mentalhealth.va.gov/substance-use

(Adapted from the Harm Reduction Coalition, Oakland, CA)



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www.va.gov

Help is available anytime.

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- Local Emergency Services: 911
- National Poison Hotline: 1-800-222-1222
- Veterans Crisis Line: 988 or text 838255
- Never Use Alone Hotline: 1-800-484-3731
 <u>www.neverusealone.com</u>