



NALOXONE CAN REVERSE AN OPIOID OVERDOSE



**STOP THE
OPIDEMIC**

NO PRESCRIPTION NECESSARY.

UTAH LAWS ENCOURAGE NALOXONE ACCESS AND USE

Utah laws allow pharmacists to dispense naloxone without a prescription.

Anyone can get naloxone, including family members, friends, and caregivers of at-risk individuals. In short, both individuals taking opioids and anyone who could assist someone experiencing an overdose can get this life-saving antidote.

GOOD SAMARITAN ACT

If you see or come across an overdose or someone with overdose symptoms, you can administer naloxone without fear of legal liability.

OVERDOSE HELP



Call 9-1-1, get medical help, or call the Utah Poison Control Center during an overdose event.

OPIDEMIC.ORG

OVERDOSE SIGNS & SYMPTOMS

KNOW WHAT TO LOOK FOR

People overdosing may exhibit any or all of these signs:

Small, pinpoint pupils

Blue/purple fingernails and lips

Won't wake up, limp body

Shallow or stopped breathing

Faint heartbeat

Gurgling, choking noise

ALWAYS ACT

Even if you're not sure someone is overdosing, act as if their life depended on it. Call 9-1-1, administer naloxone if available, and perform rescue breathing. Don't leave them alone!

WHAT IS NALOXONE?

Naloxone is a life-saving medication that can reverse an opioid overdose.

- ✓ Naloxone knocks opioids off the receptors in the brain for 30 to 90 minutes. This reverses the overdose and allows the person to breathe, providing enough time for emergency personnel to arrive.
- ✓ Naloxone only works with opioids such as oxycodone, hydrocodone, fentanyl, methadone, codeine, or heroin.
- ✓ Naloxone has no effect if a person does not have opioids in their body.
- ✓ Naloxone can be administered by anyone.
- ✓ Naloxone has been used for more than 40 years.
- ✓ Naloxone is safe and has little to no side effects.
- ✓ Naloxone is not addictive and has no potential for abuse.
- ✓ Naloxone is not a controlled substance.
- ✓ Individuals who regularly use opioids may experience withdrawal symptoms if given naloxone. These symptoms may be uncomfortable, but are almost always not life threatening.

WHO IS AT RISK?

People taking opioids can stop breathing and die.



- People who have previously overdosed.
- People who have had a period of abstinence from taking opioids, such as recently being released from jail/prison or detox programs.
- People taking high doses of opioids.
- People taking other substances with opioids, such as anti-anxiety medications, sleep aids, or alcohol.
- People taking opioids for a long period of time.
- People who use heroin.

Additional risk factors at naloxone.utah.gov/prescribers

WARNING

If you or a loved one has been prescribed an opioid, or if you know someone at risk, you should have naloxone. Naloxone may be obtained through your local pharmacy or a community outreach provider. Find a location near you at naloxone.utah.gov.

KNOW WHAT TO DO.

- 1 Call 9-1-1.** A person may overdose again if naloxone wears off.
- 2 Try to wake the person.** Yell his/her name and rub hard in the middle of their chest (sternal rub).
- 3 Check for breathing and pulse.**
- 4 Administer naloxone, if available.***
Naloxone may be sprayed in the nose or injected into the muscle.
 - NASAL SPRAY**
Insert in either nostril until your fingers touch the bottom of the person's nose. Press firmly on plunger to administer.
 -  Narcan®
 -  Generic
 - Screw parts together. Use one full vial. Spray half (1 cc/mL) in each nostril.
 - INTRAMUSCULAR ADMINISTRATION**
Inject 1 cc/mL into large muscle.
- 5 Try rescue breathing.***
- 6 Prevent choking.** Put the person on their side.
- 7 Administer 2nd dose of naloxone** after 3 minutes if the person does not wake.
- 8 Don't leave.** Stay until an ambulance arrives.

*Training videos at naloxone.utah.gov/media