

NALOXONE EDUCATION TOOLKIT



INTRODUCTION

The purpose of this toolkit is to provide education about opioid overdoses and increase confidence in utilizing Naloxone, a medication designed to rapidly reverse opioid overdoses.

The sections below will provide a high-level overview of the topic.

We have included links for more detailed information and additional resources at the end of the toolkit.

SECTION 1: WHAT ARE OPIOIDS?

“Opioid” is the proper term, but opioid drugs may also be called opiates, painkillers, or narcotics. Opioids are a class of drugs commonly used to reduce pain. Opioids can be highly addictive and can lead to overdose if used in high amounts.

Common types of opioids include:

- Prescription opioids such as Oxycodone, Morphine, and Vicodin.
- Heroin
- Fentanyl (50X stronger than morphine and 100X stronger than heroin)

A person using opioids over time can develop tolerance, physical dependence and opioid use disorder, with the risk of overdose and death.

Learn more about [opioid basics](#).

SECTION 2: HOW TO RECOGNIZE AND TREAT AN OPIOID OVERDOSE

An opioid overdose occurs when too much of the drug overwhelms the brain and interrupts the body’s natural drive to breathe. During an overdose, breathing can be dangerously slowed or stopped, causing brain damage or death. It’s important to recognize the signs and act fast. Signs of an overdose may include:

- Small, constricted “pinpoint pupils”
- Falling asleep or loss of consciousness
- Slow, shallow breathing
- Choking or gurgling sounds
- Limp body
- Pale, blue, or cold skin

It may be hard to tell if a person is high or experiencing an overdose. If you aren’t sure, it’s best to treat it like an overdose— you could save a life.

1. Call 911 immediately.
2. Administer naloxone, if available.
3. Try to keep the person awake and breathing.
4. Lay the person on their side to prevent choking.
5. Stay with him or her until emergency workers arrive.

[Overdose Response Instructions \(PDF\)](#)

SECTION 3: WHAT IS NALOXONE AND HOW DOES IT WORK?

Naloxone is a medication approved by the Food and Drug Administration (FDA) designed to rapidly reverse opioid overdose.

The medication can be given by intranasal spray (into the nose), intramuscular (into the muscle), subcutaneous (under the skin), or intravenous injection. **Naloxone provided by Yakima Health District for businesses will be the intranasal spray. Intramuscular may also be available.*

Naloxone only works on opioids, such as: heroin, fentanyl, oxycontin/oxycodone and other opioid pain medications. If the person presents with the signs and symptoms of an opioid overdose, naloxone should be administered regardless of what drug was assumed to have been consumed. Naloxone won't harm someone if they're overdosing on drugs other than opioids, so it's always best to use it if you think someone is overdosing.

[Naloxone Frequently Asked Questions](#)

SECTION 4: WHY SHOULD I GET INVOLVED?

Witnessing an overdose can be very frightening. Don't let this fear keep you from saving a life. By intervening promptly, you can provide the person with a better chance of survival.

In WA State, anyone trying to help in a medical emergency is generally protected from civil liabilities by [RCW 4.24.300](#). WA State's 911 [Good Samaritan Overdose Law RCW 69.50.315](#) gives additional, specific protections against drug possession charges for the victim and individual calling for help.

Anyone in WA State who might have or witness an opioid overdose is allowed to carry and administer naloxone. ([RCW 69.41.095](#))

SECTION 5: STAY SAFE IF YOU SUSPECT FENTANYL OR OTHER OPIOIDS PRESENT.

The risk of overdose from touching or being near opioids, including fentanyl, is extremely low.

- Wear standard nitrile gloves for extra protection.
- If you come into contact with an unknown substance, brush or wash off the residue with soap and water.
- Do not use alcohol hand sanitizer. It will not remove the substance and may increase absorption.
- Do not perform actions that will cause substances to become airborne.
- Do not touch your eyes, nose, or mouth after touching any surface that may be contaminated, even if wearing gloves.

To date there are no clinically confirmed cases of officers or other first responders overdosing from touching or simply being around fentanyl.

QUICK FACTS

- **You can't overdose by simply touching fentanyl or drugs that contain fentanyl. Fentanyl does not absorb well through the skin, unless there are other chemicals present to help absorption.**
- **Prescription fentanyl patches, for example, combine fentanyl with a chemical that aids absorption, and it still takes hours of close contact with the patch to absorb fentanyl through the skin.**
- **Healthcare providers, laboratory personnel, and patients regularly handle fentanyl and do not overdose.**
- **Someone who has ingested, injected, or snorted the fentanyl does not exhale enough fentanyl to cause overdose in first responders.**
- **Second-hand exposure to fentanyl smoke is not a significant concern.**

ADDITIONAL RESOURCES

- Presentation slides- [Naloxone Education Presentation](#)
- [Mail Order Naloxone for WA residents \(personal use only\)](#). ([Spanish link](#))
- How to administer Naloxone [Training Video](#) ([Spanish training video](#))
- [Stopoverdose.org](#) (materials & toolkits, posters & brochures)
- Opioid Basics information- [What are opioids and what causes and overdose.](#)
- Workplace information: The National Institute for Occupational Safety and Health (NIOSH), part of the Centers for Disease Control and Prevention (CDC): [Using Naloxone to Reverse Opioid Overdose in the Workplace: Information for Employers and Workers](#)
- National Safety Network- [Opioids at work, Employer Toolkit](#)
- Preventing exposure- <https://stopoverdose.org/wp-content/uploads/2023/05/LEO-fentanyl-flyer-Safe-to-Respond.pdf>
- Fentanyl Exposure in public places- <https://doh.wa.gov/community-and-environment/opioids/fentanyl-exposure-public-places>