## **NARCOTICS AND OPIATE Overdose**

- Assist ventilation PRN
- Assess need for intubation (might be safer for transport to support symptoms and have patient intubated then giving Narcan)

Resp.

Depression

Monitor for

changes

No

Yes

**Example of Narcotics and Opiates** 

Heroin, Methadone (Dolophine), Morphine (MS Contin), Meperidine (Demerol), Oxycodone (Oxycontin, Percodan, Percocet), Hydromorphone (Dilaudid), Fentanyl (Duragesic, Sublimaze), Codiene, Hydrocodone (Vicodin, Lortab), Dextropropoxyphene (Darvon), Pentazocine (Talwin)

## DO THE FOLLOWING BEFORE LOADING INTO AIRCRAFT:



- Adult: Narcan 0.4 2 mg IV, every 3 min. (max of 10 mg) until respiratory depression is reversed.
- Pediatric: Narcan 0.01 mg/kg IV, max. dose 2 mg.
- Narcan drip can be utilized as needed. Narcan 2 mg in 500 ml of NS or D5W.
  Usual rate of 0.4 mg/hr (100 ml/hr). Titrate to resp. rate/ level of consciousness.

(2)

## Signs and Symptoms

Decreased CNS, Respiratory depression, Pinpoint pupils, drowsiness, coma, cyanosis, Decreased BP, Decreased HR, Decreased Temp.

- 1. Consideration should be given to flight safety. Consideration of not loading patient to assess patient's response to Narcan should be considered. Be prepared to use soft restraints and chemical restraints. Not giving Narcan and supporting the patient's symptoms with intubation is also a consideration.
- 2. If narcotic dependent start in small doses. The narcotic may outlast the effect of Narcan, be prepared to repeat dose.