FENTANYL (intra-nasal) (C)

(Revised: September 2020)



TYPE:	A fast	A fast acting synthetic narcotic analgesic [S8]			
PRESENTATION:	450mcg in 1.5ml <i>(30mcg / 0.1ml)</i> – vial				
ACTION:	Acts on the central nervous system by binding with the opioid receptors				
USES:	ICP	1. Management of moderate to severe pain	AP		
	ICP	2. Safe analgesic alternative in known allergy (anaphylactic) to morphine sulphate	AP		
ADVERSE EFFECTS:	1. Central nervous system depression				
	2. Respiratory depression				
	3. Nausea / vomiting				
	4. Occasionally – bradycardia				
	5. Rigidity of the diaphragm, intercostals and jaw (rare)				
CONTRA-	1. Known allergy or previous reaction to fentanyl				
INDICATIONS:	2. Bleeding or bilateral occluded nose within				
	3. Altered level of consciousness				
	4. Children under the age of 1 year				
PRECAUTION:	Activ	e labour			

continues over

FENTANYL (intra-nasal) (C) – cont.



DOSES - INTRA-NASAL ONLY:

NOTE: add 0.1ml volume to first administration only, to prime device

	AGE	FIRST DOSE	REPEAT	
ICP	1 – 5 years (<20kg)	30mcg (0.1ml)	Up to 30mcg (0.1ml) – repeat every 10 minutes as required	АР
ICP	5 – 12 years (20 – 40kg)	60mcg (0.2ml)	Up to 60mcg (0.2ml) – repeat every 10 minutes as required	АР
ICP	Small adult or adolescent / elderly / frail (40-70kg)	150mcg (0.5ml)	Up to 60mcg (0.2ml) – repeat every 5 minutes as required	АР
ICP	12+ yrs – adult (>70kg)	210mcg (0.7ml)	Up to 60mcg (0.2ml) – repeat every 5 minutes as required	АР

SPECIA	SPECIAL NOTES:				
ICP	maximum 0.5ml volume per nostril. Divide large doses into smaller administrations, alternating nostrils to allow for maximum absorption	AP			
ICP	2. doses of <i>morphine</i> following fentanyl use should be administered at half doses and titrated in response to pain	AP			
ICP	3. doses of <i>ketamine</i> following fentanyl use should be administered at half doses and titrated in response to pain				
	4. fentanyl should not be administered if the maximum dose of morphine has already been administered (AP only)	AP			
ICP	5. antiemetics should only be administered if the patient has nausea / vomiting prior to or post administration of fentanyl	AP			
ICP	6. intra-nasal fentanyl should NEVER be administered IV	AP			