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Illinois Opioid Overdose Reversal Agent Standardized Procedure

This Opioid Overdose Reversal Agent Standardized Procedure outlines for health care and other trained personnel how entities, including schools, may become authorized to obtain, dispense, and administer naloxone or nalmefene for the purpose of reversing an opioid overdose. This procedure also presents the educational requirements for using the Illinois Opioid Overdose Reversal Agents Standing Order and the technique for administering these reversal agents.

Introduction

In September 2015, Illinois added Section 85/19.1 to the Illinois Pharmacy Practice Act, 225 ILCS 85/19.1, expanding access to the opioid antagonist, naloxone. Naloxone may be used to reverse opioid overdoses, including those caused by heroin, fentanyl, and certain prescription pain medications. This statute authorizes personnel trained to dispense and/or administer reversal agents as an opioid antagonist intervention, per the instructions below.

In May 2023, the FDA also approved nalmefene as an opioid reversal agent, similar in mechanism to naloxone.

In January 2024, this standing order was expanded to include Illinois schools as a naloxone entity due to the need to have emergency procedures in place should persons exhibit signs of opioid overdose while on school premises. See Illinois School Code, 105 ILCS 5/22-30(e-10), (f), (f-5) and (g).

In January 2026, this standing order was expanded to include Illinois public libraries as a naloxone entity due to the need to have emergency procedures in place should persons exhibit signs of opioid overdose while on library grounds; in the immediate vicinity of the library; or at a library-sponsored event. See Illinois Local Library Act, 75 ILCS 5/1-8.

Pursuant to the Substance Use Disorder Act, 20 ILCS 301/, the Pharmacy Practice Act, the School Code, and the Local Library Act, the Illinois Department of Financial and Professional Regulation (IDFPR) – in consultation with the Illinois Department of Public Health (IDPH) and Illinois Department of Human Services (IDHS) – has issued a standardized procedure for appropriately trained professionals to obtain, dispense, or administer naloxone and nalmefene to persons suspected of drug overdose.

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Naloxone Entity

Naloxone entities may dispense either naloxone or nalmefene, and include pharmacies, pharmacists, or opioid overdose education and naloxone distribution (OEND) programs, as discussed below:

- Participating pharmacies and pharmacists must be licensed under the Illinois Pharmacy Practice Act (225 ILCS 85) and have knowledge of the Illinois Naloxone Standardized Procedure. Pharmacies/pharmacists shall report naloxone and nalmefene dispensing to the Illinois Prescription Monitoring Program at https://www.ilpmp.org/.
- Any non-pharmacy OEND program, except schools, must be registered with the IDHS Division of Substance Use Prevention and Recovery Drug Overdose Prevention Program (DOPP) at https://www.dhs.state.il.us/page.aspx?item=58142.
- This may include law enforcement agencies, drug treatment programs, local health departments, hospitals, urgent care facilities, public libraries, or other for-profit or not-for-profit community-based organizations.
- Schools registered with the Illinois State Board of Education (ISBE) and their staff members who have met the educational requirements listed below regarding the administration of reversal agents to persons suspected of potential opioid overdose.
- Public libraries established under the Illinois Local Library Act and their staff members who have met the educational requirements listed below regarding the administration of reversal agents to persons suspected of potential opioid overdose.

Educational Requirement

Under this standardized procedure, eligible entities must complete training in opioid overdose reversal that includes the following:

- Opioid overdose recognition and response.
- The need to quickly administer treatment to reduce the risk of severe injury or death (starting with one dose; if no response after two minutes, administer a second dose).
- The techniques for administering naloxone and nalmefene.
- Trained individuals must be familiar with the product they will be administering, including potential responses to administering the medication.
- The importance of calling 911 for the care of the overdose victim.
- The goal of treatment is to restore normal breathing, not consciousness.
- For schools, the training outlined in Section 22-30(h-5) of the Illinois School Code.
- For other entities, IDHS and IDPH will maintain a list of organizations qualified to provide training on the respective Department's website.

Signs and Symptoms of Opioid Overdose, include but are not limited to the following:

- Slowed, irregular, or no breathing
- Skin, nails turn blue
- Extreme sleepiness
- Unresponsive to sternal rub or when shaken
- Pinpoint pupils

If an individual is suspected of overdosing, an opioid overdose reversal agent must be administered as quickly as possible, because an overdose may result in death.

