

FENTANYL (intra-nasal) (C)

(Revised: February 2021)



TYPE:	A fast acting synthetic narcotic analgesic [S8]		
PRESENTATION:	<ol style="list-style-type: none"> 250mcg in 1ml (<i>25mcg / 0.1ml</i>) – vial 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:	<ol style="list-style-type: none"> Central nervous system depression Respiratory depression Nausea / vomiting Occasionally – bradycardia Rigidity of the diaphragm, intercostals and jaw (rare) 		
CONTRA-INDICATIONS:	<ol style="list-style-type: none"> Known allergy or previous reaction to fentanyl Bleeding or bilateral occluded nose within Altered level of consciousness Children under the age of 1 year 		
PRECAUTION:	<ol style="list-style-type: none"> Active labour Previous opiates 		

DOSES 250mcg in 1ml:

	AGE	FIRST DOSE	REPEAT	
ICP	1 – 5 years (<i><20kg</i>)	25mcg	Up to 25mcg repeat every 10 minutes as required	AP
ICP	5 – 12 years (<i>20 – 40kg</i>)	50mg	Up to 50mcg repeat every 10 minutes as required	AP
ICP	Small adult or adolescent / elderly / frail (<i>40-70kg</i>)	100mcg	Up to 50mcg repeat every 5 minutes as required	AP
ICP	12+ yrs – adult (<i>>70kg</i>)	200mcg	Up to 50mcg repeat every 5 minutes as required	AP

continues over

FENTANYL (intra-nasal) (C) cont.

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DOSES 450mcg in 1.5ml:

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	AP
ICP	5 – 12 years (20 – 40kg)	60mcg (0.2ml)	Up to 60mcg (0.2ml) – repeat every 10 minutes as required	AP
ICP	Small adult or adolescent / elderly / frail (40-70kg)	150mcg (0.5ml)	Up to 60mcg (0.2ml) – repeat every 5 minutes as required	AP
ICP	12+ yrs – adult (>70kg)	210mcg (0.7ml)	Up to 60mcg (0.2ml) – repeat every 5 minutes as required	AP

SPECIAL NOTES:

ICP	1. Alternate nostrils for each spray until desired dose has been delivered	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
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