 Department of Health Government of Nunavut		Medical Directives and Delegation	
		Community Health Nursing	
TITLE:		SECTION:	POLICY NUMBER:
Dispensing of Naloxone Kits		Pharmacy	09-026-00
EFFECTIVE DATE:	REVIEW DUE:	REPLACES NUMBER:	NUMBER OF PAGES:
Jan 2025	Jan 2028	NEW	11
APPLIES TO:			
Registered Nurses, Licensed Practical Nurses, Nurse Practitioners, Registered Psychiatric Nurses, Pharmacists, Physicians and Registered Midwives.			

1. BACKGROUND:

The Department of Health (Health) is committed to providing Nunavummiut with treatment options that align with current research and best practices.

Harm reduction involves a public health approach to support the health and wellbeing of those who suffer from addiction. Naloxone is a safe antidote to opioid overdose and can prevent death or brain damage from lack of oxygen during an opioid overdose.

This medical directive provides an authorizing mechanism for Registered Nurses (RNs), Registered Psychiatric Nurses (RPNs), Advanced Care Paramedics (ACPs) and Licensed Practical Nurses (LPNs) to dispense one Naloxone kit to those who are at risk of an opioid overdose or to those who may be in a position to assist a person at risk of an opioid overdose (i.e., family member or friend). The protocol for dispensing Naloxone Kits will also be reviewed.

2. MEDICAL DIRECTIVE:

- 2.1. RNs, RPNs, ACPs and LPNs may dispense one Naloxone kit, either intranasal or injection, to a person at risk of opioid overdose or to a person who is in a position to assist another who is at risk of opioid overdose.
- 2.2. It is within the scope of practice for Registered Midwives (RMs), Nurses Practitioners (NPs), Pharmacists and Physicians to independently dispense Naloxone Kits, but they are required to follow the procedure outlined in Section 5.
- 2.3. Health Care Providers (HCP) are not permitted to dispense Naloxone kits to businesses and organizations, with the exception of RCMP if they are out of stock.

3. AUTHORIZED IMPLEMENTERS:

- 3.1. RNs, LPNs, RPNs and ACPs working in Community Health Centres; Community Home Care;

Iqaluit Health Services; Regional Public Health Units; Akausisarvik.

- 3.2. RNs, ACPs, LPNs and RPNs who possess the knowledge, skill, and judgment to do so. The implementer is required to have an understanding of how and when to use the kits along with the ability to provide all the appropriate counselling to the individual as identified in 5.3.
- 3.3. Sub-delegation is not permitted to another health care provider or staff.

4. DEFINITIONS:

- 4.1. Naloxone: Is an antidote to opioid overdose. Naloxone reverses the effects of opioids, restoring normal breathing and consciousness. Giving Naloxone can prevent death or brain damage from lack of oxygen during an opioid overdose.
- 4.2. Naloxone Kit: This is a medical kit that is provided to anyone at risk or in a position to assist a person at risk of opioid overdose. Naloxone kits are provided free of charge. There are two types of naloxone kits that are currently available in Nunavut: Intranasal Naloxone Kit and Injectable Naloxone Kit.

Nunavut Naloxone Kits Contain:

- Intranasal Naloxone Kit: 2 Naloxone 4 mg Nasal spray devices, 1 pair of gloves, 1 CPR Face Shield, GN Factsheet: How to Use Naloxone.
 - Injectable Naloxone Kit: 2 ampoules of Naloxone 0.4 mg/mL, 25G Syringes, alcohol swabs, ampoule breakers, gloves, a one-way breathing mask, GN Factsheet: How to use Naloxone.
- 4.3. Good Samaritan Drug Overdose Act: Provides legal protection for individuals who seek emergency help during an overdose, or who witness an overdose.
 - 4.4. Health Care Provider (HCP): Advanced Care Paramedic, Licensed Practical Nurse, Registered Nurse, Registered Psychiatric Nurse, Nurse Practitioner, Pharmacist, Physician, Registered Midwife.
 - 4.5. Individuals at Risk of an Overdose: All patients receiving an opioid for medical use or who are using opioids for non-medical use are at risk of overdose and should be offered a Naloxone Kit.