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Naloxone Hydrochloride

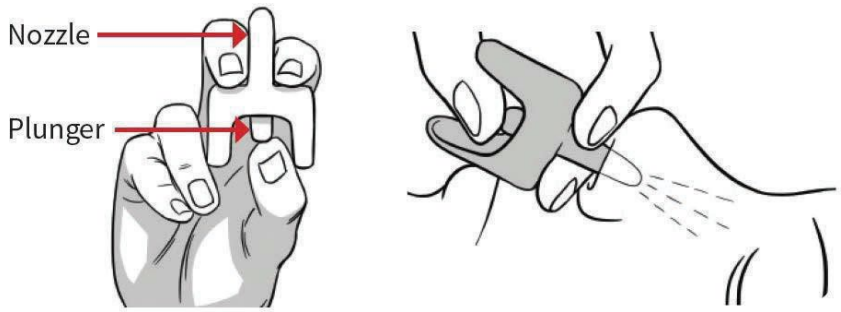
Naloxone is indicated for the reversal of opioid overdose induced by natural or synthetic opioids, as manifested by respiratory depression or unresponsiveness. **It is safe to give this medication to a child of any age or adult with symptoms of opioid overdose, even if you are not sure if they overdosed on opioids.** It may be delivered to persons subcutaneously or intramuscularly using a dose appropriate prefilled syringe or needle and syringe; or intranasally. **Individuals must be monitored for a recurrence of symptoms of opioid overdose after receiving naloxone, and additional doses of naloxone administered if needed.**

Standardized Procedure for Naloxone Administration

1. Confirm signs and symptoms of potential opioid overdose. Call 9-1-1 and administer naloxone as follows **(select dispensed dosage form):**

<u>Intranasal Naloxone</u>

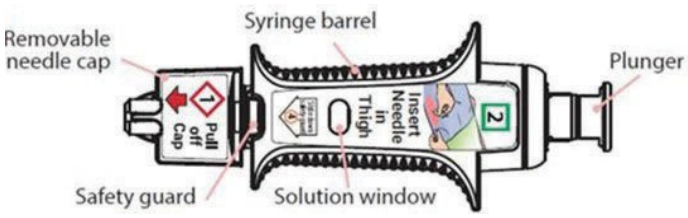
- The device is ready to use; no assembly is required.
- Peel back the package to remove the device.
- Do not test the nasal spray. It has only one dose and cannot be reused.
- Hold the device with your thumb on the bottom of the plunger and two fingers on the nozzle.
- Place and hold the nozzle tip in either nostril until your fingers touch the bottom of the patient's nose.
- Press the plunger firmly to release the dose into the patient's nose.
- Repeat, using the alternate nostril, if there is no response after 2 - 3 minutes using a new nasal spray.



- If there is still no response and additional doses are available, administer additional doses of nasal spray every 2 - 3 minutes until emergency medical services (EMS) assistance arrives. Use a new nasal spray in alternate nostrils with each dose.

<u>Single-Dose Prefilled Syringe Naloxone</u>

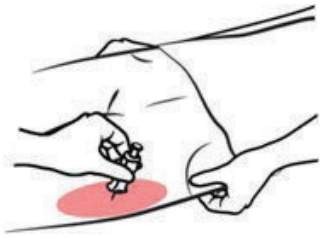
- The prefilled syringe is intended to be administered by individuals 12 years of age or older. Younger individuals or those with limited hand strength may find the device difficult to use.
- Place the individual on their back.
- Pull the prefilled syringe from the outer case and twist off the needle cap.



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- Press the needle of the prefilled syringe into the outer thigh, through clothing if needed, push down the plunger until it clicks, and hold in place for two seconds.



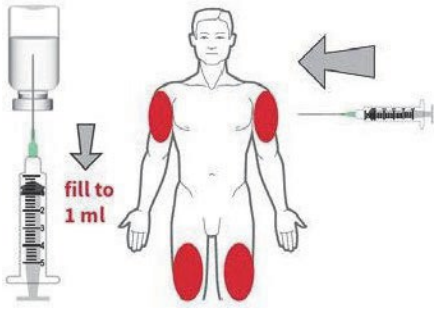
- Immediately after injection, using one hand with fingers behind the needle, slide the safety guard over the needle. Do not use two hands to activate the safety guard.



