



California Pharmacists and Furnishing Naloxone: What you need to know

Naloxone, the opioid overdose rescue medication, can reverse a potentially fatal reaction to opioids. Pharmacists can reduce overdose death rates by expanding access to naloxone.

To **furnish** naloxone is to provide naloxone to someone who currently does not have a prescription.

I'm a pharmacist in California. Can I furnish naloxone?

Naloxone prescriptions are treated like any other prescription. However, to furnish naloxone, California pharmacists must first:

- Complete one hour of approved CE: www.pharmacy.ca.gov/licensees/webinars/naloxone.shtml.

When furnishing naloxone, pharmacists must:

- Conduct screening to confirm current or previous opioid use or contact with anyone who uses/has history of use, and to identify any known hypersensitivity to naloxone. Screening questions are available in different languages from the Board of Pharmacy: www.pharmacy.ca.gov/licensees/naloxone_info.shtml.
- Provide patient consultation (see section below). Counseling cannot be waived by recipient but may be abbreviated for those familiar with using naloxone or responding to an opioid overdose.

Who can I furnish naloxone to?

- Anyone who uses or has used opioids, or has contact with anyone who uses or has used opioids.

What consultations do I have to provide?

Patients should be informed about the following topics:

Overdose prevention

- Only take opioid medication prescribed to you
- Don't take more than prescribed
- Don't mix opioids with alcohol or sleeping pills
- Avoid using alone and from unknown sources
- Abstinence lowers tolerance; take less upon restart
- Store opioid medications in a secure place
- Dispose of unused medications safely
- Teach your family and friends how to respond to an overdose

Overdose recognition

- Slow or shallow breathing
- Gasping for air while sleeping
- Pale, clammy, or bluish skin or fingernails
- Slowed heartbeat
- Low blood pressure
- Won't wake up or respond to verbal (e.g. "I'm going to call 911) or painful stimulation (e.g. rub knuckles on sternum)

Overdose response

- Call 911 (or ask someone nearby to call)
- Administer naloxone
- Assess response
- Give repeat dose if no or minimal response in 2-3 minutes
- If breathing, lay the person on his or her side to prevent choking
- Follow 911 dispatcher instructions
- Stay until help arrives even if victim seems better. Naloxone effects last 30-90 minutes (patient can go back into overdose if long-acting opioids were taken)

Additional education to provide

- Potential side effects include risk for withdrawal, anxiety, sweating, nausea/vomiting, or shaking.
- Shelf life is 12-24 months; store at room temperature ideally but it is most important that the medication is readily available.
- Provide naloxone fact sheet when furnishing naloxone (found in various languages on Board of Pharmacy website: www.pharmacy.ca.gov/licensees/naloxone_info.shtml).
- Encourage telling others about having naloxone, where it's kept, and how to use it.
- If patient expresses interest, provide a referral list to addiction treatment, recovery services, or medication disposal programs.

What specific products can I furnish?

Naloxone is available as injectable vials (most affordable) or as the easier-to-use layperson formulations of auto-injector and nasal spray. Below is an example prescription for the nasal spray.

Naloxone intranasal spray

- Naloxone 4mg (two pack)
- Dispense #1
- SIG: Use as needed for suspected opioid overdose. Spray into one nostril upon signs of opioid overdose. Repeat in other nostril after 2-3 minutes if no or minimal response. Call 911.

What do I need to document when I furnish naloxone?

- Notify patient's primary care provider if consent (either verbal or written) is given by the patient; if patient does NOT consent, you are not required to inform the provider.
- If naloxone is furnished to a third party (not the ultimate recipient of the rescue medication), the patient on record is the person to whom the medication is furnished.
- Maintain documentation of furnishing naloxone in recipient's medication records for at least three years.

How do I get paid for furnishing naloxone?

- Obtain a National Provider Identifier (NPI) to allow you to be the prescriber on record: <https://nppes.cms.hhs.gov>.
- When naloxone is furnished by a pharmacist, the pharmacist should be identified as the prescriber on record in the pharmacy prescription database using his or her individual National Provider Identifier.
- Furnished naloxone is covered by Medi-Cal as a "carve-out" medication so submit directly to Fee For Service Medi-Cal, NOT to the Managed Care Medi-Cal plan.

Additional resources

- California Board of Pharmacy (www.pharmacy.ca.gov/licensees/naloxone_info.shtml) for furnishing protocol, education fact sheet, training webinar.
- Prescribe to Prevent www.prescribetoprevent.org for patient education videos and other resources for pharmacists.
- Opioid Safety: Focus on Furnishing Naloxone: A guide for California community pharmacist (http://prescribetoprevent.org/wp2015/wp-content/uploads/OpioidSafetyFocusOnNaloxone_Pharmacists_AUG.18_final-with-links.pdf)
- "Let's Talk About Naloxone" (www.pharmacist.com/sites/default/files/audience/LetsTalkAboutNaloxone.pdf) for communication tips:
 - Be empathic and non-judgmental.
 - Use terms such as "bad reaction" or "person who uses drugs/person with a substance use disorder" rather than "overdose" or "addict."
- SAMHSA's National Helpline 1-800-HELP (4357) for treatment referrals.