

STOP OVERDOSE



Overdose deaths in North Dakota increased from 20 deaths in 2013 to 61 deaths in 2015.

CDC/NCHS, National Vital Statistics System, Mortality

NALOXONE

is an opioid antagonist that temporarily reverses central nervous system and respiratory depression secondary to an opioid overdose. It works specifically with the receptors affected by opioids, but is not effective against respiratory depression caused by other drugs or alcohol.

SIGNS OF OPIOID OVERDOSE

- ✓ Unresponsive or minimally responsive, with a pulse
- ✓ Breathing is slow or has stopped (agonal breathing, respiratory arrest)
- ✓ Face is clammy to touch or has lost color
- ✓ Constricted pupils
- ✓ Fingernails or lips are blue or purple
- ✓ Vomiting
- ✓ Slow heartbeat and/or low blood pressure

Substance Abuse and Mental Health Services Administration. SAMHSA Opioid Overdose Prevention Toolkit. HHS Publication No. (SMA) 16-4742. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2016.



For more information, visit
prevention.nd.gov/stopoverdose

Created in partnership with the Reducing Pharmaceutical
Narcotics in our Communities Task Force



WHEN RESPONDING TO AN OVERDOSE



Naloxone administration causes rapid opioid withdrawal which may result in the patient becoming agitated, irritable, or restless. Most patients respond to naloxone by returning to spontaneous breathing within 3-5 minutes of administration. Patients should be observed for re-emergence of overdose symptoms as often times naloxone does not last as long as the substance causing the overdose

- 1 Ensure scene safety and personal protection
- 2 Maintain open airway and provide tactile stimulation
- 3 Support the patient's breathing
- 4 Ensure appropriate resources are responding
- 5 Administer naloxone via approved route
- 6 Initiate transport as soon as possible (*don't wait for paramedic*)
- 7 Monitor response to treatment and for re-emergence of overdose symptoms

NALOXONE

Emergency Medical Responders (EMR) & Emergency Medical Technicians (EMT) can now administer intranasal spray & intramuscular auto-injector naloxone with the following requirements:

Approval by the local
Medical Director

Mandatory training
completion

Written and
signed protocols

See guidelines implemented May 1, 2016 at <http://www.ndhealth.gov/ems/Protocols.html>

Local medical directors can coordinate the training by completing the Naloxone Administration Training Request found at www.health.nd.gov/media/1248/naloxoneadministrationex.pdf and submitting it to the Division of Emergency Medical Systems (DEMS).