Naloxone Quick Start Guide

Use this guide to identify naloxone candidates, get them started on naloxone, and get on with your day.

This quick start guide is based on our chart, *Naloxone for Opioid Overdose (FAQs)*, which you can consult for additional information.

1. **Identify** naloxone candidates. These are generally people:
   - with a history of opioid intoxication or overdose, or who may have a history of substance abuse or nonmedical opioid use
   - taking methadone or buprenorphine for opioid use disorder
   - taking 50 mg or more of oral morphine or its equivalent daily, or a long-acting opioid
   - being switched from one opioid to another (due to risk of incomplete cross-tolerance)
   - taking an opioid and who also smoke; have a respiratory illness (e.g., COPD, sleep apnea, asthma, etc); have renal, hepatic, or heart disease; have HIV; use alcohol, or take a benzodiazepine, sedative, or antidepressant; who live in a remote location
   - who request it
   
   **Note**: many states now allow prescribing of naloxone to a caregiver or family member (see footnote), but insurance might not cover it.

2. **Talk** to the patient/caregiver about naloxone. Explain that:
   - Naloxone can save lives if the patient or someone else who gets access to the patient’s opioid (e.g., a child) overdoses. Overdoses can happen accidentally in patients not abusing opioids. Naloxone is like a seatbelt: most people don’t need it, but it’s there if they ever do need it.
   - Having naloxone available does not encourage opioid misuse, and may even reduce it.
   - Naloxone is easy to use, has a low risk of adverse effects, and is not harmful if the person didn’t really need it.
   - In the U.S., “Good Samaritan” laws are being drafted and passed to protect bystanders who administer naloxone (see footnote). Most Canadian jurisdictions also have this type of legislation.

3. **Contact** the prescriber for a naloxone prescription, if required.
   - **U.S.**: In several states, naloxone can be purchased without a prescription (see footnote).
   - **Canada**: Health Canada made naloxone nonprescription in March 2016. In most provinces, injectable naloxone is now available without a prescription.
   - In the U.S., laws are being drafted and passed to protect prescribers who prescribe naloxone and pharmacists who dispense it (see footnote).

4. **Prescribe/Dispense** naloxone.
   - Our chart, *Naloxone for Opioid Overdose (FAQs)*, has information on getting naloxone paid for, getting paid for counseling patients about naloxone (prescribers), and exactly how to write/dispense a prescription for a naloxone kit (i.e., naloxone vials and syringes or a nasal atomization device).

5. **Teach** the patient/caregiver how to use naloxone.
   - Patient instructions are included with Evzio, Narcan nasal spray, and S.O.S. Naloxone.
   - With permission from the Prescribe To Prevent group, prescription forms with tear-off patient instructions are being made available to subscribers of *Pharmacist’s Letter/Prescriber’s Letter: Naloxone for Overdose Prevention (Intramuscular)* and *Naloxone for Overdose Prevention (Intranasal)*.
   - Naloxone patient handouts and teaching point checklist from the College of Pharmacists of British Columbia are available at http://www.bcpharmacists.org/naloxone.

**Footnote**: See http://lawatlas.org/query?dataset=laws-regulating-administration-of-naloxone for information by state.