

*Michigan*  
**General Procedures**

INTRANASAL MEDICATION ADMINISTRATION

Date: June 7, 2015

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***Intranasal Medication Administration***

**Purpose:** This procedure authorizes intranasal medication administration by EMS providers an FDA-approved atomizing device. This procedure authorizes the substitution of the intranasal route for other routes specified in individual protocols as approved for specific indications stated below by the local medical control authority.

**MFR/EMT-B/SPECIALIST: Narcan™ (Naloxone) only**

**Indication:**

Altered Mental Status with Suspected Opiate Overdose

**PARAMEDIC**

**Indications:** In general, the intravenous route is preferred for medication administration. This procedure may be considered when IV access is unavailable or when a needleless delivery system is desired because of patient agitation, combativeness, or similar conditions that may pose a safety risk to personnel.

**CHECK MCA APPROVED INDICATION**

Adult Seizures

Pediatric Seizures

Sedation

Adult Pain Control

Pediatric Pain Control

Altered Mental Status with Suspected Opiate Overdose

**Relative Contraindications:**

1. Nasal trauma
2. Epistaxis, nasal congestion, (significant) nasal discharge
3. Known cocaine use is a relative contraindication

**Pre-Medical Control**

**MFR/EMT/SPECIALIST – Limited to Naloxone administration ONLY.**

1. Attach atomizing device to prefilled Naloxone syringe.
2. Use one hand to support back of patient's head as needed.
3. Place tip of atomizing device snugly against nostril aiming slightly upward and outward.

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4. Rapidly administer one half of the dose of medication, briskly pushing plunger.
5. Repeat with other nostril delivering the remaining volume of medication.
6. Note: Maximal dose per nostril is 1 cc.

**PARAMEDIC**

7. Select desired medication and determine dose (See Medication Table).
8. Draw up appropriate dose (volume) of medication plus an additional 0.1 ml to account for device dead space.
9. Attach atomizing device to syringe.
10. Use one hand to support back of patient's head as needed.
11. Place tip of atomizing device snugly against nostril aiming slightly upward and outward.
12. Rapidly administer one half of the dose of medication, briskly pushing plunger.
13. Repeat with other nostril delivering the remaining volume of medication.
14. Note: Maximal dose per nostril is 1 mg.

<b>Indication</b>	<b>Medication</b>	<b>Dose</b>	<b>Comments</b>
Adult Seizure	Midazolam (5 mg/1 cc)	10 mg	-Always use 5mg/1ml concentration
Pediatric Seizure	Midazolam (5 mg/1 cc)	0.2 mg/kg Max 10 mg	-Always use 5mg/1ml concentration
Sedation	Midazolam (5mg/1cc)	0.2 mg/kg Max 10 mg	-Always use 5mg/1ml concentration -Causes brief burning lasting approximately 30 seconds
Suspected Opiate Overdose	Naloxone (1mg/1ml)	2 mg	2mg/2ml refer to individual MCA Narcan Administration Protocol
Adult Pain Control	Fentanyl	2 mcg/kg	
Pediatric Pain Control	Fentanyl	2 mcg/kg	
Use most concentrated form of medication. Do Not dilute. Maximum 1 cc per nostril			