When to Offer Naloxone to Patients in the Emergency Department

As a healthcare professional working in the emergency department, you play a critical role in ensuring patients receive naloxone, by offering overdose prevention education and related training for patients, family members, and friends.

When caring for a patient who has experienced an overdose, make an effort to determine how the overdose occurred.

For example, was the patient a household member that experienced an accidental ingestion? Or does the patient have a history of OUD? Depending on the cause, you might prescribe naloxone in the event of future overdoses and/or initiate treatment with buprenorphine in the emergency department and transition to ongoing treatment using a “warm handoff”.

LEARN MORE: cdc.gov/opioids/naloxone
When prescribing opioids, everyone is at risk for opioid overdose and should be offered naloxone. However, some situations and conditions may make an opioid overdose more likely. The following factors increase risk of opioid overdose:

- A history of overdose
- Patients with sleep-disordered breathing
- Patients taking benzodiazepines with opioids
- Patients at risk of returning to a high dose for which they have lost tolerance (e.g., patients undergoing tapering or recently released from prison)
- Patients taking higher dosages of opioids (e.g., ≥50 MME/day)
- A history of substance use disorder

For more information and resources on naloxone, visit [cdc.gov/opioids/naloxone](https://www.cdc.gov/opioids/naloxone), and for drug overdose prevention, visit [cdc.gov/drugoverdose](https://www.cdc.gov/drugoverdose).

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1. [https://www.cdc.gov/vitalsigns/naloxone/index.html](https://www.cdc.gov/vitalsigns/naloxone/index.html)
4. [https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm?sfcode=rr7103a1_w](https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm?sfcode=rr7103a1_w)