- Place the individual on their side (recovery position).
- Repeat if there is no response after three minutes.
- Tell the EMS personnel that you administered an injection of naloxone and show them where it was administered.

Intramuscular Naloxone (single or multidose vials)

- Uncap the naloxone vial and uncap the intramuscular (IM) needle (23-25 gauge) and syringe (3mL).
- Insert the IM needle through the rubber membrane on the naloxone vial, turn the vial upside down, draw up 1 ml of naloxone liquid, and withdraw the needle.
- Insert the needle into the muscle of the upper arm or thigh of the victim, through clothing if needed, and push on the plunger to inject the naloxone.
- Repeat the injection if there is no response after three minutes.



2. For all victims, responders should perform compressions and rescue breaths for opioid-associated emergencies if they are trained and have a disposable rescue breathing device or perform hands-only CPR if not trained to perform rescue breaths.

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Contraindications

There are no absolute contraindications to the use of naloxone in an emergency. The only relative contraindication is known hypersensitivity to naloxone.

Adverse Reactions

- Adverse reactions are related to precipitating opioid withdrawal. They include fever, hypertension, tachycardia, agitation, restlessness, diarrhea, nausea/vomiting, myalgias, diaphoresis, abdominal cramping, yawning, and sneezing.
- These symptoms may appear within minutes of naloxone administration and subside in approximately two hours.
- The severity and duration of the withdrawal syndrome is related to the dose of naloxone and the degree of opioid dependence.
- Some individuals may display responses not related to withdrawal, such as temporary amnesia, physical discomfort, or aggression when an opioid overdose is treated.
- **Adverse effects beyond opioid withdrawal are rare.**

Nalmefene Hydrochloride

Nalmefene nasal spray is an opioid antagonist indicated for the emergency treatment of known or suspected overdose induced by natural or synthetic opioids, as manifested by respiratory and/or central nervous system depression. It is safe to give this medication to **adults and pediatric patients aged 12 years and olde**r with symptoms of opioid overdose, even if you are not sure if they overdosed on opioids.

Following nalmefene administration, individuals must be monitored for signs of a recurrence of symptoms of opioid overdose, and an additional dose of nalmefene should be administered if needed.

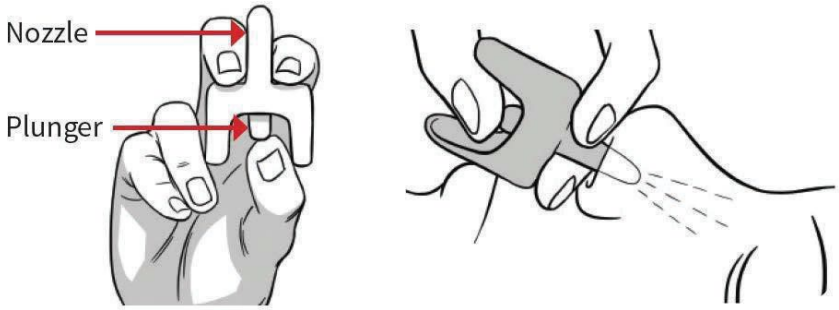
Standardized Procedure for Nalmefene Administration

1. Confirm signs and symptoms of potential opioid overdose.

2. Call 9-1-1 and administer nalmefene as follows:

   Intranasal Nalmefene
   - The device is ready to use; no assembly is required.
   - Peel back the package to remove the device.
   - Do not test the nasal spray. It has only one dose and cannot be reused.
   - Hold the device with your thumb on the bottom of the plunger and two fingers on the nozzle.
   - Place and hold the nozzle tip in either nostril until your fingers touch the bottom of the patient's nose.
   - Press the plunger firmly to release the dose into the patient's nose.
   - Repeat, using the alternate nostril, if there is no response after 2 - 5 minutes using a new nasal spray.

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- If there is still no response and additional doses are available, administer additional doses of nasal spray every 2 - 5 minutes until EMS assistance arrives. Use a new nasal spray in alternate nostrils with each dose.

