INTRANASAL MEDICATION ADMINISTRATION VIA MEDICATION ATOMIZATION DEVICE “MAD”

PURPOSE:
The intranasal (IN) route is to be used as an optional route of medication administration for ALS and BLS providers Accredited in El Dorado County.

INDICATIONS:
- As indicated by protocol for the administration of Versed, Narcan, Glucagon, and Fentanyl

CONTRAINDICATIONS:
- Facial trauma
- Epistaxis
- Nasal congestion or discharge
- Any recognized mucosal abnormality

RELATIVE CONTRAINDICATION:
- Recent use of vasoconstricting medications (e.g., antihistamines, cocaine, etc.)

PROCEDURE:
Draw up
1. Draw up appropriate medication into a 1 mL or 3 mL luer-lock syringe. Do not dilute the medication.
2. Expel any remaining air from syringe. For smaller (pedi) doses it is allowable to leave some air in the syringe.
3. Firmly attach atomizing device to syringe.
4. Briskly compress the syringe plunger to expel and atomize the medication.
5. Always deliver half the medication dose up each nostril. This doubles the available mucosal surface area (over a single nostril) for drug absorption and increases rate and amount of absorption.

Prefilled Nasal Spray
1. Peel back the top and remove device.
2. DO NOT Prime the device - this will deliver most of the medication into the air.
3. Hold naloxone spray with thumb on bottom of plunger with your first and middle fingers on either side of nozzle.
4. Place nozzle tip in either nostril until your fingers touch the patient’s nose
   a. Keep nozzle parallel with septum
   b. Briskly press plunger
   c. Re-evaluate patient

Maximum (per nostril) medication administration:
- Adults - 1 mL
- Pediatrics - 0.5 mL

Patient may be in any position for IN administration.