5. PROCEDURE:

- 5.1. A Naloxone kit may be dispensed to a person who is using opioids or to a person who may be in a position to assist a person at risk of an opioid overdose. Anyone who requests a kit may receive one.
- 5.2. Prior to distribution, the HCP will check the expiry date of the Naloxone kit. A Naloxone kit within 2 months of expiry will not be distributed for home use. Discard the expired Naloxone kits as per pharmacy protocol.
- 5.3. Prior to distribution of the Naloxone kit the HCP will offer to review with the recipient: the contents of the kit, safe storage of the kit, when to give Naloxone, administration steps and aftercare post Naloxone administration. Refer to **Appendix A for Naloxone Kits Information Sheet for Nunavut Health Care Professionals** and **Appendix B for the Patient Naloxone Fact Sheet**.
 - 5.3.1 A person who declines a HCP review of the Naloxone Kit is still eligible to have a Kit dispensed to them.
- 5.4. Any patient who presents with an opioid overdose or in withdrawal will be immediately referred to Emergency Services (either in Hospital or Community Health Centre) to a Community Health Nurse (CHN), Nurse Practitioner (NP), Advanced Care Paramedic (ACP) or Physician.

- 5.4.1 CHNs will refer to the FNIHB guidelines on management of substance use disorders and opioid overdose management and consult an MD/NP as indicated.
- 5.4.2 ACPs in Community Health Centres will consult a Physician/NP as per scope of practice.

6. DOCUMENTATION:

- 6.1. All HCPs who dispense a Naloxone kit will document the distribution of the kit on **Appendix C: Government of Nunavut Naloxone Dispensing Record**. The Naloxone Dispensing Record does not include patient information.
- 6.2. If there is ongoing care provided to the patient regarding opioid risk, documentation is required in the patient's electronic health record.
- 6.3. Details of care provided will be documented in order to provide a record of service and standards of care provided. This should include documentation that the client was offered training on how to recognize and respond to opioid toxicity and safe administration of naloxone and whether they accepted and received such training.

7. RELATED POLICIES, PROTOCOLS AND LEGISLATION:

Policy 06-008-00: Documentation Standards

Policy 09-006-00: Administering or Dispensing Pharmaceuticals – Documentation

Policy 09-006-00: Dispensing Medications

Policy 09-002-00: RN Initiated Drug Therapy


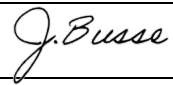
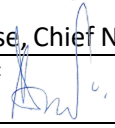
8. REFERENCES:

Federal, provincial, and territorial Special Advisory Committee on the Epidemic of Opioid Overdoses. Opioid- and Stimulant-related Harms in Canada. Ottawa: Public Health Agency of Canada; December 2023. <https://health-infobase.canada.ca/substance-related-harms/opioids-stimulants/>

Health Canada. (2024 August, 06). [About the Good Samaritan Drug Overdose Act - Canada.ca](https://www.canada.ca/en/health-canada/services/drugs-drugs/overdose-act.html) (accessed September 12, 2024).

Indigenous Services Canada (2018). *Opioid Related Disorders*. FNIHB Clinical Practice Guidelines for Nurses in Primary Care. Accessed March 20, 2024 via [Opioid Related Disorders - 2018 1.pdf \(onehealth.ca\)](#) Freedman, S.B., Uleryk, E., Rumantir, M. & Finkelstein, Yaron. Ondansetron and the Risk of Cardiac Arrhythmias: A systematic Review and Postmarketing Analysis. *Annals of Emergency Medicine*. 2014; 64(1): 19-25

