

RESPIRATORY DISTRESS – OPIOID OVERDOSE	
ADULT	PEDIATRIC (≤34 KG)
BLS	
<ul style="list-style-type: none"> • Universal Protocol #601 • Pulse Oximetry <ul style="list-style-type: none"> - O₂ administration per Airway Management Protocol #602 • May assist with administration of patient's prescribed medication 	Same as Adult
BLS Elective Skills	
Suspected Opiate Overdose with inadequate respirations (O ₂ Sat < 94%, rate ≤ 8 bpm)	
<ul style="list-style-type: none"> • Narcan 4 mg IN in one nare – assess for adequate respirations <ul style="list-style-type: none"> - may repeat in alternate nare if no improvement after 2 min, max total of 2 doses 	
ALS	
Suspected Opiate Overdose with inadequate respirations (rate ≤ 8 bpm or O ₂ Sat < 94% or ETCO ₂ > 45 mmHg)	Suspected Opiate Overdose with inadequate respirations (O ₂ Sat < 94% or ETCO ₂ > 45 mmHg)
<ul style="list-style-type: none"> • Narcan up to 1 mg IV/IM <ul style="list-style-type: none"> - Repeat as needed • Up to 2 mg IN (split between nares) – assess for adequate respirations <ul style="list-style-type: none"> - Repeat as needed 	<ul style="list-style-type: none"> • Narcan 0.1 mg/kg IV/IM/IN (split between nares) up to 1 mg – assess for adequate respirations <ul style="list-style-type: none"> - Repeat as needed
Base Hospital Orders Only	
<ul style="list-style-type: none"> • As needed 	<ul style="list-style-type: none"> • As needed
Notes	
<ul style="list-style-type: none"> • IV is preferred route for Narcan administration • Inadequate airway, and respirations should be supported with BLS adjuncts and ventilations prior to Narcan administration • Poly-mixed drugs may require additional doses of Narcan titrated to maintain respirations • Alternate Narcan dosing for BLS Elective Skills may be added with approval of the EMS Agency Medical Director • Consider policy #220 Leave Behind Naloxone 	