

Washington State Statewide Standing Order to Dispense Naloxone FAQs

- **Do I need to bring a copy of the standing order with me to show the pharmacist?** Washington State Department of Health suggests that you bring a [digital](#) or printed copy of this standing order with you to the pharmacy to share with the pharmacist.
- **Do I have to show identification or proof of need for naloxone if I use the standing order at a pharmacy?** There is a reasonable expectation that you will need to show identification to the pharmacist. However, you are not required to disclose why you are requesting a naloxone kit, nor to demonstrate any proof of needing the kit (such as a current opioid prescription).
- **Can we use the standing order to distribute naloxone at our organization if we do not have a physician on site?** YES! Follow the guidelines in the standing order – you must “ensure that directions for use are provided”. This can be accomplished by providing verbal instructions, a video, or a written instruction guide. Training materials can be found [here](#).

Dispensing:

- **I’m a pharmacist- whose name, NPI # and address do I list as the prescribing physician on the prescription when using the standing order?** The standing order was signed by Washington State Department of Health Chief Science Officer Tao Sheng Kwan-Gett, MD MPH.

Dr. Tao Sheng Kwan-Gett

NPI # 1225130941

P.O. Box 47890, Olympia, WA 98504-7890

The standing order functions like an individual prescription written in the recipient’s name.

- **Do I need to verify the age of the customer before dispensing naloxone?** There is no minimum age specified in the standing order. Follow your pharmacy’s protocol for any age limits when dispensing medication; if no protocol exists, we suggest that you use your best judgement to determine the ability of the patient to recognize the signs and symptoms of an opioid overdose and to administer the naloxone.
- **When does the standing order expire?** There is no expiration date on the standing order.
- **Why isn’t the high-dose naloxone formulation on the standing order?** Washington State Department of Health [supports the practice of using standard formulations of 4 mg/0.1mL nasal naloxone or 0.4mg/1mL intramuscular naloxone to reverse the effects of an opioid overdose](#). Standard formulations of naloxone are an appropriate response for all opioid overdose events, including fentanyl-involved overdoses. More than one dose of naloxone may be needed to reverse an overdose. The Washington Department of Health does not recommend the routine use of higher dose naloxone formulations (e.g., 5 mg or more) because of the risks of precipitating acute withdrawal symptoms in people who are opioid dependent.

DOH 150-148 May 2024

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.