

A GUIDE TO FENTANYL AND NALOXONE EDUCATION

WHAT IS FENTANYL?

Fentanyl (classified as a Schedule II controlled substance) is a potent synthetic opioid that is used medically for pain management, particularly in cases of severe pain. However, it is now being illegally manufactured by drug cartels and used to contaminate the illicit drug supply. It is significantly more powerful than other opioids, such as morphine and heroin, with an estimated potency 50 to 100 times greater than morphine. Like other opioid drugs, it can also act in the brainstem to slow or stop breathing.

Fentanyl's high potency means that even a very small amount can cause an overdose.

- Illicitly manufactured fentanyl has become a major public health concern due to its potency and the high risk of overdose. Because drug cartels mix fentanyl into other substances, such as heroin, cocaine and counterfeit medications, individuals using these substances may become exposed to fentanyl without their knowledge. Fentanyl's high potency suggests that even low doses can stop breathing and significantly increase the risk of a fatal overdose.
- Symptoms of fentanyl overdose include severe drowsiness, slow or shallow breathing, pinpoint pupils, cold and clammy skin, and loss of consciousness. Naloxone (Narcan®) can reverse the effects of fentanyl overdose if administered promptly. However, due to fentanyl's potency, multiple doses of naloxone may be necessary.

Responding to an Overdose:

If you think someone has overdosed, it's crucial to act quickly and calmly.

1. Check Responsiveness and Ask Questions:

- If responsive, ask the person: "Are you OK?" "Have you been drinking or taking anything?" "What drugs or medications have you taken?" Look around for different substances or drug paraphernalia.
- If they don't respond, check for signs of breathing and a pulse. Try to wake them by calling their name or shaking them gently.

2. Call 9-1-1

3. Administer Naloxone* (if available):

- Naloxone is a safe medication – it should be given even if you are not sure if the overdose is from opioids or other drugs, especially since the individual may have been exposed to fentanyl without their knowledge.
- Administer naloxone according to the instructions. If the person does not breathe on their own within 2-3 minutes, give another dose of naloxone if available
- Naloxone can reverse the effects of opioid overdoses, but it does not restore breathing if the overdose involves a non-opioid drug. Also, any reversal is temporary – naloxone will typically wear off in 30-90 minutes. Therefore, always call 9-1-1 to ensure the person receives the help they need.

4. Perform CPR (if necessary):

- If the person is not breathing or has no pulse, begin CPR immediately. Push hard and fast in the center of the chest until emergency help arrives. If you're trained in rescue breathing, you can incorporate it, but chest compressions are the priority.

5. Position the Person:

- If the person is breathing but not fully awake, place them in the recovery position (place individual on their left side with their arms under their head, bending their right leg to prevent them from rolling onto their stomach).
- The recovery position is designed to prevent suffocation if the individual vomits.

6. Stay with the individual until help arrives.

*NALOXONE TRAINING FOR CHAPTERS:

On March 29, 2023, the Food and Drug Administration authorized naloxone delivered as a nasal spray (brand name Narcan®) to be sold over-the-counter. With this approval, naloxone has become readily available on college campuses as well as from big-box chains, vending machines, supermarkets, convenience stores and gas stations.

Naloxone (Narcan®) is a legal substance. Any member should be able to have naloxone if needed for themselves or others within the facility or at events. If your chapter wished to or has conducted a naloxone training for your chapter members, here are things to consider:

- Members and chapter leadership (e.g., officers, volunteers, facility employees) should focus on education, prevention and campus resources as they relate to naloxone. The chapter leadership should NOT create rules about who can have naloxone, determine where it is

stored, or who distributes it. This takes on a duty of care for the organization that is not needed or required for a legal substance.

- There are many campus and community resources that provide education and distribution of naloxone, and individuals can and should utilize those services. Training and distribution to members should only be coordinated through a partnership with a campus or community entity (i.e. Wellness Office, Drug Prevention Coalition, etc.). Unless certified to do so, chapter members should not lead a training.
- Attendance at a naloxone training should not be a requirement nor an expectation of members or new members. Participation is an individual's choice.
- Chapter leadership should always reinforce seeking immediate medical attention and calling 9-1-1 for the safety and well-being of members and guests.
- Members should know about [*Good Samaritan Policy/Laws*](#) of the state and university and be aware of their local resources.
- Check out this [*educational video*](#) produced by The Ohio State University for more information on identifying and coordinating a naloxone training.

Source material: Drug Enforcement Agency and the Substance Abuse and Mental Health Administration's *Opioid Overdose Prevention Toolkit*