



## Section 13: Appendix 1: Medications

### NALOXONE (NARCAN)

Pregnancy Category - C

E	EMT	E
A	AEMT	A
P	PARAMEDIC	P

<b>ACTIONS</b>	Blocks opiates from acting on opiate receptors
<b>INDICATIONS</b>	<ol style="list-style-type: none"> <li>1. Respiratory depression due to opioids</li> <li>2. Altered mental status of unknown origin</li> </ol>
<b>CONTRAINDICATIONS</b>	<ol style="list-style-type: none"> <li>1. Known hypersensitivity</li> </ol>
<b>PRECAUTIONS</b>	<ol style="list-style-type: none"> <li>1. Assist ventilations prior to and while waiting for Naloxone (Narcan) to work</li> <li>2. Should be used and titrated to desired respiratory effect, and not intended to restore full consciousness</li> <li>3. Naloxone (Narcan) may induce acute withdrawal in patients who are opiate dependant. Be prepared for a potentially combative patient</li> <li>4. The effects of Naloxone (Narcan) do not usually last as long as the effects of opiates, therefore subsequent doses may need to be administered</li> <li>5. Withdrawal may cause: pain, hypertension, agitation, irritability, and diaphoresis</li> </ol>
<b>SIDE EFFECTS</b>	Narcotic withdrawal
<b>SUPPLIED</b>	2 mg / 2 ml prefilled syringe
<b>ADULT DOSAGE</b>	<p>2 mg IVP / IO may be repeated at 2 mg IVP/IO as needed to maintain respiratory effort. 6-10 mg may be needed to reverse respiratory depression.</p> <p>2 mg IN Atomized. Max Dose = 1 ml in each nostril. Max dose 4 mg IN</p> <p><b>EMT</b></p> <p>2 mg IN Atomized. Max Dose = 1 ml in each nostril. Max dose 4 mg IN</p>
<b>PEDIATRIC DOSAGE</b>	<p>0.1 mg / kg IVP / IM / IN Atomized may be repeated as needed to maintain respiratory effort</p> <p><b>See <u>PEDIATRIC DRUG ADMINISTRATION CHART</u> for weight based administration</b></p>
<b>PROTOCOL USE</b>	<ul style="list-style-type: none"> <li>• Adult Altered Level Of Consciousness</li> <li>• Neonatal Resuscitation</li> <li>• Pediatric Altered Level Of Consciousness</li> <li>• Pediatric Head Trauma</li> </ul>