



Indiana Statewide Naloxone Standing Order Toolkit for Naloxone Entities IC 16-42-27

Introduction

Individuals and entities that wish to obtain, administer or dispense naloxone under Indiana's Statewide Naloxone Standing Order must annually register as "Naloxone Entities" with the Indiana Department of Health on the **OptIN** website found here: <https://optin.in.gov>

The Statewide Standing Order, authorized by IC 16-42-27, is renewed each year. Naloxone Entities must at all times remain compliant with Indiana law to act under the Statewide Standing Order and abide by the attestations made on the OptIN website.

This toolkit includes: (1) substance use/dependence education, (2) training on overdose response and naloxone administration, and (3) treatment and referral information. The Toolkit may be a helpful resource for Naloxone Entities seeking compliance with IC 16-42-27.

Naloxone entities will automatically receive renewed Standing Orders and other important communications as long as they maintain current contact information on OptIN. **Naloxone Entities are required by law to annually renew their registration, comply with reporting requirements, and to update their registration throughout the year as changes occur (e.g., input changes in address, contact information, etc.).**

Note: Neither this Toolkit nor the Indiana Statewide Standing Order guarantees coverage or prior authorization under Medicaid or other insurance programs.

Naloxone Overview

Naloxone is an opioid antagonist indicated to reverse central nervous system depression in an individual experiencing an opioid-related oversedation, poisoning, or overdose. Naloxone is the generic form of Narcan. Naloxone does not cause euphoric effects, is non-addictive, and is not a drug of abuse. Since 1971, naloxone has been successfully used to reverse opioid overdoses. Naloxone is a legend drug, but not a controlled substance.

Naloxone Effects

Naloxone reverses opioid-related oversedation, poisoning, or overdose by replacing and blocking agonists from attaching to the brain's opioid receptors. Naloxone has a stronger affinity to opioid receptors than it does agonists. When administered to a person with opioids



in their system, naloxone neutralizes opioids' effect, allowing the body to return to more normal function. However, because many opioid overdoses are caused by high doses of opioid drugs or long-acting opioid drugs, rescuers may need to administer multiple doses of naloxone. For this reason and pursuant to IC 16-42-27, seeking immediate medical assistance (**calling 9-1-1**) is a required part of overdose response education.

Naloxone does not reverse drug overdoses or produce any effect in people without opioids in their system. Naloxone does not interact with any medications other than opioids. The only contraindication to administering naloxone is if the recipient has a known sensitivity or allergy to naloxone or its components, which is rare. Because opioids remain in the person's system, naloxone cannot be used to disrupt a urine screen.

The most common side effect of naloxone in someone who has taken opioids is the induction of opioid withdrawal symptoms, including tachycardia, increased blood pressure, body aches, diarrhea, fever, and irritability.

Symptoms of Opioid Overdose

A person experiencing an opioid overdose may present with some or all of the following symptoms:

- Decreased level of consciousness,
- Pinpoint pupils,
- Gurgling or choking noises,
- Limp body,
- Slowed or stopped breathing,
- Slowed or stopped heart rate,
- Blue lips and/or nail beds,
- Clammy skin, or
- Cannot be woken or cannot speak, even after:
 - Being shaken or
 - Receiving a sternal rub.

Environmental Signs of an Opioid Overdose

In addition to the physical symptoms indicating an opioid overdose, the following items may indicate an opioid overdose:

- Needles,
- Spoons (especially bent spoons) or other cookers,
- Lighters,
- Tourniquets,



- Balloons or baggies,
- Pill bottles, or
- Pills (whole or crushed).

Naloxone Administration

If you believe a person is experiencing an opioid overdose:

- 1) Confirm your belief by checking for the symptoms and signs of opioid overdose found herein
- 2) **Call 9-1-1**,
- 3) Administer naloxone,
- 4) If the person has no pulse, give CPR if you know how and are comfortable doing so,
- 5) If there is no change in 3-5 minutes after giving naloxone, administer another dose, and
- 6) Stay with the person until first responders arrive.

