

**Medication Reference** 

ISSUE DATE: CATEGORY: A	CPC Quality of Care Committee lune 2002 REVISION DATE: Sept 2018 ACP & PCP Medications PAGE: 1 of 2 Naloxone
Other Names:	Narcan
Classifications:	Opioid Antagonist
Pharmacodynamics:	<ul> <li>An essentially pure narcotic antagonist that reverses the effects of narcotics by competing and having a greater affinity for the same receptor sites</li> </ul>
Onset:	• $\leq$ 2 minutes IV and IN, slightly slower with SC and IM injections
Peak:	Dose and route dependant
Duration:	Dose and route dependant
Indications:	<ul> <li>The complete or partial reversal of narcotic depression, including respiratory depression</li> <li>Aids in the diagnosis of suspected acute opioid intoxication</li> </ul>
Contraindications:	Known hypersensitivity
Precautions:	<ul> <li>Narcan can have a dramatic effect on a chronic opioid user, causing withdrawal and possible violent behavior. It is advisable to titrate small doses of Narcan only to restore the patient's respiratory effort</li> <li>Naloxone is shorter acting then many narcotics and these patients are at high risk of having a recurrence of the narcotic effect. Therefore, every effort should be made to transport the patient to hospital for ongoing monitoring. If there is a refusal of transport initiated by the patient ensure safe monitoring by an available, reliable individual.</li> </ul>
Adverse Reactions: Drug Interactions:	<ul> <li>Abrupt reversal of narcotic depression may result in nausea, vomiting, sweating, tachycardia, increased blood pressure, tremulousness and cardiac arrest</li> <li>Hypotension, hypertension, ventricular tachycardia and fibrillation, and pulmonary edema have been associated with Narcan use postoperatively</li> <li>None significant</li> </ul>
Special Consideration	-
	<ul> <li>BVM with basic airway management and oxygenation are preferred over naloxone administration.</li> </ul>
Preparations:	<ul> <li>0.2 mg/ml</li> <li>0.4 mg/ml</li> <li>0.8 mg/ml</li> <li>1 mg/ml</li> </ul>

**References:** 

Ontario Provincial ALS Patient Care Standards, Version 4.5
Compendium of Pharmaceuticals and Specialties 2013

<u>NOTE</u>: The information contained herein does not supersede or negate the MoHLTC Provincial Medical Directives and should only serve as general information about the medication itself. For medication dosages, please refer to the current version of the Ontario Provincial ALS Patient Care Standards.