



GUIDELINE

Fentanyl - Intranasal

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| Scope (Staff): | All Emergency Department Clinicians |
| Scope (Area): | Emergency Department |

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<http://kidshealthwa.com/about/disclaimer/>

Fentanyl - Intranasal

Medication

Indications

- Pain relief in children in moderate – severe pain requiring opiate analgesia
- No IV cannula in place as yet

Contraindications

- Known fentanyl hypersensitivity
- Altered conscious state: GCS < 15
- Bilateral occluded nasal passages
- Epistaxis
- MAOI anti-depressant within 14 days

Adverse

Adverse effects are uncommon, but may include:

- Respiratory depression
- Hypotension
- Nausea and vomiting
- Itch
- Chest wall rigidity (only reported in rapid large IV doses)

Dosage

- Age: 1 – 18 years (Use with caution in children < 12 months)
- Dose: 1.5 micrograms/kg per dose, intra-nasally
- Repeat after 5 – 10 minutes, if required
- If further analgesia required after the second dose, obtain medical review and consider alternative analgesia
- It is acceptable to prescribe multiple dosages if efficacy is good

Administration

- Draw up calculated dose of Fentanyl according to weight, plus an extra 0.1ml in a 1ml syringe to load atomiser
- Attach atomiser (MAD device WolfeTory ®) to the 1ml syringe
- Prepare atomiser by priming with 0.1ml of fentanyl
- Position patient either sitting up at 45° or with head to one side
- Administer dose by inserting into nostril loosely and aim for centre of nasal cavity prior to squirting
- If the dose is > 0.25mL, split between both nostrils to prevent loss of solution by sneezing or swallowing
- Depress the plunger quickly
- Hold atomiser in place for further 5 secs to prevent medication from dribbling out of nostril

Special

Observations:

- Time of administration
- Baseline pre-narcotic observations if possible: HR, RR, BP, oxygen saturations
- Observe closely for adverse effects and over sedation

Treatment of overdose:

- Support airway
- Oxygen
- Assist ventilation
- Consider Naloxone as reversal agent:
 - Naloxone is available in the Resus Room
 - Should be administered for excess sedation or respiratory depression
 - Dose – 1-5 micrograms/kg IV, maximum dose of 100 micrograms, may be repeated every 2-3 minutes if required

- Has short duration of action – approximately 30 minutes, may necessitate repeat doses or infusion


Tags

analgesia, atomiser, fentanyl, injury, intranasal, mad, opiate, pain, relief, repair

References

PMH ED Guideline – Intranasal Fentanyl: Last Updated July 2014
 AMH Children's Dosing Companion (online). Adelaide: Australian Medicines Handbook Pty Ltd; 2014 July. Available from: <https://childrens.amh.net.au>

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