



Patient Information Handout

Naloxone

Naloxone is a prescription medicine that temporarily reverses an opioid overdose. Your healthcare provider may choose to give you a prescription for this medication as a precaution.

You or your caregiver should discuss Naloxone with your healthcare provider if you are prescribed opioids. Naloxone is an important tool in helping to prevent deaths from opioid overdose. It has no potential for abuse.

Quick facts about Naloxone:

- Blocks the effects of opioids, and can help someone start breathing and wake up from an overdose.
- Is safe and easy to use, and has no effect on someone who has not taken opioids.
- Starts to work in two to three minutes, and lasts for 30 for 90 minutes.

In Washington state, anyone at risk for having or witnessing an opioid overdose may legally possess and administer Naloxone.

Good Samaritan laws provide protection from prosecution for possession of drugs for the victim of an overdose and for the person who calls 911.

Check

Could this be an opioid overdose? Try to wake the person up. If they don't wake up, you need to act fast.

Call 911

Call 911 immediately and tell them what is going on.

Administer

Give Naloxone and rescue breaths. If you are unsure how to administer the medicine, please read the package and instructions.

Watch & give

Wait two to three minutes after the first dose to give the medicine time to work. If the person wakes up, stay with them. If not, continue to give doses every two to three minutes until help arrives.

Stay

Stay with the person until help arrives even if the person wakes up.

How to recognize an overdose

Opioids can slow or even stop a person's breathing. All opioids put people at risk for an overdose. Learn how to recognize an opioid overdose in others. It could save a life.

Look and listen for:

- Breathing that slows or even stops.
- Gurgling, gasping, or snoring sounds.
- Clammy or cool skin.
- Lips and/or fingernails that are blue, pale, or gray.
- Pill bottles, needles, or alcohol near the person.
- If the person is not moving or unresponsive.

Try to wake the person up:

- Shake them.
- Call their name.
- Rub your knuckles hard over the person's chest bone.

***If they do not wake up, you need to act fast!
Call 911 immediately.***

All persons who have experienced an overdose should be seen as soon as possible in an emergency room or by their primary care provider. Learn more at www.stopoverdose.org

Risk Factors for Overdose

Anyone who uses prescription opioids is at risk for overdose.

Other factors that may increase risk include:

- Switching to different opioids.
- History of substance use or mental health conditions.
- Mixing opioids with other medications, drugs, or alcohol.
- Taking opioids prescribed for someone else, or other than as prescribed.
- Recent emergency medical care for opioid intoxication or overdose.
- Decreased tolerance as a result of detoxification from or other changes in opioid use.

For persons with disabilities, this document is available in other formats. Please call 800-525-0127 (TTY 711) or email civil.rights@doh.wa.gov

How Naloxone Works

Naloxone attaches to the same parts of the brain as opioids, but more strongly. Naloxone kicks off the opioids and "takes over," causing opioid withdrawal. This brings back breathing and consciousness in about two to five minutes. When Naloxone wears off in about 30 to 90 minutes, any opioids still in the brain can take over again. The person may stop breathing for a second time.

Naloxone will not reverse the effects of other substances such as alcohol, cocaine, methamphetamine, or benzodiazepines (e.g. Xanax®, Klonopin® and Valium®). However, Naloxone can still block the effect of opioids if the person has also taken one or more of these other drugs.

More Information

- [2018 Opioid Prescribing Rules](#)
- stopoverdose.org
- [Learn more about Naloxone](#)
- prevent-protect.org

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