

Naloxone

Indications: Reversal of respiratory depression caused by opiates or synthetic narcotics

Contraindications: Known allergy, known hypersensitivity, neonates with narcotic use by mother

Concentration: 1 mg/mL

ADULT DOSING

Indication	Dose	Rate & Route	Note
Non-synthetic organic opiate overdose	0.4 – 2 mg 0.4 – 2 mL	IV/IN/IM	Repeat PRN to effect
Synthetic opiate overdose	10 – 20 mg 10 – 20 mL	IV	OLMC Required

ADULT DOSING

PEDIATRIC DOSING

Indication	Dose	Rate & Route	Note
Opiate overdose	0.1 mg/kg Max dose: 2 mg	IV/IN	Repeat PRN to effect Contact OLMC for higher dosing

PEDIATRIC DOSING

Pediatric Dosing Naloxone

3 kgs	4kgs	5 kgs	6-7 kgs	8-9 kgs	10-11 kgs	12-14 kgs	15-18 kgs	19-23 kgs	24-29 kgs	30-36 kgs
6.6 lbs	8.8 lbs	11 lbs	13-15 lbs	17-20 lbs	22-24 lbs	26-30 lbs	33-40 lbs	42-50 lbs	53-64 lbs	66-80 lbs
in18.25-20.25	in20.25-21.5	in21.5-23.25	in23.25-26.25	in26.25-29.25	in29.25-33	in33-37.5	in37.5-42.5	in42.5-47.75	in47.75-51.25	in51.25-56.25

Naloxone for IV/IN
Concentration = 1 mg/ml

0.3 ml	0.4 ml	0.5 ml	0.7 ml	0.9 ml	1 ml	1.3 ml	1.6 ml	2 ml	2ml	2 ml
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Adverse/Side Effects

Tachycardia, hypotension with rapid administration, HTN, dysrhythmias, N/V and diaphoresis. In neonates, opioid withdrawal may be life-threatening if not recognized.

Class

Opioid antagonist

Mechanism of Action

Naloxone hydrochloride is an opioid antagonist that antagonizes opioid effects by competing for the same receptor sites. Naloxone hydrochloride reverses the effects of opioids, including respiratory depression, sedation, and hypotension.

Onset of Action

IV: ~ 2 minutes
IM: 2 – 5 minutes
IN: ~ 5 minutes

Peak Effect

IV: Fast
IM/IN: 15 – 30 minutes

Duration of Action

Varies on route & opioid
IV has a shorter duration than IM