

Sierra – Sacramento Valley EMS Agency Treatment Protocol

M-4

BLS Naloxone Administration For Suspected Opioid Overdose

Approval: Troy M. Falck, MD – Medical Director Effective: 06/01/2024

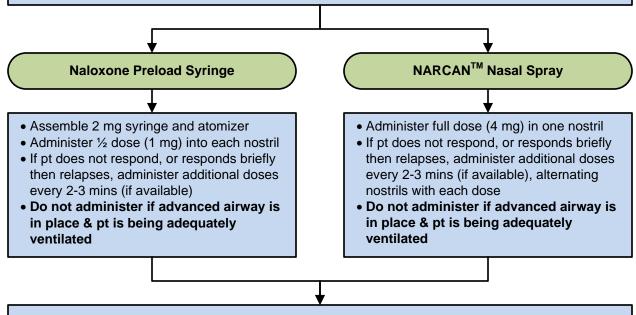
Approval: John Poland – Executive Director Next Review: 01/2027

Indications for naloxone administration (both must apply):

- 1. Environment is suspicious for use of opioids.
- 2. Pt is unconscious/poorly responsive and respiratory rate appears slow (<12/min) or shallow/inadequate (or pt is unconscious and not breathing).

BLS

- Ensure that appropriate EMS units have been requested (BLS/LALS/ALS)
- Utilize appropriate personal protective equipment
- Stimulate pt to determine if they will awaken
- Assess & support ABCs provide continuous BVM support with high flow O2 until respiratory rate improves to ≥12bpm.
- If pulseless, begin chest compressions
- If no response to stimulation and continued poor/absent breathing, administer naloxone
- ① Use naloxone with caution in pts with significant trauma who have not been adequately immobilized & consider the concurrent need for appropriate immobilization/spinal motion restriction



- If response to naloxone, be alert for sudden, agitated behavior or symptoms of opioid withdrawal, such as vomiting, abdominal cramps, or sweating
- Report administration of naloxone to appropriate EMS personnel
- Complete naloxone utilization report and submit a copy to S-SV EMS