OVERDOSE PREVENTION

Overdose is more likely to happen when:
- You use alone.
- You mix opioids with alcohol or other drugs.
- Your tolerance is low because you haven’t used recently.
- You have a chronic disease (HIV/AIDS, Hep C, COPD), or illness (pneumonia, flu).

OVERDOSE RECOGNITION

- Can’t be woken up
- Fingernails or lips turning blue
- Slow or no breathing
- Vomiting or gurgling noises
- Limp body
- Unable to speak/incoherent

OVERDOSE RESPONSE

1. **Call 911!** CT’s Good Samaritan Law protects you from arrest when you call for help.
3. Give Naloxone/Narcan (see reverse).
4. Continue rescue breathing. Give 1 slow breath every 5 seconds.
5. **Stay until help arrives**. Naloxone only lasts for 20-90 minutes and additional doses may be needed. If you must leave, roll person on his or her side, with chin tilted up and supported by hand.
6. Always seek medical care after an overdose.

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**How to give naloxone:**

There are 3 ways to give naloxone. Follow the instructions for the type you have.

**Nasal spray naloxone**

1. Take off yellow caps.
2. Screw on white cone.
3. Take purple cap off capsule of naloxone.
4. Gently screw capsule of naloxone into barrel of syringe.
5. Insert white cone into nostril; give a short, strong push on end of capsule to spray naloxone into nose. **ONE HALF OF THE CAPSULE INTO EACH NOSTRIL.**
6. Push to spray.
7. If no reaction in 3 minutes, give second dose.

**Injectable naloxone**

1. Remove cap from naloxone vial and uncover the needle.
2. Insert needle through rubber plug with vial upside down. Pull back on plunger and take up 1 ml.
3. Inject 1 ml of naloxone into an upper arm or thigh muscle.
4. If no reaction in 3 minutes, give second dose.

**Auto-injector**

The naloxone auto-injector is FDA approved for use by anyone in the community. It contains a speaker that provides instructions to inject naloxone into the outer thigh, through clothing if needed.