



Department of

**Mental Health &**

**Substance Abuse Services**

# 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
- Prescription rates and overdose rates in Tennessee
- Earn a certificate of completion of naloxone administration training

**Opioids** – a class of drugs that include the illegal drug heroin as well as powerful pain relievers available legally by prescription



# Examples of Opioids

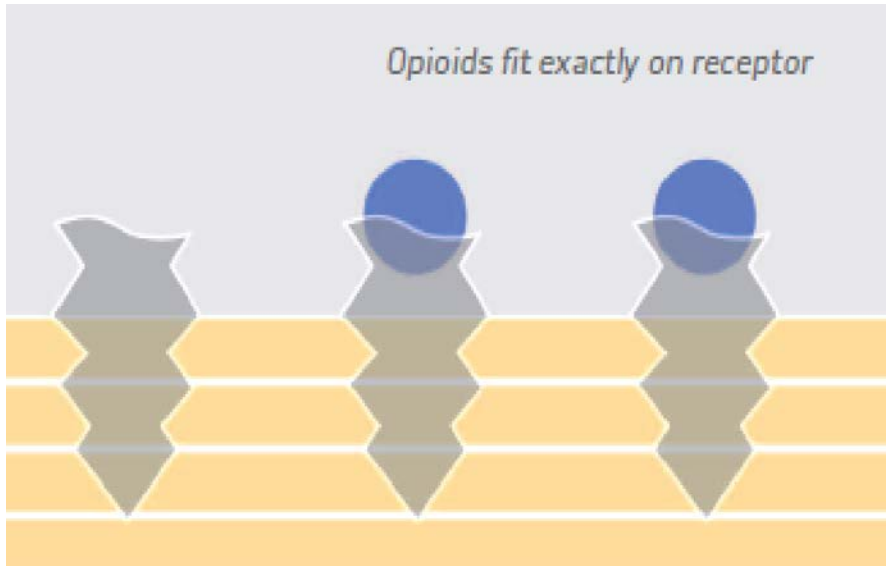
- Hydrocodone
- Morphine
- Vicodin
- Percocet
- Oxycodone
- Oxycontin
- Fentanyl
- Heroin
- Methadone



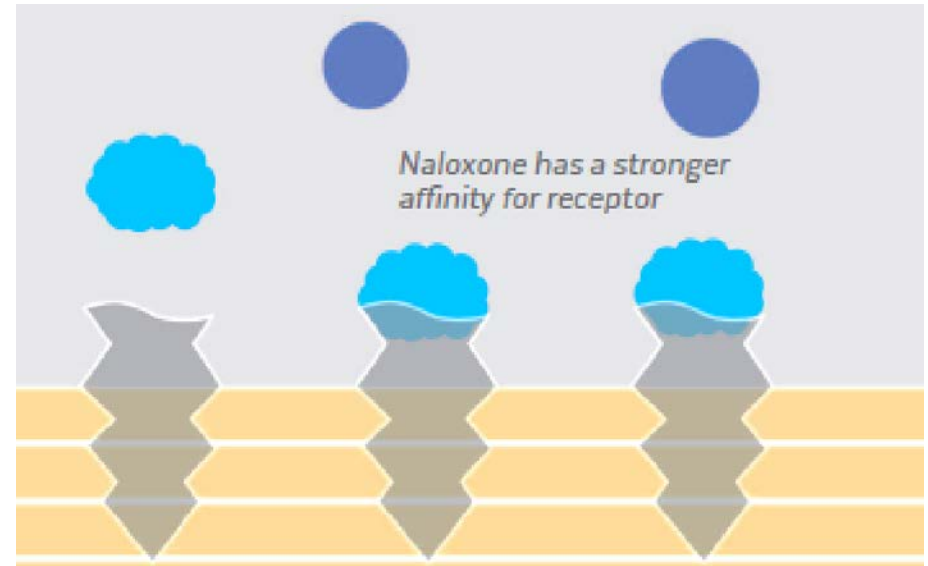
# What is Naloxone?

- 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 with a 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.