9. APPROVALS:

Approved By: 	Date: 02-Apr-2025
Jennifer Berry, Deputy Minister – Department of Health	
Approved By: 	Date: April 5, 2025
Janet Busse, Chief Nursing Officer	
Approved By: 	Date: <u>Date:</u> April 3, 2025
Dr. Francois de Wet, Medical Chief of Staff	

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Please contact the Continuous Quality Improvement Program, Government of Nunavut, HealthCQI@gov.nu.ca

APPENDIX A: NALOXONE KITS – INFORMATION SHEET FOR NUNAVUT HEALTH CARE PROFESSIONALS

Naloxone Kits contain:

Intranasal Kits	Injectable Kits
<ol style="list-style-type: none"> 1) 2 Naloxone 4 mg (Narcan™) Nasal Spray devices 2) 1 pair of gloves 3) 1 CPR Face Shield 4) Factsheet: How to Use Naloxone in Inuktitut, English, Inuinnaqtun and French 	<ol style="list-style-type: none"> 1) 2 ampoules of Naloxone 0.4 mg/mL 2) 2 x 3 mL VanishPoint 25G 1" syringes 3) 2 alcohol swabs 4) 2 ampoule breakers 5) 2 pairs of nitrile gloves 6) A one-way rescue breathing mask 7) Factsheet: How to Use Naloxone in Inuktitut, English, Inuinnaqtun and French

Where are Naloxone Kits available?

- Iqaluit: Public Health and the Qikiqtani General Hospital (QGH) Emergency Department and Clinics.
- Rankin Inlet: Public Health and the Kivalliq Health Centre (KHC).
- Communities: Health Centres.

Where are the Naloxone Kits ordered from?

- Government of Nunavut Regional Pharmacies (QGH, Rankin Inlet and Cambridge Bay).

What is naloxone?

Naloxone, or Narcan™, is an antidote to opioid overdose. Taking too much of opioid drugs (e.g., morphine, hydromorphone, heroin, methadone, oxycodone and fentanyl) can make breathing slow down or stop. Naloxone reverses this, restoring normal breathing and consciousness. Giving naloxone can prevent death or brain damage from lack of oxygen during an opioid overdose. It does not work for non-opioid overdoses (e.g., cocaine, ecstasy, GHB or alcohol). However, if an overdose involves multiple substances, including opioids, naloxone helps by temporarily removing the opioid from the equation.

How is naloxone given?

Naloxone may be given by intramuscular injection (using injectable naloxone) or by intranasal administration (using Narcan™ nasal spray).

When should naloxone be administered?

Respiratory and/or central nervous system depression in a situation where opioids may be present.

- Naloxone should be given if the patient is excessively sleepy and cannot be roused with a loud voice or sternal rub.
- Other indications include slow, shallow, or no respirations, or pinpoint pupils in a patient who is difficult to rouse.
- Other signs of overdose include blue or purple fingernails or lips.
- The patient may also have a slow heartbeat and/or low blood pressure.

How does naloxone work?

Both naloxone and opioids bind to the same sites in the brain, and these sites affect breathing. However, naloxone binds more tightly than the opioids, knocking the opioids off the receptors and restoring breathing. Naloxone acts fast (usually within 5 minutes), and the protective effect lasts for 30 to 90 minutes. The body will have broken down some of the opioids over time, but naloxone does not destroy the opioids. So, if large doses, strong opioids (e.g., fentanyl), or long-acting opioids (e.g., methadone) are involved, or the individual has liver damage, another dose of naloxone may be needed. It is recommended to use two doses of naloxone, and it is always important to seek medical help when someone overdoses.

Can naloxone be harmful or be abused?

Naloxone does nothing in someone that has not taken opioids. Naloxone cannot get a person high and does not encourage opioid use. While naloxone is a very safe drug, it may cause individuals dependent on opioids to go into withdrawal.

Are there risks associated with using naloxone?

