Overdose deaths in North Dakota increased from 20 deaths in 2013 to 68 deaths in 2017. 

**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

When Responding to an 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 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.

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).