# Sites (or Receptors) in the Brain



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



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

# 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 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



# Signs & Symptoms

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

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

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

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

# What NOT to do During an Overdose

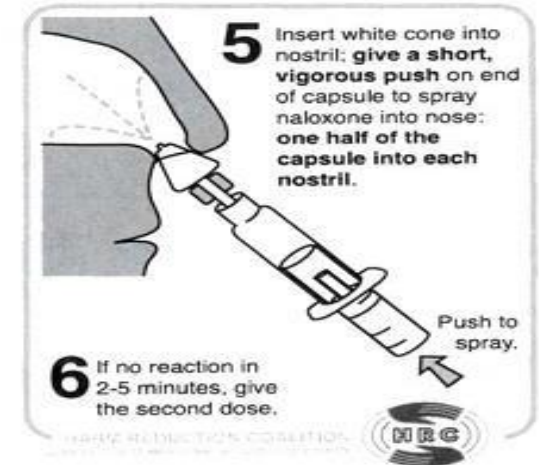
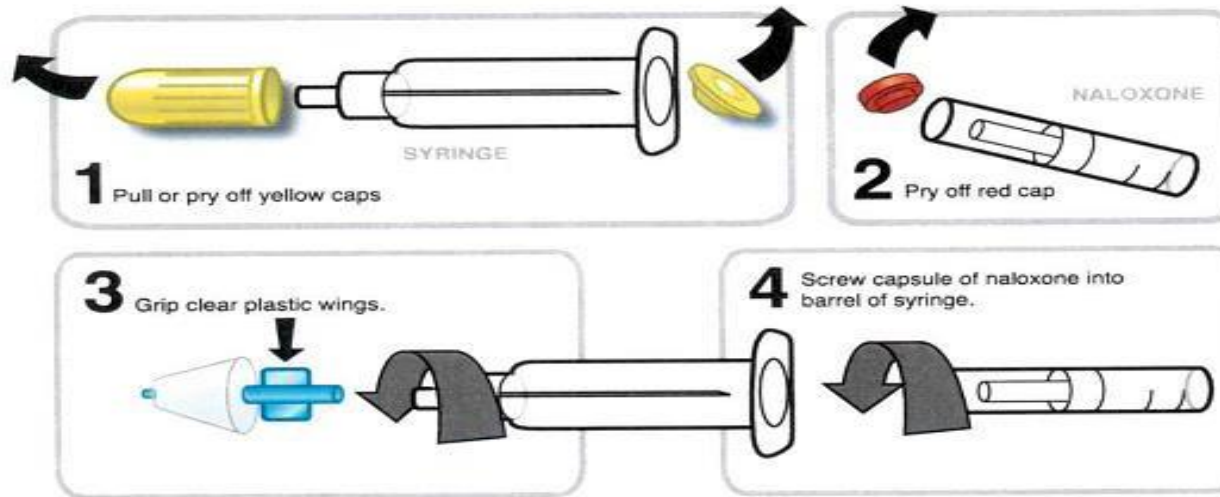
- **DO NOT** put the individual into a cold bath or shower. They could drown.
- **DO NOT** inject the person with any substance other than Naloxone (saltwater, milk, “speed”, etc.).
- This does not work.
- **DO NOT** try to make the person vomit or give them something to eat or drink. They could choke.
- **DO NOT** give over-the-counter drugs or vitamins (No-Doz, Niacin). These don't 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: Dial 911 & Give Chest Compressions**
  - 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
  - Provide support to help blood circulation and oxygen delivery
    - Place one hand over the other on the person's sternum
- **Step 3: Administer Naloxone**
  - Administer a Naloxone product per package insert instructions.