The only contraindication to naloxone is hypersensitivity. Naloxone may cause opioid withdrawal in those with opioid dependence. Withdrawal symptoms include pain, high blood pressure, sweating, agitation and irritability. In addition, it can be unsettling to come out of an overdose unaware of what has happened.

What information should be reviewed with the person requesting the Naloxone Kit?

Review the contents of the kit, the information on the factsheet and the following:

How to Respond to an Opioid Overdose		
	Intranasal Naloxone Kits	Injectable Naloxone Kits
1	UNRESPONSIVE?	<ul style="list-style-type: none">• Stimulate with noise (shout, use their name).• Touch (Squeeze their fingertips or the muscle between the neck and shoulder), remember, tell person what you are doing before you touch them.
2	CALL FOR MEDICAL HELP (Health Centre or Hospital)	<ul style="list-style-type: none">• Put person in the recovery position if you have to leave them alone.
3	CLEAR AIRWAY & VENTILATE	<ul style="list-style-type: none">• Clear airway (removing anything from their mouth), tilt head, lift chin.• Pinch nose and give 2 breaths.• Continue 1 breath every 5 seconds until person is breathing again. ***IF THERE IS NO PULSE, AND IF TRAINED, BEGIN CHEST COMPRESSIONS***
4	GIVE 1 st DOSE	<ul style="list-style-type: none">• Remove device from packaging. Do not test the device. There is only one dose per device.• Tilt the person's head back and provide support under their neck with your hand.• Hold the device with your thumb on the bottom of the plunger. Put your first and middle fingers on either side of the nozzle.• Gently insert the tip of the nozzle into one nostril. Your fingers should be right up against the nose.• Press the plunger firmly with your thumb to give the dose.• Remove the device from the nostril. <ul style="list-style-type: none">• Tap ampoule to send all liquid to the bottom. Push top away from you to snap open the ampoule (may use ampoule breaker).• Pull plunger to draw up liquid.• Inject into a large muscle (thigh, upper arm, or buttock).• Inject at 90°, push plunger until you hear a click (needle will retract).
5	EVALUATE & GIVE 2 nd DOSE IF NEEDED	<ul style="list-style-type: none">• Continue to give breaths until they respond (are breathing again on their own).• After 2-3 minutes, if still unresponsive, give a 2nd dose of naloxone.• Continue breaths until the person is breathing on their own or until medical help arrives.• ***IF THERE IS NO PULSE, AND IF TRAINED, BEGIN CHEST COMPRESSIONS***
6	AFTERCARE	<ul style="list-style-type: none">• Naloxone wears off in 30-90 minutes.• The person will not remember for at least 2 hours and do NOT allow them to take more opioids (could overdose again).• Stay with person until medical assistance arrives.

How should the Naloxone Kits be stored?

At room temperature and protected from light. As with all medications, the naloxone kit should be safely stored away from children, but in a location that can be easily found in an emergency. Patients should be aware of the expiry date of their naloxone so that it may be replaced before it expires.

APPENDIX B: PATIENT NALOXONE FACT SHEETS

Fact Sheet

How to Use Naloxone

What is naloxone and why do you need it?

Naloxone is an antidote to opioid overdose. Taking too much of opioid drugs (like morphine, oxycodone, methadone, heroin or fentanyl) can slow down or stop breathing. Naloxone restores normal breathing and consciousness within one to 5 minutes of injection. Giving naloxone can prevent death or brain damage from lack of oxygen during an opioid overdose. Naloxone can be injected through clothing into the big muscle of the thigh, arm or buttocks.

Signs of Opioid Overdose



Not responsive to noise or touch.



Breathing will be slow or absent.



Choking, gurgling or snoring sounds.



Lips or nails are blue, skin is cold or clammy.



Pupils are tiny.

Overdose is a medical emergency. **Immediately contact your local health centre or hospital!**

How to use Naloxone

1



Tap ampoule to send all liquid to the bottom. Push top away from you to snap open the ampoule (may use ampoule breaker).

