

Subject: ALS Medication – Paramedic
Naloxone (Narcan) ALS Administration Policy

- I. Class
 - Opioid antagonist.
- II. Indications
 - A. Opioid overdose.
 - B. Altered level of consciousness or unconsciousness of unknown etiology.
- III. Therapeutic Effects
 - Reverse's action of opioid drugs.
- IV. Contraindications
 - A. Absolute:
 - None
 - B. Relative:
 - Use caution in opioid-dependent neonate as it may precipitate seizures.
- V. Administration and Dosage
 - A. Adult
 - 1. 0.4-2.0 mg for all routes IV, IM, IO, or IN, may repeat as needed.
 - 2. IN dose is 2mg / 2cc administered 1mg/cc to each nostril or 4mg/1cc with preloaded Narcan® device per Narcan (BLS) Administration policy.
 - B. Pediatric: Greater than 20 kgs
 - 1. 0.4-2.0 mg IV, IM, IO, or IN may repeat as needed.
 - 2. IN dose is 2mg/2cc administered 1mg/cc to each nostril or 4mg/1cc with preloaded Narcan® device per Narcan (BLS) administration policy.
 - C. Neonate/Infants less than 20kg:
 - 1. 0.01mg/kg - 0.1 mg/kg IV, IM, or IO.
- VI. Special Information
 - A. Duration of the action of naloxone is shorter than the duration of narcotics, repeated doses may be necessary.
 - B. Naloxone can reverse adverse effects of Morphine and Fentanyl.
 - C. Adverse effects can include acute withdrawal symptoms, tachycardia, hypertension, dysrhythmias, nausea and vomiting or pulmonary edema.
- VII. Base Orders
 - Standing Order if no contraindications