



Watertown Mayer
Public Schools

Watertown Mayer Health Services

Naloxone Administration Charting

Name: _____

Date: _____

Person who administered Naloxone: _____

****Immediately call 911 if a person is found unconscious or an overdose is suspected. Then call the building nurse.**

**Emergency Response Actions:
See Naloxone Condition Specific Protocol**

Emergency Response Activated?	Time 911 called:	Naloxone Administered:	Dose:	Time:	Route:
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
		2nd dose: 2-3 mins after 1st dose if needed <input type="checkbox"/> Yes <input type="checkbox"/> No			

Assessment & Intervention:

Temp	Pulse	Respirations	Blood Pressure	Airway Management	

Attach this document to the Incident Report (filled out separately).

District Nurse Signature

Date

Building Principal Signature

Date

Signs and Symptoms of Opioid Overdose	Signs and Symptoms of Opioid High
<ul style="list-style-type: none"> ● Blue skin tinge or yellow or gray in darker skin tones-- usually lips and fingertips show first color changes ● Body is very limp ● Face is very pale color from normal skin tone ● Pulse (heartbeat) is slow, erratic, or not there at all ● Throwing up ● Passing out ● Choking sounds or a gurgling/snoring noise ● Breathing is very slow, irregular or has stopped ● Unresponsive 	<ul style="list-style-type: none"> ● Normal skin tone ● Breathing appears normal ● Normal heart rate ● Looks sleepy ● Speech is slurred or slow ● Responsive to Stimuli ● Pinpoint pupils (with some exceptions)