2



Pull plunger to draw up liquid

3



Inject into muscle. Press plunger all the way down to trigger safety (retraction).

What to do

Follow the following steps below to respond.



If the person must be left alone at any time, put them in the recovery position.



Stimulate
Call for help.



Airway



Ventilate



Evaluate



Inject into Muscle



Evaluate
Second Dose?

How to give breaths

1



Tilt the head back to open airway.

2



Pinch nose. Cover mouth with mask or clothing.

3

Give one breath every 5 seconds.

Breathing can slow down during an overdose but the heart is probably still breathing. Give breaths to keep them alive.



How to Use Naloxone Fact Sheet - July 2018 - English

Adapted for use with the permission from the College of Pharmacists of British Columbia

Department of Health

Naunaitkutaq Titiraq

Qanuqtut Aturiami Naloxone-mik

Hunaukmat naloxone qanuqtutlu ihariagiviuk?

Naloxone havautiuyuq opioid-tuvallaarumik. Opioid aangayaaqtuvallaarumik (morphine-tut, oxycodone-tut, methadone-tut, heroin-tut uuminngaluuniit fentanyl) kayumiititpaktuq anirhaaqninganik anirhaaruqtiqluguluuniit. Naloxone ihuarhapkaivagaa anirhaaliriami tupapkallunilu taimaa 1minitsimik 5minitsimikluuniit kapurhiraangat taafumanik. Tunigiami naloxone-mik tuquttalidjutauyuq qaritauyarlinairutiuyuqlu anirhaaruiraangata opioid-tuvallaaraangata. Naloxone kapuqtauvaktut humaangittuq aanuraatigut angiyunut nukungamut ilutakkut, talliqmut nulukkuluuniit.

Naunaitkutat Opioid-tuvallaarumik



Kiulimaittuq
nivyaqtunik
kahaktaugumiluuniit.



Kayumiittunuamik
anirhaalirumi
anirhaaruknaiqluniluuniit.



Tupilirumi, nuvanga
anirhaaktilluni
tuhaqnaqhiuq
qamnguqtuqluuniit.



Umlrungit kuingilluuniit
argyiktanguqhutik,
uvininnga niglaqhuni
kinipavyaktuqluuniit.

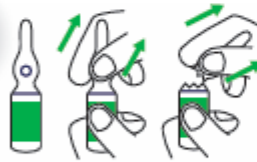


Takuvunga
mikkangurhutik.

Havautituqpallaarniq munarhitkunnut qilamtuqatauviuyuq

Qilamtuqluni uqaqatigilugu munarhitkut aaniravilluuniit

1



Apkaluqtaqlugu mikkaq hikuliannuaq tamaat imalik ataanut. Taadjarlugu matua ahinut iliknit angmariami mikkaq hikuliannuaq (aturlugu mikkaq hikuliannuaq ahiruqtinganik).

2



Piiaqlugu mitqutaa
pigiami imanganik

3



Kapuqlugu
nukinganut.
Mitqutaa
kapuqlugu
tamaat
nutqarutinganut
(piirutaa).

Qanuriliurniaqqinga

Maliklugu hapkuat
talvanga piyakhat
qanuriliuriami.



Tamna inuk
ikhinnarahaukunni,
nallaqtiqlugu.



Tupapahuqtlugu
Hivayarlutit
ikayuqtuuyumayarnik



Anirhaarvinge



Anirhaaktillugu



Natunayarlugu



Kapututugu
Nukinganut



Natunayarlugu
Kapututugu?

Qanuqtut anirhaaktinniaqigu

1



Niaqunga taunungarlugu
iggianga angmaumariami
anirhaaliriami.

2



Qingangit umiklugit.
Qania matulugu kalikumik
aanuraamikuuniit.

3

Anirhaaktutit
atauhimik
qaninninganut taimaa
tallimat tigligturniq
qaangihakpat.

