



PURPOSE

Opioid overdose death is preventable through administering, dispensing, and prescribing naloxone to people who are at risk of experiencing or witnessing an opioid overdose. As trusted and accessible health care professionals, pharmacists are in a unique position to educate individuals on opioid overdose and dispense naloxone when indicated.

This standing order authorizes registered pharmacists in New Mexico to dispense naloxone or other FDA approved opioid antagonist for rescue use to:

1. Any person who uses an opioid, regardless of how the opioid is used or obtained.
2. Any person in a position to assist a person at risk of experiencing an opioid overdose.

AUTHORITY

NMSA 24-23-1.F: A licensed prescriber may directly or by standing order prescribe, dispense, or distribute an opioid antagonist to: 1) a person at risk of experiencing an opioid-related drug overdose; 2) a family member, friend or other person in a position to assist a person at risk of experiencing an opioid-related drug overdose; 3) an employee, volunteer or representative of a community-based entity providing overdose prevention and education services that is registered with the department; 4) a first responder.

ORDER AND DISPENSING PROCEDURES

Pharmacists dispensing naloxone under this standing order must comply with dispensing procedures and associated opioid overdose and naloxone education as detailed in this section.

1. INFORMATION AND ELIGIBILITY CRITERIA

Indication: Naloxone is an opioid antagonist that reverses the effects of opioids, including respiratory and central nervous system depression. It is indicated for emergency treatment of a known or suspected opioid overdose. It is not a substitute for emergency medical care. Other FDA approved opioid antagonist(s) for rescue use will be authorized under this standing order, when available.

Eligibility:

1. People who voluntarily request naloxone (or other opioid antagonist) and meet criteria as described under the Authority Section are eligible to receive naloxone (or other opioid antagonist).
2. Pharmacists, using their professional judgment, may offer naloxone (or other opioid antagonist) to individuals identified to be at increased risk of experiencing an opioid overdose. Factors to consider that may increase risk of overdose: High dose of opioids, using opioids for more than 3 months, using opioids and benzodiazepines simultaneously, being

treated for opioid use disorder with buprenorphine, methadone, or naltrexone, history of opioid overdose.

Contraindications: Known hypersensitivity to naloxone (or other opioid antagonist, as applicable). Anaphylactic shock may occur in those allergic to naloxone or any of its components. Contraindication(s) to other FDA approved opioid antagonist(s), if any, based on manufacturer's drug information (approved product labeling) must be observed by pharmacist in determination of whether the product is appropriate.

Warnings/Precautions: Naloxone and other opioid antagonists may cause opioid withdrawal symptoms such as: nausea/vomiting, diarrhea, chills, sweating, anxiety, and combativeness/disorientation. Naloxone and other opioid antagonists are not effective in reducing respiratory and central nervous system depression caused by non-opioid substances.

2. ORDER TO DISPENSE

Product Selection and Labeling

The pharmacist may dispense one of the following products based on product availability and preference:

Naloxone 4 mg/0.1 mL Nasal Spray
Dispense: 1 box containing two 4 mg/0.1 mL doses of naloxone
Directions for use: Administer a single spray of Narcan® in one nostril. Repeat after 3 minutes if no response. Call 911.
Other naloxone preparation or opioid antagonist commercially available and FDA approved for the emergency treatment of known or suspected opioid overdose. Label with directions for use consistent with drug monograph. Call 911.

Prescription Label Requirements: Name of recipient/person requesting naloxone, date dispensed, naloxone product and quantity, licensed prescriber name, directions for use, refills: PRN.

3. PATIENT EDUCATION

Required Counseling and Educational Information: Pharmacists dispensing under this standing order must provide individuals receiving naloxone with opioid overdose and naloxone administration education. The pharmacist should be familiar with opioid overdose prevention, using opioid medications safely, and naloxone administration instructions.

Education must, at a minimum, include:

Opioids and what causes opioid overdose:	• Most opioids are narcotic pain relievers such as: oxycodone, hydrocodone, oxymorphone, hydromorphone, codeine, morphine, fentanyl, methadone, and buprenorphine. Heroin is also an opioid drug. • Opioids can have severe adverse reactions that slow or stop breathing. This can happen when a person ingests too much of the opioid medication or mixes an opioid medication with another substance. Opioid overdoses can be fatal because they slow or stop breathing.
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Factors that increase risk for overdose:	• Mixing opioids with alcohol, benzodiazepines, or other drugs. • Taking opioids more often or in higher quantities than prescribed. • Restarting opioids after a period of abstinence.
Naloxone overview:	• Naloxone is a safe medication that reverses and blocks the effects of opioids and can be used to treat a known or suspected opioid overdose. • Naloxone only reverses the effects of opioids. It will not have an effect on an overdose caused by another substance (e.g., alcohol, benzodiazepines, stimulants, etc.). • Naloxone may cause opioid withdrawal symptoms such as: nausea/vomiting, diarrhea, chills, sweating, anxiety, and combativeness/disorientation. People who use opioids chronically are more likely to experience these effects. • Naloxone will not have an effect on a person who has not taken opioids.
How to recognize an opioid overdose:	• Person is unresponsive or unconscious; will not wake up even when shaken. • Person is not breathing or breathing is very slow and shallow. • Person's lips or fingernails are blue/grey and skin is pale and clammy.
What to do in case of an overdose:	1. Call 911 as soon as possible and follow dispatcher instructions. Naloxone is not a substitute for emergency medical services. 2. Follow dispatcher instructions for rescue breathing, if appropriate. 3. Administer naloxone. If no response in 3 minutes, give a second dose. 4. Once revived, place person in recovery position and stay until help arrives.
How to administer naloxone:	• Pharmacist should review naloxone administration instructions for the naloxone product being dispensed. • Review the How to Respond to an Opioid Overdose handout with each individual and provide a written copy with the naloxone product being dispensed.

The pharmacist may provide additional anticipatory guidance depending on the need of the patient, guardian/parent, or patient's designated representative. The pharmacist may also provide the New Mexico Department of Health Helpline for additional counseling or resources. Call: 1-833-SWNURSE (1-833-796-8773) Text: NMDOH (66364)

LIMITATIONS

This standing order does not establish the NMDOH or its clinicians as the healthcare provider for the individual. Individuals seeking more comprehensive healthcare should see a primary care provider or visit an NMDOH Public Health Office – see www.nmhealth.org/location/public/.

This standing order does not expire and shall remain in effect unless revoked or replaced by New Mexico Department of Health. This standing order will be reviewed and updated as needed.



Miranda Durham MD, Chief Medical Officer, New Mexico Department of Health
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Date: Patient DOB:
Patient Name: Patient Address:
Patient phone number:

	Medication: Naloxone 4 mg/0.1 mL Nasal Spray Quantity: 1 box containing two 4 mg/0.1 mL doses of naloxone Directions for use: Administer a single spray of naloxone nasal spray in one nostril. Repeat after 3 minutes if no response. Call 911. Refills: PRN Indication: Opioid Overdose
	Medication: Other naloxone preparation or opioid antagonist commercially available and FDA approved for the emergency treatment of known or suspected opioid overdose. Quantity: 1 box containing two 4 mg/0.1 mL doses of naloxone Directions for use: Label with "Call 911" and directions for use consistent with drug monograph. Refills: PRN Indication: Opioid Overdose

M. Durham, MD

Prescriber: Miranda Durham, MD

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NM Medical License: MD2004-0631