

	M11 - NALOXONE (NARCAN)	
	Version date: 2025-02-10	Effective date: 2025-04-30 (07:00)

INDICATIONS

- Respiratory depression due to known or suspected opioid toxicity

WARNINGS

CONTRAINDICATIONS:

- Hypersensitivity to naloxone

USE WITH CAUTION:

- Opioid dependency ²

ADMINISTRATION

INTRANASAL

EMR / PCP / ICP / ACP

ALL AGES:

- Administer 2 mg
- Repeat every 2 to 3 minutes as required (use alternating nostrils)
- If nasal spray is not available, administer 1 ml of the injectable solution to each nostril delivered with mucosal atomizer device

INTRAMUSCULAR / SUBCUTANEOUS

PCP / ICP / ACP

5 YEARS & OLDER:

- Administer 0.4 to 2 mg
- Repeat the initial dose every 2 to 3 minutes as required, up to a total maximum initial dose = 10 mg ¹

UP TO 5 YEARS:

- Administer 0.1 mg/kg (maximum per dose = 2 mg)
- Repeat the initial dose every 2 to 3 minutes as required, up to a total maximum initial dose = 10 mg ¹

INTRAVENOUS (INTRAOSSEOUS) INJECTION

PCP / ICP / ACP

5 YEARS & OLDER:

- Administer an initial dose of 0.1 to 2 mg ²
- Repeat the initial dose every 2 to 3 minutes as required, up to a total maximum initial dose = 10 mg ¹

UP TO 5 YEARS:

- Administer 0.1 mg/kg (maximum per dose = 2 mg)
- Repeat the initial dose every 2 to 3 minutes as required, up to a total maximum initial dose = 10 mg¹

NOTES

1. For high potency opioids (e.g. fentanyl, carfentanil, alfentanil) doses of up to 10 mg may be required for reversal.
2. For chronic opioid users, consider titrating multiple smaller intravascular doses to achieve adequate respirations.
3. If the time to medical care will be delayed, repeat dosing may be every 20 to 60 minutes may be required.

APPROVED BY


Provincial Medical Director



Associate Provincial Medical Director

VERSION CHANGES (refer to X08 for change tracking)

- Addition of advanced work scope