Kayumiimaqtuq anirhaaktuq
taimaa havautituqpallaarumi
kihimi, uumataa tigligtaqtuq
- Anirhaaktutit qaninninganut
anirhaaliriami.



How to Use Naloxone Fact Sheet - July 2018 - Inuinnaqtun

Ihuarhaqhimayuq atuqtukhaq angikpata ihariaqpaalivinganik Havautitavringit British Columbia-mut.

Department of Health

Fiche d'information

Comment utiliser la naloxone

Qu'est-ce que la naloxone, et à quoi sert-elle?

La naloxone est un antidote en cas de surdose d'opioïdes. La surconsommation d'opioïdes (p. ex., morphine, oxycodone, méthadone, héroïne ou fentanyl) peut ralentir ou faire cesser la respiration. L'injection de naloxone permet de rétablir la respiration normale et la conscience en 1 à 5 minutes, ce qui contribue à prévenir les dommages au cerveau, voire les décès, causés par le manque d'oxygène lors d'une surdose. La naloxone peut être injectée à travers les vêtements dans le gros muscle de la cuisse, du bras ou de la fesse.

Signes de surdose d'opioïdes



Aucune réaction
au bruit ou au
toucher.



Respiration lente
ou absente.



Bruits d'étouffement,
gargouillements ou
ronflements.



Lèvres ou ongles
bleutés, peau
froide ou moite.



Contraction des
pupilles.

La surdose est une urgence médicale. **Communiquez immédiatement avec votre centre de santé ou votre hôpital!**

1



Tapoter l'ampoule pour faire descendre le liquide. Pousser sur le dessus de l'ampoule pour l'ouvrir (utiliser l'ouvre-ampoule).

2



Insérer l'aiguille et tirer le piston pour prélever le liquide.

3



Injecter dans le muscle. Enfoncer le piston jusqu'au bout pour déclencher le mécanisme de sécurité (rétraction).

Comment utiliser la naloxone

Follow the following steps below to respond.

Ce qu'il faut faire



Si, à n'importe quel moment, vous devez laisser la personne seule, placez-la en position de rétablissement.



Stimulez
Appelez de
l'aide.



Dégagez
les voies
respiratoires



Insufflez



Évaluez



Injectez
dans le
muscle



Évaluez
Deuxième dose?

Comment administrer les insufflations

1



Inclinez sa tête vers l'arrière pour dégager ses voies respiratoires.

2



Pincez son nez. Couvrez sa bouche à l'aide d'un masque ou d'un vêtement.

3

Donnez 1 insufflation toutes les 5 secondes.

Lors d'une surdose, il se peut que la respiration ralentisse, mais le cœur continue habituellement de battre. Administrez les insufflations pour garder la victime en vie.



How to Use Naloxone Fact Sheet - July 2018 - French

Fiche adaptée aux fins d'utilisation avec la permission du College of Pharmacists of British Columbia.

Department of Health

Factsheet: How to Use Naloxone

What is naloxone and why do you need it?

Naloxone is an antidote to opioid overdose. Taking too much of opioid drugs (like morphine, hydromorphone, oxycodone, methadone, heroin or fentanyl) can slow down or stop breathing. Naloxone restores normal breathing and consciousness within 2 to 5 minutes of inhalation. Giving naloxone can prevent death or brain damage from lack of oxygen during an opioid overdose.

Signs of Opioid Overdose



Not moving
and can't be
woken



Slow or not
breathing



Blue lips and
nails



Choking,
gurgling sounds
or snoring



Cold or
clammy
skin



Tiny pupils



Overdose is a medical emergency.

Immediately contact your local health centre or hospital!

How to use Naloxone



1

Peel the package
open and hold the
device.

Do not press until
ready to give
naloxone

2

Place the tip in
the nostril



3

Press firmly



SAVE ME Steps

Follow the steps below to respond



If the person must be left unattended at any
time, put them in the recovery position



STIMULATE

Unresponsive?
**Call health
centre or
hospital**



AIRWAY

Check
and open



VENTILATE

1 breath every
5 seconds



EVALUATE

Breathing?