3. For all victims, responders should perform compressions and rescue breaths for opioid-associated emergencies if they are trained and have a disposable rescue breathing device or perform hands-only CPR if not trained to perform rescue breaths.

Contraindications

There are no absolute contraindications to the use of nalmefene in an emergency. The only relative contraindication is known hypersensitivity to nalmefene.

Adverse Reactions

- The safety and tolerability of nalmefene is similar to naloxone.
- In studies, most individuals (82%) did not experience adverse reactions.
- The main side effects are related to (non-severe, not life-threatening) opioid withdrawal: nausea, vomiting, rapid heart rate, hypertension, pain, fever, and dizziness.
- Some individuals may display responses not related to withdrawal, such as temporary amnesia, physical discomfort, or aggression when an opioid overdose is treated.

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Comparison of Opioid Overdose Reversal Agent Formulations			
Agent	**Formulation**	**Dose**	**Considerations**
Naloxone	Single-dose nasal spray	3 mg/0.1 ml	Easy to use. Lower dose may cause less severe withdrawal, but that means it is more likely that multiple doses might be required. No prescription needed, available over the counter.
Naloxone	Single-dose nasal spray	4 mg/0.1 ml	Easy to use, most common formulation in use. No prescription needed, available over the counter.
Naloxone	Single-dose or multidose vial for intramuscular injection; can also be given intravenously or subcutaneously	0.4 mg/ml	Requires a needle and syringe to administer. Prescription required.
Naloxone	Single-dose prefilled syringe for intramuscular or subcutaneous injection	5 mg/0.5ml	Easy to use. Higher dose compared to other naloxone products, so may cause more severe withdrawal symptoms. Prescription required.
Nalmefene	Single-dose nasal spray	2.7 mg/0.1 ml	Easy to use. Longer lasting than naloxone, so less likely to need more than one dose, but that means that if withdrawal symptoms occur, they may last much longer than with naloxone. Prescription required.

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Illinois Opioid Reversal Agent Standing Order

This standing order is issued by the director of the Illinois Department of Public Health, effective on the date below. It authorizes naloxone entities to obtain and/or distribute opioid reversal agents, syringes, and other components of the naloxone or nalmefene kit to those who may assist an individual suffering an opioid-related overdose. Naloxone entities may include pharmacies, pharmacists, opioid overdose education and naloxone distribution (OEND) programs, schools registered with the Illinois State Board of Education (ISBE), or public libraries established under the Illinois Local Library Act. This standing order is made pursuant to the Substance Use Disorder Act (20 ILCS 301/5-23) and Executive Order 17-05 and should be used in conjunction with the Illinois Opioid Reversal Agent Standardized Procedure.

Intramuscular Injection Naloxone Kits (one of the following with instructions):
- Two (2) 1 ml single-dose vials of naloxone hydrochloride (0.4 mg/ml) with Two (2) 23–25-gauge, 1-1.5 inch intramuscular sterile needles with two (2) 3 ml syringes.
- Two (2) naloxone hydrochloride (5mg/0.5 ml) single-dose, prefilled syringes
- Overdose prevention information pamphlet with step-by-step instructions for use.

Intranasal Spray Naloxone Kits (one of the following with instructions):
- Two (2) naloxone intranasal spray devices (3mg/0.1ml)
- Two (2) naloxone intranasal spray devices (4 mg/0.1ml)
- Overdose prevention information pamphlet with step-by-step instructions for use.

Internasal Spray Nalmefene Kits:
- One (1) box containing two (2) nalmefene nasal spray devices (2.7 mg/0.1ml)
- Overdose prevention information pamphlet with step-by-step instructions for use.

Standing Order

Dispense at minimum two (2) naloxone or nalmefene kits to the entity trained to receive the medication in accordance with the Illinois Opioid Overdose Reversal Agent Standardized Procedure. Unlimited refills are authorized.

Sameer Vohra

License: 036135164
NPI: 1841585783

10/29/2026

Physician's Signature and License No. and NPI No. **Date**

Sameer Vohra, MD, JD, MA

Physician's Name (Print)

Order Effective Date: 11/01/2026
Order Expiration Date: 10/31/2027