When administering naloxone, an individual may not be considered to be practicing medicine without a license in violation of IC 25-22.5-8-2 if the individual, acting in good faith, does the following:

- 1) Obtains naloxone from a prescriber (such as by participating in the Indiana Statewide Naloxone Standing Order);
- 2) Administers naloxone to an individual who is experiencing an apparent opioid-related overdose; and
- 3) Attempts to summon emergency services (**calls 9-1-1**) either immediately before or immediately after administering naloxone.

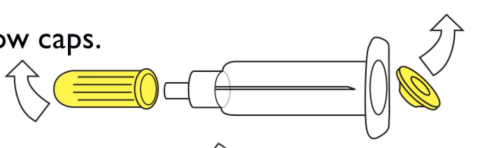
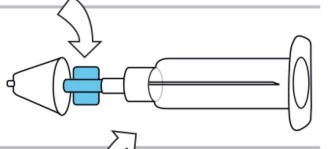
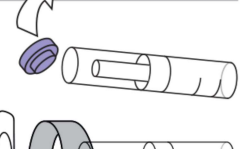
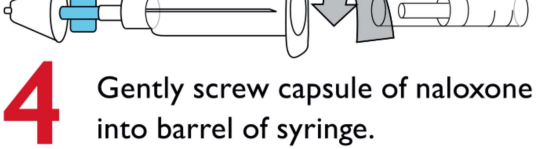

Naloxone Administration Instructions

Naloxone Rescue Kits may be designed for nasal or muscular administration. Follow the instructions below based on the type of naloxone in your Naloxone Rescue Kit.



Intranasal Naloxone:

Follow steps one through six below for administering naloxone nasal spray.

- 1** Take off yellow caps. 
- 2** Screw on white cone. 
- 3** Take purple cap off capsule of naloxone. 
- 4** Gently screw capsule of naloxone into barrel of syringe. 
- 5** Insert white cone into nostril; **give a short, strong push** on end of capsule to spray naloxone into nose: **ONE HALF OF THE CAPSULE INTO EACH NOSTRIL.** 
Push to spray.
- 6** If no reaction in 3 minutes, give second dose.





Intranasal Narcan:

Follow steps one through three below for administering Narcan nasal spray and watch the online video instructions at <https://narcan.com/en/> before encountering an overdose emergency.

- 1) Peel back the package to remove the device.
- 2) Place the tip of the nozzle in either nostril until your fingers touch the bottom of the patient's nose.
- 3) Press the plunger firmly to release the dose into the patient's nose.





Intramuscular Naloxone via Syringe:

Follow steps one through three below for administering injectable intramuscular naloxone.

- 1) Take the orange cap off the vial and stick the needle through the rubber stopper.
- 2) Withdraw the indicated amount of medication, as directed on the packaging, through the needle by pulling back on the plunger. Be sure the syringe fills with liquid and not air.
- 3) Insert the syringe into muscle in the shoulder (like a flu shot) or into the front of the thigh. Push down on the plunger to empty the syringe.





Intramuscular Naloxone via Preloaded Syringes:

Follow steps one through four below for administering intramuscular naloxone via preloaded syringes.

- 1) Take the protective caps off the vial and injector.
- 2) Thread the vial into the injector using three half turns (or until the stopper is pierced by the metal cannula).
- 3) Remove the cover from the injection tip.
- 4) Remove excess air before injecting the solution.





Intramuscular Naloxone via Auto-Injector:

Follow steps one through three below for administering naloxone via auto-injector.



Treatment Information

Several resources exist for locating treatment information:

- Indiana's Community Mental Health Centers:
https://www.in.gov/fssa/dmha/files/DMHA_SOFs_and_CMHCs.pdf
- Substance Abuse and Mental Health Services Administration (SAMHSA) Behavioral Health Treatment Services Locator: <https://findtreatment.gov/>
- SAMHSA National Helpline: 1-800-662-HELP (4357)
- Indiana Department of Health: <https://www.in.gov/health/overdose-prevention/>
- Indiana Division of Mental Health and Addiction – Family and Social Services Administration: <https://www.in.gov/fssa/dmha/>
- Connect to help by dialing **2-1-1**: <https://in211.communityos.org/>
- Overdose Lifeline: <https://www.overdoselifeline.org/>