

Pharmacist Checklist

Dispensing Naloxone Under the New York City Standing Order

DISPENSE NALOXONE TO ANYONE WHO REQUESTS IT, INCLUDING:

- ✓ Anyone at risk of experiencing an opioid-related overdose
- ✓ Anyone, including friends and family, who may assist someone at risk for an opioid-related overdose
- ✓ Anyone receiving prescription opioid analgesics

Pharmacists may wish to conduct a risk assessment to identify *additional* patients who need naloxone.

The following factors increase overdose risk and may serve as additional screening criteria:

- High-dose opioid prescription (100 or more daily morphine milligram equivalents); chronic opioid therapy (for three months or longer); and concurrent opioid and benzodiazepine prescriptions
- Current or previous opioid misuse or illicit drug use; treatment for opioid use disorder (e.g., methadone, buprenorphine, naltrexone); and opioid overdose history

BILLING:

- Some insurance plans cover naloxone. **Check the patient's insurance coverage** and dispense based on coverage and the patient's preference.
- Unless the patient requests intramuscular, **check their insurance coverage for the single-step intranasal formulation first.**
- **If a patient cannot afford naloxone**, direct them to the NYC Opioid Overdose Prevention Program Directory, which lists places where patients can access naloxone free of charge. Visit health.ny.gov/overdose to download the directory.
- The New York State Department of Health will cover up to \$40 in copays for naloxone through the **Naloxone Co-payment Assistance Program (N-CAP)**. Visit health.ny.gov to learn more.

INCLUDE THE FOLLOWING ELEMENTS WITH EACH PRESCRIPTION:

	Single-step Intranasal (Narcan®):	Multi-step Intranasal:	Intramuscular
Medication	<input type="checkbox"/> 1 x two-pack Narcan®, 4 mg/0.1 mL NDC 69547-353-02, Adapt Pharma	<input type="checkbox"/> 2 x 2 mL pre-filled Luer-Lock needleless syringe, naloxone HCL 1 mg/mL NDC 76329-3369-1, Amphastar	<input type="checkbox"/> 2 x 1 mL single-dose vials, 0.4 mg/mL NDC 0409-1215-01, Hospira or NDC 67457-292-02, Mylan
Required Devices	N/A	<input type="checkbox"/> 2 x MAD 300 intranasal mucosal atomizing devices, order from Teleflex (866-246-6990) or Safety Works Inc. (800-723-3892)	<input type="checkbox"/> 2 x intramuscular (IM) syringe, 3 mL, 23 or 25 g, 1 in
Patient Handout	<input type="checkbox"/> Opioid Safety and How to Use Naloxone (available in English, Spanish, Russian, Chinese, Korean, Haitian Creole, Bengali and Yiddish) or adapted materials		

PRESCRIBER DETAILS:

- Prescriber: Mary T. Bassett
- NPI: 1447616065
- Address: 42-09 28th St., Eighth Floor, Long Island City, NY 11101
- Phone: 347-396-7100
- License: See authorized standing order

INCLUDE THE FOLLOWING ON EACH PRESCRIPTION LABEL:

- Name of recipient or patient
- Prescriber name: Mary T. Bassett, MD
- Naloxone formulation and concentration
- Date dispensed
- Refills: 12 (recommended)
- Below terms:
 - “Dispensed per standing order”
 - “Use as directed”
 - “Trained opioid overdose responder”

GIVE EVERY PATIENT THE HANDOUT ON OPIOID SAFETY AND EDUCATE THEM ON:

- **Naloxone** (opioid antagonist, works in two to five minutes, lasts 30 to 90 minutes, safe)
- **Signs of an overdose or opioid emergency** (unconsciousness, slow or stopped breathing, blue fingernails or lips)
- **Overdose response steps** (call 911, administer naloxone, stay with the person)
- **Additional information** (share information with family and friends, get refills, store at room temperature away from direct light, 911 Good Samaritan Law)

REFILLS AND REPORTING:

- If a patient reports using naloxone, fill out the electronic Pharmacy Overdose Reversal Reporting Form. This form is NOT required to dispense a refill. Visit nyc.gov/health and search for “pharmacy naloxone” to download the form. Completed forms can be submitted online, by email to pharmacynaloxone@health.nyc.gov, or by fax to 347-396-8889.
- Repeat training is not necessary for patients requesting a naloxone refill.