# Naloxone Nasal Atomizer

## HOW TO GIVE NASAL SPRAY NALOXONE

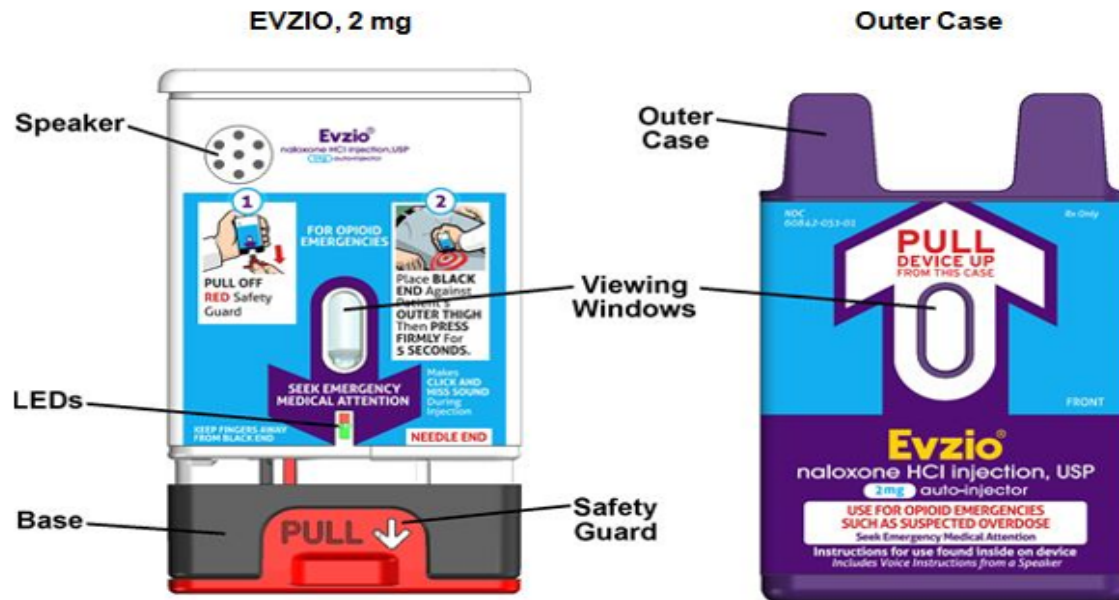


1. Take **YELLOW** caps off the needleless syringe
2. Grip the clear plastic wings and gently screw the **WHITE cone** (nasal atomizer) onto the barrel of the syringe
3. Take the **RED** cap off the naloxone vial
4. Screw the naloxone vial into the barrel of the syringe without pressing down hard
5. 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

# Auto-Injector - EVZIO

EVZIO®

Figure A

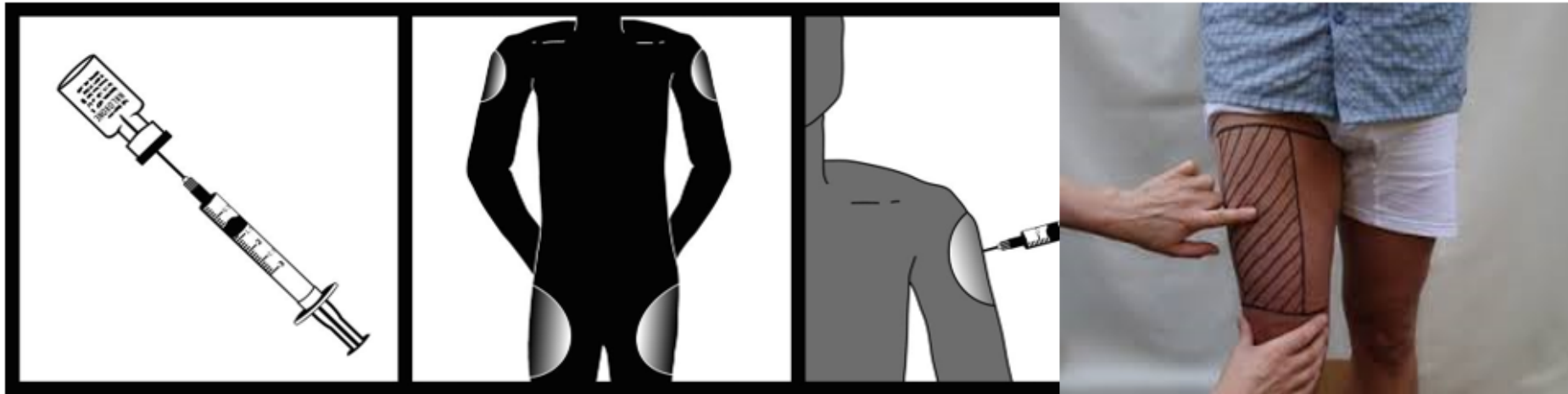


You do not need to assemble your EVZIO. EVZIO comes already assembled for use.

- 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.

# 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. <sup>[1]</sup><sub>SEP</sub>

# 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**

# Good Samaritan Law

- **“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.
  - 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.
  - Public Chapter 484, Senate bill No. 669 has removed language from the Tennessee Code Annotated, Section 63-1-156(b), that limited the immunity to an individual’s first overdose. There is no longer a limit on immunity if individuals are seeking medical assistance in the event of an overdose, or a suspected



# Painkiller Prescriptions written in Tennessee in 2017

6,879,698

Tennessee has a population  
of 6,651,194

That is equivalent to 1.03  
opioid prescriptions per  
person in Tennessee

# 2017 Tennessee Overdoses

1,776 Deaths

- Total overdose deaths in Tennessee related to Opioids in 2017

1,268

- Total Nonfatal overdoses in Tennessee in 2017

15,001

# Naloxone Training Assessment

**1. What forms of naloxone are available?**

- a.** Intranasal
- b.** Intramuscular
- c.** Both A & B
- d.** None of these

# Naloxone Training Assessment

- 2.** A second dose of naloxone may be necessary before EMS arrival.
- a.** True
  - b.** False

# Naloxone Training Assessment

- 3.** You should give the naloxone and leave the patient alone.
- a.** True
  - b.** False

# Naloxone Training Assessment

- 4. When administering intramuscular naloxone, where is the best location to give the injection?**
- a.** In the chest
  - b.** In the outer thigh
  - c.** In the arm
  - d.** In the stomach