MEDICATION

1 dose of
naloxone



EVALUATE & SUPPORT

Wait 2-3
minutes.
Another dose?

How to Give Breaths



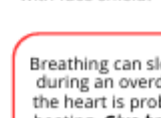
Tilt the head back
to open airway.



Pinch nose. Cover mouth
with face shield.



Give 1 breath
every 5 seconds



Breathing can slow down
during an overdose but
the heart is probably still
beating. **Give breaths to
keep them alive.**

*Adapted for use with the permission from the College of Pharmacists of British Columbia
How to Use Naloxone Fact Sheet - July 2024 - English*

Naunaitkutaq Titiraq: Qanuqtut Aturiami Naloxone-mik

Hunaukmat naloxone qanuqtutlu ihariagiviuk?

Naloxone una antidote opioid-mun havautiturjuarnirmun. Pivallaarniq amigaitpallaanik opioid havautinik (ukunatun morphine, hydromorphone, oxycodone, methadone, heroin unaluuniin fentanyl) kajumiirutauttaqtuq anirhaaqnunun anirhaaurilutikluuniin. Naloxone ihuaqhiutaujuq nakuujumik anirhaarnirmun unalu qauhimalmirmun iluani 2-min 5-mun minutes-ni aniqhaaraangat. Tunihiniq naloxone-mik ikajuutauttaqtuq tuqunirmun qaritamulluuniin nakuun'ngiutinun anirhaaluruiraangata pitillugiit opioid-mik havautiturjuaqqata.

Naunaitkutat Opioid-tuvallaarumik



Ingutaangittu
q
tupalimaiqtuq
lu



Kajumiqtuq
aniqhaaktangit
tuqluunniit



Tunguktittut
umilguut kukiillu



Tupiliqtuq,
haqataaqtuq
tuharnaqhiut
qamnguqtuqluunn
it



Niglaqtuq
mittuktuqlu
unniit uvinia



Mikhijut
takkuviit



Havautituqpallaarniq munarhitkunnut qilamiuqtuqatauviuyuq.
Qilamiuqluni uqaqatigilugu munarhitkut aaniravilluunniit!

Qanuq atugiangani Naloxone



1

Puunga
angmaqtirlugu
tigummilugulu
havautaut.

Nakihuiqlugu kihiani
upalungaiqqat
tunijaami naloxone



2

Hivua ililugu
hurlungmun.



3

Naqillugu akhuvjak.

ANNAUTINGA Qauriliurutit



Taimaaton inuk qimaktauhimajukhaukpat ikajuqtiittumik,
ilurarlugin nakuuhiharutikhakkut haniraani pallungavjaktumik



QAUJIIHARLUGU

Qaujimaiqtuq?
Hivajaqlugu
munaghikuk
aenniavikluunni
it



INGUTAAQ

TILLUGU
Takulugu
angmarlu
gulu



ANIQAHAAKTA

QVIA
Atauhiq (1)
aniqhaaktamik
tamainni tallimani (5)
qajumiktup
ubluqhutiit
kaivvutaani



ANIQAHAAKTIL

LUGU
Aniqhaaktali
qqa?



HAVAUTITUQTILL

UGU
Atauhiq (1)
havauqhiutuu
ti
naloxonemik
-mik



QAUJIIHARLUGU

IKAJURLUGULU
Utaqqlugin
malruniut
pingahunut (2-3)
minitsinik.
Havauqhiutfaani?



QAUJIIHARLUGU

IKAJURLUGULU
Utaqqlugin
malruniut
pingahunut (2-3)
minitsinik.
Havauqhiutfaani?

Qanuqtun Tunidjutit Aniqhaaktautiknik



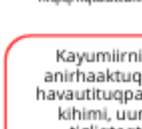
1
Niaqunga taunungarlugu
igjanga angmaumariami
anirhaaliriami.



