

Naloxone Kit Distribution Record

Date: _____

Medication	Strength	Format	Dose	DIN	Manufacturer	Quantity
Naloxone	4 mg/0.1 mL	Nasal spray	4 mg	02458187	Adapt Pharma	1 kit (2 doses)

Lot#: _____

Exp: _____

PRIOR TO DISCHARGE, PERFORM THE FOLLOWING STEPS:

- Ensure patient and/or caregiver understands what an opioid overdose is and that it is a medical emergency
- Review signs of opioid overdose with patient and/or caregiver:
 - Slow or absent breathing, blue lips/fingernails, unresponsive to stimulation, deep snoring/gurgling sound, very small pupils (black part of eye), limp body
- Review overdose prevention information with patient and/or caregiver
- Ensure patient and/or caregiver understands what naloxone is
- Review and explain contents of kit with patient and/or caregiver:
 - Review the kit pamphlet (“Five Steps to Save a Life”)
 - Review how to administer naloxone nasal spray
 - Review naloxone storage instructions (keep within 15–25°C)
- Ensure patient and/or caregiver knows where to get a replacement kit
- Explain importance of notifying Emergency Medical Services (911) in the event of an opioid overdose to patient and/or caregiver:
 - Emphasize that emergency services are responding to a medical situation, not a criminal one (Good Samaritan Law), and encourage them to remain with the overdose victim
- Discuss available follow-up care options (community RAAM/OAT clinic, primary care, harm reduction)
- Give discharge instructions

DISTRIBUTION RECORD

This medication was distributed on _____ (date) by _____ (printed name)

_____ (signature and designation)

Forward a copy to Pharmacy and retain original in patient's chart.