Arkansas Naloxone Protocol

Naloxone hydrochloride is an opioid antagonist that reverses or blocks the effects of opioid analgesics. Timely administration of naloxone in the event of an opioid overdose can stop the potentially fatal respiratory depression that is linked with an opioid overdose.

I. Purpose

The purpose of this standing order is to reduce the morbidity and mortality of opioid overdoses in Arkansas by allowing Arkansas-licensed pharmacists to initiate therapy including ordering, dispensing and/or administering naloxone, along with any necessary supplies for administration, to eligible persons who are at risk of experiencing an opioid-related overdose, or who are family members, friends, or others who are in a position to assist a person at risk of experiencing an opioid-related overdose.

II. Authority

This standing order is issued pursuant to Act 284 of 2017 (SB 142) (Arkansas Code § 17-92-101(16)) to authorize licensed pharmacists in Arkansas to order, dispense and/or administer naloxone according to the provisions of Arkansas Code § 17-92-101(16) and the requirements of this standing order.

III. Dispensing Guidelines

A. Eligibility Criteria:
An Arkansas Licensed Pharmacist may initiate therapy to an individual who is at increased risk of an opioid overdose or who is a family member, friend, or other person who is in a position to assist an individual with an increased risk of an opioid overdose is eligible to receive naloxone.

* Factors that may place an individual at an increased risk of opioid overdose include:

  a. Opioid use including prescription or illicit drugs
  b. History of opioid intoxication, overdose, and/or emergency medical care for acute opioid poisoning
  c. High opioid dose prescribed (>50 morphine milligram equivalents daily)
  d. Suspected or known concurrent alcohol use
  e. Concurrent prescriptions or use of benzodiazepines, tricyclic anti-depressants (TCA’s), skeletal muscle relaxants and other medications
  f. Treatment of opioid use disorder with either buprenorphine or methadone.
  g. Concurrent history of smoking/COPD or other respiratory illnesses or obstruction

B. Contraindications:
Do not administer naloxone to an individual with a known hypersensitivity to naloxone or any of the other components.