# Naloxone Training Assessment

**5. How long does naloxone last?**

- a. 30–60 minutes
- b. 60–90 minutes
- c. 3 hours
- d. 8 hours

# Naloxone Training Assessment

**6. Naloxone is an addictive substance.**

- a. True**
- b. False**

# Naloxone Training Assessment

- 7. How do you determine when someone is overdosing?**
- a.** The patient is unresponsive even after a sternal rub.
  - b.** The patient has shallow breathing or is not breathing.
  - c.** Pale, clammy skin
  - d.** Blue skin, especially around the lips and fingernails
  - e.** Extremely small, pinpoint pupils
  - f.** All of the above

# Naloxone Training Assessment

- 8. Call 911 as soon as you suspect an overdose**
- a. True**
  - b. False**

# Naloxone Training Assessment

- 9. Chest compressions or CPR may be necessary.**
- a. True**
  - b. False**

# Naloxone Training Assessment

## 10. What is the Good Samaritan Law?

- a. Protects you from civil liability for administering naloxone to a person believed to be experiencing an overdose.
- b. Any person who, in good faith, seeks medical attention for a person experiencing or believed to be experiencing a drug overdose shall not be arrested, charged, or prosecuted for a drug violation.
- c. Any person who is experiencing a drug overdose and who in good faith seeks medical assistance for or is subject of a request for medical assistance shall not be arrested, charged, or prosecuted for a drug violation.

# What you can do to help!!!

For more  
information  
about Narcan  
contact you  
local Regional  
Overdose  
Prevention  
Specialist  
(ROPS)



- **Resources for Communities:**
- Tennessee
  - Substance Abuse Prevention:
- <https://tn.gov/behavioral-health/topic/prevention>
  - Prescription for Success:
- <https://tn.gov/behavioral-health/topic/prescription-for-success>
  - Council for Alcohol & Drug Abuse Services (CADAS)
- <http://www.cadas.org>
- Substance Abuse and Mental Health Services Administration (SAMHSA)
  - National Helpline:
- 1-800-662-HELP (4357) or 1-800-487-4889 (TDD – for hearing impaired)
  - Publications:
- <http://store.samhsa.gov> or 1-877-SAMHSA (726-4727)
- American Association for the Treatment of Opioid Dependence (AATOD)
  - Prevalence of Prescription Opioid Abuse
- <http://www.aatod.org/projectseducational-training/prevalence-of-prescription-opioid-abuse>
- National Association of State and Alcohol Drug Abuse Directors (NASADAD)
  - 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:**
- Tennessee
  - Crisis Detoxification  
<https://tn.gov/behavioral-health/article/Crisis-Detoxification>
  - Substance Abuse Services:  
<https://tn.gov/behavioral-health/section/substance-abuse-services>
  - Treatment & Recovery:  
<https://tn.gov/behavioral-health/topic/treatment-recovery>
  - Opioid Treatment Programs:  
<https://tn.gov/behavioral-health/article/opioid-treatment-programs>
  - Recovery Support Services:  
<https://tn.gov/behavioral-health/article/Recovery-Support-Services>
  - Drug Treatment Centers  
<http://nationalsubstanceabuseindex.org/tennessee/facilities.php>
- Project Lazarus  
<http://www.projectlazarus.org>
- Harm Reduction Coalition  
<http://harmreduction.org>
- Overdose Prevention Alliance  
<http://overdosepreventionalliance.org>
- Toward the Heart  
<http://www.towardtheheart.com/naloxone>
- Resources used to prepare this training:  
[http://www.accessdata.fda.gov/drugsatfda\\_docs/label/2015/208411lbl.pdf](http://www.accessdata.fda.gov/drugsatfda_docs/label/2015/208411lbl.pdf). Accessed August 4, 2016
- [overdoseprevention@pppgh.org](mailto:overdoseprevention@pppgh.org). Accessed August 2, 2016
- <https://eccguidelines.heart.org/index.php/circulation/cpr-ecc-guidelines-2/part-10-special-circumstances-of-resuscitation/>. Accessed August 2, 2016
- <https://eccguidelines.heart.org/wp-content/uploads/2015/10/2015-AHA-Guidelines-Highlights-English.pdf> accessed August 23, 2016
- <http://www.narcan.com>. Accessed August 3, 2016
- Recommended video for Naloxone: <http://prescribetoprevent.org/video/>. Accessed August 3, 2016
- 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.
- Toward the Heart: A project of the provincial harm reduction program. <http://towardtheheart.com>
- Naloxone Info. <http://www.naloxoneinfo.org>
- SAMHSA Opioid Overdose Prevention Toolkit. <http://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit-Updated-2016/SMA16-4742>
- 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.