



**Naloxone Kit for
Intramuscular Injection**

NALOXONE

Opioid Overdose Rescue With Naloxone Intramuscular Injection

Patient Guide

VA



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 may lead to death.



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Overdose prevention

Safer use of opioids



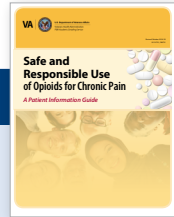
ANY OPIOID

- 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 [*Safe and Responsible Use of Opioids*](#) 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



Check

- sleepy
- heavy nodding
- deep sleep
- hard to wake
- vomiting



Listen

- slow or shallow breathing (1 breath every 5 seconds)
- snoring
- raspy, gurgling, or choking sounds



Look

bluish or grayish:

- lips
- fingernails
- skin



Touch

- clammy sweaty skin

Responding to an opioid overdose



1

Check for a response



2

Shout for help, call 911, and get naloxone



3

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



4

Consider a second dose of naloxone



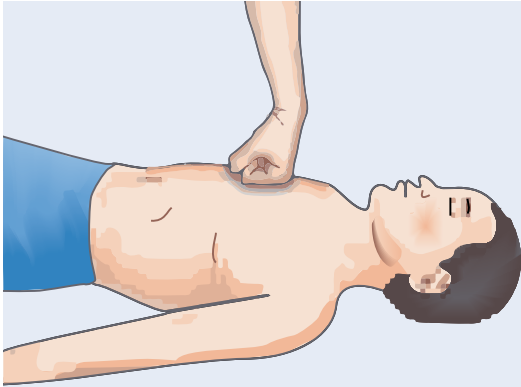
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Place in recovery position

1

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.

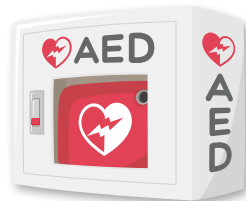
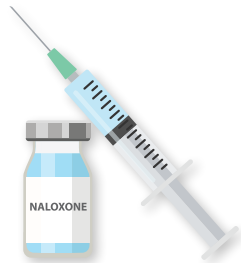


**If the person does not respond
by waking up and staying awake,
go to step 2.**

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).



3

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.



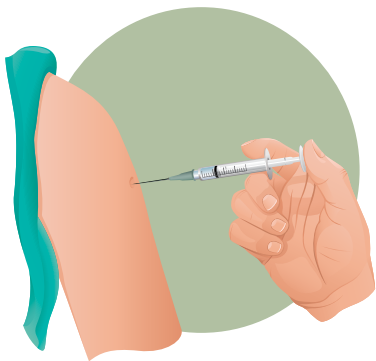
If the person is breathing normally:
Prevent worsening (*see page 11 for more*)

- 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.** Put on gloves (optional), remove cap from naloxone vial and uncover the needle.
- 2.** Insert needle through rubber plug with vial upside down.
- 3.** Pull back on plunger and pull down to 1 mL.
- 4.** Inject 1 mL of naloxone at a 90° angle into a large muscle (upper arm/thigh or outer buttocks).

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.

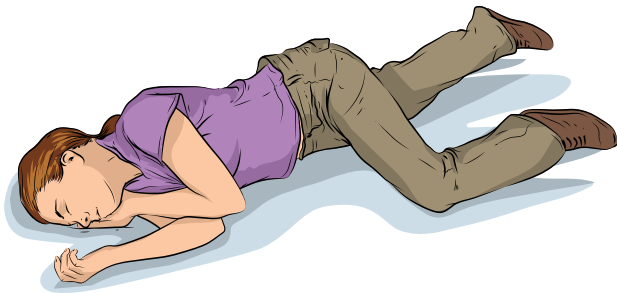




If the person is breathing normally

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.



4

Consider a second dose of naloxone

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

1

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

2

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.

5

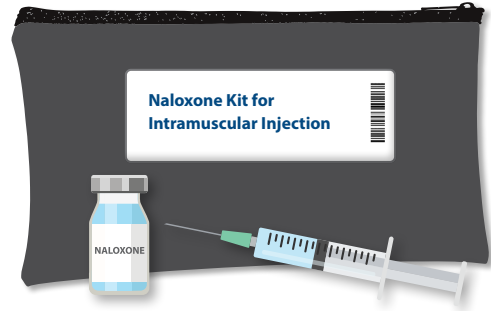
Place in recovery position

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



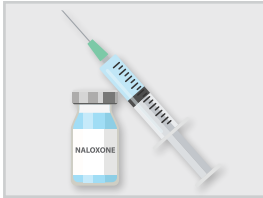
Medicine kit instructions

- **Always keep a naloxone kit with you.**
- Contact your provider as soon as possible if:
 - you use your naloxone vials
 - your naloxone vials expire
- Store naloxone kit:
 - at room temperature (59° to 77° F)
 - away from light
 - avoid extremes of heat or cold
- Throw away (dispose of) any used naloxone vials in a place that is away from children. Be sure to properly dispose of used needles, do not reuse them. Contact your pharmacy about disposal.

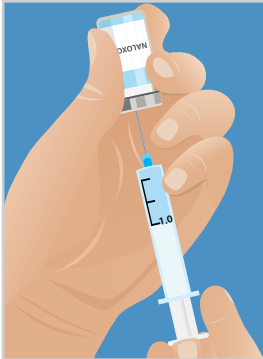


Download the video
[How to Use the VA Intramuscular Naloxone Kit](#) by scanning this QR code with your phone.

Detailed instructions for naloxone intramuscular injection



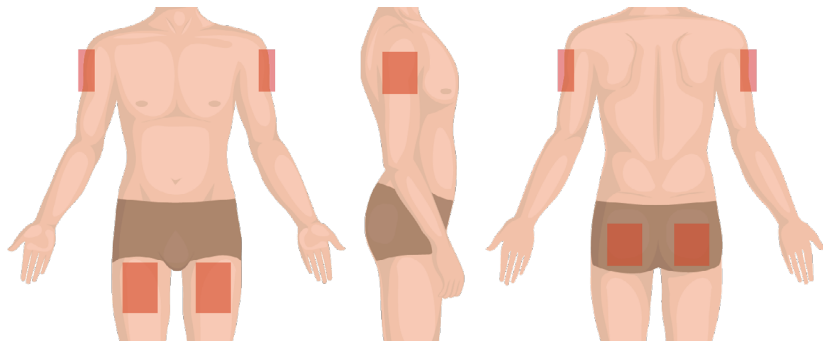
- 1** Put on gloves (optional), remove cap from naloxone vial and uncover the needle.
-



- 2** Insert the needle through the rubber plug with the vial upside down. Pull back on the plunger and pull down to 1 mL.

Detailed instructions for naloxone intramuscular injection *(continued)*

- 3** Inject 1 mL of naloxone at a 90° angle into a large muscle (upper arm/thigh or outer buttocks).



- 4** If no reaction in 2 to 3 minutes or if the person stops breathing again, give the second dose of naloxone.
- Use a new needle and new vial of naloxone.
 - Inject 1 mL of naloxone into large muscle (upper arm/thigh or outer buttocks).



Resources for help are available:



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.



CUT LINE

Resources

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: 1-800-273-TALK (8255), 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)

VA



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www.va.gov

Help is available anytime.

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- Veterans Crisis Line: 1-800-273-TALK (8255),
or text – 838255
- Never Use Alone Hotline: 1-800-484-3731
www.neverusealone.com