



From SAMHSA's Opioid Overdose Prevention Toolkit: Information for First Responders

If you need to help someone who has overdosed on heroin or another opiate drug, follow these five important steps:

1. **Call for Help by Dialing 911.** Tell the operator that someone is not breathing; provide the address and a clear description of your location.
2. **Check for signs of Opioid Overdose**
 - a. Extreme sleepiness, inability to awaken verbally or upon sternal rub
 - b. Breathing problems ranging from slow to shallow breathing
 - c. Fingernails or lips turning blue/purple
 - d. Extremely small, pinpoint pupils
 - e. Slow heartbeat and/or low blood pressure

Signs of over-medication, which may progress to overdose, include:

- Unusual sleepiness, drowsiness or difficulty staying awake despite loud verbal stimulus or vigorous sternal rub
- Mental confusion; slurred speech; intoxicated behavior
- Slow or shallow breathing
- Extremely small pinpoint pupils, although normal-size pupils do not exclude opioid overdose
- Slow heartbeat; low blood pressure
- Difficulty waking the person from sleep

3. **Support the Person's Breathing**

- a. Ventilator support is an important intervention and may be lifesaving on its own. Patients should be ventilated with oxygen prior to administration of naloxone. In situations where oxygen is not available, rescue breathing can be very effective in supporting respiration. Rescue breathing for adults involves the following steps:
 - i. Be sure the person's airway is clear
 - ii. Place one hand on the person's chin, tilt the head back and pinch the nose closed
 - iii. Place your mouth over the person's mouth to make a seal and give two slow breaths
 - iv. The person's chest should rise, but not the stomach
 - v. Follow up with one breath every five seconds

4. Administer Naloxone

- a. Naloxone can be given by intranasal spray.
- b. Duration of effect is 20 to 90 minutes depending on dose, route of administration and overdose symptoms. The goal of naloxone therapy should be to restore adequate spontaneous breathing, but not necessarily complete arousal.
- c. More than one dose of naloxone may be needed to revive someone who is overdosing.
- d. Withdrawal triggered by naloxone can feel unpleasant. As a result, some people become agitated or combative. If this happens, help them to remain calm.

5. Monitor the Person's Response and Seek Emergency Care Quickly

- a. All patients should be monitored for recurrence of signs and symptoms of opioid toxicity for at least four hours from the last dose of naloxone. Patients who have overdosed on long-acting opioids should receive more prolonged monitoring.
- b. Most patients respond by returning to spontaneous breathing. The response generally occurs within three to five minutes of naloxone administration. (Continue rescue breathing while waiting for the naloxone to take effect.)
- c. **Naloxone will continue to work for 30 to 90 minutes, but after that time, overdose symptoms may return. Therefore it is essential to get the person to an emergency department or other source of medical care as quickly as possible, even if he or she revives after the initial dose of naloxone and seems to feel better.**
- d. Watch for signs of opioid withdrawal. Signs and symptoms of opioid withdrawal in an individual who is physically dependent on opioids may include, but are not limited to: body aches, diarrhea, tachycardia, fever, runny nose, sneezing, piloerection, sweating, yawning, nausea or vomiting, nervousness, restlessness or irritability, shivering or trembling, abdominal cramps, weakness and increased blood pressure.

Summary: Dos and Don'ts in Responding to Opioid Overdose

- *Do* support the person's breathing by administering oxygen or performing rescue breathing.
- *Do* administer naloxone.
- *Do* put the person in the "recovery position" -- on the side -- if he or she is breathing independently.
- *Do* stay with the person and keep him/her warm.
- *Don't* slap or try to forcefully stimulate the person. It only will cause further injury
- *Don't* put the person into a cold bath or shower. This increases the risk of falling, drowning or going into shock.
- *Don't* inject the person with any substance (saltwater, milk, "speed," heroin, etc.). The only safe and appropriate treatment is naloxone.
- *Don't* try to make the person vomit drugs that he or she may have swallowed. Choking or inhaling vomit into the lungs can cause fatal injury.

Note: All naloxone products have an expiration date. It is important to check this date and obtain replacement naloxone as needed.