2
Puujuklugu qingat. Matulugu
qanig uumunga akullamun
hiqhiqtauttailidutaanun.



3
Anirhaaklutit atauhiqmik
qaninnganut taimaa
tallimat tigligturniq
qaanghakat.



Kayumilrniaqtuq
anirhaaktuq taimaa
havautituqpallaarumi
kihimi, uumataa
tigligtaqtuq -
**Anirhaaklutit
qaninnganut
anirhaaliriami.**

Ihuaqhaqtauhimajuq aturiami pihimapluni angirunik uumanga iliharvigiuamin Havautitajjiniin British
Colombia-min Qanuqtun Aturiami Naloxone-mik Kangiqhidjutikuk Titiramik - Julai 2024 - Inuinaqtun

Fiche d'information: Comment utiliser la naloxone

Qu'est-ce que la naloxone, et à quoi sert-elle?

La naloxone est un antidote en cas de surdose d'opioïdes. La prise d'une trop grande quantité de médicaments opioïdes (comme la morphine, l'hydromorphone, l'oxycodone, la méthadone, l'héroïne ou le fentanyl) peut ralentir ou arrêter la respiration. La naloxone rétablit la respiration normale et la conscience dans les 2 à 5 minutes suivant l'inhalation. L'administration de naloxone peut prévenir la mort ou les lésions cérébrales dues au manque d'oxygène lors d'une surdose d'opioïdes.

Signes de surdose d'opioïdes



Inerte et impossible à réveiller



Respiration lente ou inexistante



Lèvres et ongles bleus



Étouffement, gargouillis ou ronflement



Peau froide ou moite



Pupilles très petites



La surdose est une urgence médicale.

Communiquez immédiatement avec votre centre de santé ou votre hôpital!

Comment utiliser la naloxone



Ouvrir l'emballage et en retirer le vaporisateur **sans** appuyer pour ne pas le vider de la naloxone.



Placez l'embout dans une narine.



Appuyer fermement sur le piston.

Étapes de secourisme

Lors de votre intervention :



Si vous devez laisser sans surveillance la personne en difficulté à un moment quelconque, placez-la d'abord en position latérale de sécurité.



Évaluez
Sans réaction?
Appelez le centre de santé ou l'hôpital.



Stimulez
Examinez l'intérieur de la bouche



Vérifiez les voies respiratoires
1 soufflé aux 5 secondes



Ventilez
Elle respire?



Médicamentez
1 dose de naloxone



Évaluez et soutenez la personne en difficulté
Attendez 2-3 minutes. Donner une autre dose?

Comment faire le bouche-à-bouche



Inclinez sa tête vers l'arrière pour dégager ses voies respiratoires



Pincez le nez. Couvrir la bouche avec le masque.



Donnez 1 insufflation toutes les 5 secondes.

Lors d'une surdose, il se peut que la respiration ralentisse, mais le cœur continue habituellement de battre. **Administrez les insufflations pour garder la victime en vie.**

Adapté pour utilisation à partir de la feuille d'information sur l'utilisation de la naloxone de l'Ordre des pharmaciens de la Colombie-Britannique avec la permission de ce dernier (juillet 2024). - Français

APPENDIX C: NALOXONE KIT DISPENSING RECORD

	Date	Type of Kit		Education and Training Provided*		Name and Designation of HCP who Dispensed the Kit
		Intranasal	Injectable	Yes	No	
1.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
4.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
5.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
8.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
9.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
10.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
11.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
12.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
13.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
14.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
15.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
16.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
17.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
18.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

*Education and training should be offered to all those who receive a kit, but it is not mandatory.

Please fax this Dispensing Record to your Regional Pharmacy at the end of each month.

Cambridge Bay: 867-983-4201

Iqaluit: 867-975-8606

Rankin Inlet: 867-645-8348