

# Kittitas County Prehospital Care Protocols

**SUBJECT: NALOXONE (NARCAN) (off-line Medical Control)**

**ACTION:**

Reverses the effects of opioids.

**INDICATIONS:**

**ALS -**

- Narcotic overdoses including: Morphine, Heroin, Demerol, Dilaudid, Paregoric, Percodan, Fentanyl, Methadone.
- Synthetic overdoses include: Nubain, Talwin, Stadol, Darvon.
- Alcoholic coma and also to rule out narcotics in coma of unknown etiology.

**BLS -** Respiratory compromise, abnormal breathing, RR <8, altered level of consciousness, pinpoint pupils

**CONTRAINDICATIONS:**

None when used in a life-threatening emergency.

**PRECAUTIONS:**

Administer with caution to patients dependent on narcotic as it may cause withdrawal effects. Short acting and should be augmented every 5 minutes.

**SIDE EFFECTS:**

Opioid withdrawal, agitation, combative behavior, tachycardia, pulmonary edema, nausea, vomiting, and seizures

**DOSAGE:**

**ALS - 0.4 mg-2.0 mg** up to a total dose of 10 mg (larger doses may be required to reverse Darvon overdose.)

**BLS Nasal –**

- **1 mg initial dose, up to a max. dose of 2 mg** (Mucosal Atomization Device - MAD)
- **4.0 mg nasal spray** (patient's or other emergency responder)

**EMT IM – 0.4 mg up to a total of 0.8 mg**

**ROUTE:**

**ALS -** IV, IM, or Nasal

**BLS –**

- **EMT & EMR – Nasal via MAD or Autoinjector (w/MPD approved training)**
- **EMTs w/ALS agencies (only) – IM (w/MPD approved training)**

**PEDIATRIC DOSE:**

ALS - 0.005 mg/kg