

Nalmefene and Naloxone Training for Community Supervision

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Administration of Nalmefene and Naloxone

Course Objective:

- Demonstrate how to use intranasal Nalmefene and Naloxone to treat an opioid overdose.

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About Nalmefene and Naloxone

- It is regulated but not a controlled substance
- It must be obtained from a licensed prescriber
- It should be stored at room temperature and away from direct light
 - Avoid extreme temperature
- It has a limited shelf life – note the expiration date

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Intranasal Nalmefene and Naloxone



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Why Intranasal?

- The nose is an easy access point to deliver the medication
- It's painless
- The risk of a contaminated needle is eliminated

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Equipment

- Two mucosal atomizer devices
- Two does of medication
- Directions for use

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Responding to the Scene

- You might respond to a scene or discovery one.
- Safety is a priority: Isolating body substances is a top priority
- Ask witnesses / bystanders what was ingested or inhaled and when
 - Has a transdermal patch been used?
- What substance was used?

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Overdose Flow Chart

- When to use Nalmefene and Naloxone
 - Overdose suspected
 - Not responsive to painful stimuli
 - Breathing status
 - Normal or fast (Turn on Side)
 - Slow – Less 10 times a minute (Naloxone)
 - No or Gasping (Naloxone and CPR)

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Administering the Medication

- Wipe the nose if messy
- Hold the patients head with one hand
- Keep the head tilted backward as this prevents the medication from running out of the nose
- Place the atomizer in one nostril
- Gently but firmly spray one half the vial, about 1 mil, into the nose
- Spray the rest of the medication into the other nostril

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Assembly

- Open the box
- Check the expiration
- Remove the yellow caps
- Remove medication cap
- Open the atomizer
- Attach the atomizer
- Screw the medication onto the holder

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Video Demonstration

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Post Administration

- Use caution when administering Nalmefene and Naloxone to narcotic dependent patients.
- Rapid opioid withdrawal may cause nausea and vomiting and may cause combativeness.
- Roll the patient onto their side after administering dose to keep the airway clear.
- If the patient does not respond within 3-5 minutes, administer a second dose.

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Policy

- Know your department's policy and procedures
 - If there is no policy, obtain a model policy for use.
- Complete reports as soon as possible, while details are fresh in your mind.

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Questions

- What if we give it to someone who hasn't taken opioids?
 - Nothing, they will get a wet nose
- What about accidentally spraying in the air near others?
 - Won't hurt anyone else or you.
- Can we get in trouble for administering it?
 - No. It is considered "first aid or emergency treatment" and PHL protects the person administering the medication.

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Thank you

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