



Facts About Co-Prescribing Naloxone



In 2018, there were **314 overdose deaths** in Rhode Island. Most of these deaths were preventable.

What is Naloxone?



Naloxone is an **opioid antidote** that is safe, effective, and easy to use.

Naloxone reverses the effects of opioids:

buprenorphine, codeine, fentanyl, heroin, hydrocodone, hydromorphone, methadone, morphine, oxycodone, oxymorphone, tramadol.

When Should Naloxone Be Administered?



Naloxone should be given to any person who shows signs of an opioid overdose or when an overdose is suspected.

Overdose symptoms may include:

- Pinpoint pupils
- Respiratory depression
- Unconsciousness
- Pale, blue, or cold skin
- Abnormally low heartbeat

The effects of naloxone generally begin within **2-5 minutes** after administration, and can last approximately **30-90 minutes**.

Naloxone Product Comparison

Naloxone can be administered via intranasal, intramuscular, intravenous, or subcutaneous routes.

Product Formulation and Dispensing	Naloxone 0.4mg/mL Dispensed as two single-use vials PLUS two 3 mL syringes with 23-25 gauge 1-1.5 inch IM needles	Naloxone nasal spray 4mg/0.1 mL Dispensed as one two-pack of two 4mg/0.1 mL intranasal devices.
Directions for Use	Inject 1 mL into shoulder or thigh. Repeat after two to three minutes if there is no or minimal response.	Spray 0.1 mL into one nostril. Repeat with second device into other nostril after two to three minutes if there is no or minimal response.
Storage	Store at room temperature away from moisture and heat. Do not use the medicine if it has changed color or has particles in it.	Store at room temperature away from moisture and heat. Keep each spray pump in the box until you are ready to use.
Retail Cost*	\$	\$\$



*All health insurers in Rhode Island cover at least one type of generic naloxone with a no-cost or low-cost co-payment. The cost of naloxone is dependent on a number of factors, including the drug manufacturer, pharmacy supplier, pharmacy dispensing fee, and prescription drug plan benefits. Medicaid fully covers the cost of generic naloxone and a brand name single-step intranasal spray.

Why Co-Prescribe Naloxone?

Co-prescribing naloxone to patients has been shown to significantly reduce opioid-related overdose deaths. Prescribers must co-prescribe naloxone in three different clinical scenarios. If co-prescribing is not appropriate for the patient, the prescriber must document the reason(s) in the patient's medical record.

1 ≥ 50 MMEs/day

Prescribing an opioid, individually, or in aggregate with, other medications, greater than or equal to 50 MMEs/day.

2 Co-Prescribing a Benzodiazepine and an Opioid

Prescribing any dose of opioid when a benzodiazepine has been prescribed in the past 30 days or will be prescribed at the current visit.

3 History of Opioid Use Disorder (OUD) or Overdose

Prescribing any dose of an opioid to a patient with a prior history of opioid use disorder or overdose.

Discussion Points for Educating Patients and Caregivers

- Ask caregivers if they feel comfortable administering naloxone during an overdose in case a friend or loved one is experiencing a bad reaction to an opioid.
- Emphasize that naloxone does not replace emergency services.
- Tell patients who are taking opioids about the potential for life-threatening reactions that make breathing slow down or stop, leading to an overdose.
- Emphasize to patients that naloxone is an antidote and can save a life, just like a seatbelt or a fire extinguisher.
- Tell patients and caregivers about what to expect after giving someone naloxone.
- Talk to patients and caregivers about the importance of having naloxone on-hand.
- Review the signs and symptoms of opioid overdose and the legal protections under Rhode Island's *Good Samaritan Law*.

How to Respond to an Overdose

Stay with the person until help arrives and watch for continued signs of overdose. Never assume the overdose episode has ended if symptoms improve.



KNOW THE SIGNS AND SYMPTOMS OF AN OVERDOSE



CALL 9-1-1



SUPPORT VENTILATION



GIVE NALOXONE