### Offer naloxone to every patient with an opioid prescription

Make offering naloxone a habit. Normalize it to reduce stigma.
- Place naloxone kits in your line of sight as a visual reminder.
- Place a kit on display for patients to see.
- Teach other staff members to offer naloxone to distribute the workload.

### How to start a conversation with patients about naloxone

Be direct and consistent.
- You are a role model for your patients and coworkers. Be a leader.
- Think of naloxone as part of the counselling for each opioid prescription. Always include naloxone in your conversations about opioid prescriptions.

Use a regular and routine conversation starter:
- “Have you heard about naloxone? I offer it to every patient I have with an opioid prescription.”

### Watch your language

Words can be stigmatizing and can stop people who use substances from asking for help.
- Use language that reduces stigma to allow for more positive and open conversations between you and your patients.
- Use patient-friendly language to describe overdose symptoms such as slow breathing or adverse reaction to opioids.

<table>
<thead>
<tr>
<th>Less stigmatizing:</th>
<th>More stigmatizing:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person who uses drugs</td>
<td>Addict</td>
</tr>
<tr>
<td>Substance use disorder</td>
<td>Dirty</td>
</tr>
<tr>
<td>Harmful substance abuse</td>
<td>Drug abuse</td>
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</tbody>
</table>

### Identifying patients with risk factors for opioid toxicity

Offer a naloxone kit to everyone with an opioid prescription, especially:
- Acute opioid prescription ≥ 50 MED/day
- Chronic opioid prescription ≥ 90 MED/day
- Taking multiple sedating medications (e.g. benzodiazepines)
- Restarting an opioid or rotating from one opioid to another
- History of mental illness, including alcohol use disorder
- Renal, hepatic, respiratory, or heart disease
- Receiving opioids from multiple sources
- Taking opioid agonist therapy (i.e. methadone)
- History of opioid overdose or intoxication
- No social support
- Using while alone
- Individuals experiencing homelessness
- Older adults (over 65) / frail
- Recent abstinence (detox program, prison)

### Tips for when patients decline a naloxone kit

Be respectful. Not everyone feels like they’re in a position to use a kit. If a patient declines:
- The first conversation doesn’t have to be the last conversation.
- Focus the discussion on how to safely use opioids for pain.
- Let them know if they change their mind, the kits are always available at the pharmacy.
- Invite them to contact you if they have any further questions.

Mention naloxone again the next time you speak with them:
- “Have you given any more thought to a naloxone kit?”
- “Do you have any more questions or concerns about naloxone that I can help you with?”
- “Would you like me to add a naloxone prescription to your refill?”