



**Acknowledgement of Training Received**

- I have received training on how to administer Narcan Nasal Spray in the event of an Opioid Overdose.  
My signature below indicates my acknowledgement and understanding of how to use Naloxone Nasal Spray in response to an Opioid Overdose.

**Use of Naloxone (Narcan) Outcome Report**

- How to complete this form was explained to me, along with why it is important to complete this form after using the Narcan, and to call the phone number printed at the top of this form to report the results.

**Acknowledgement of Receipt of Naloxone (Narcan) Nasal Spray**

- My signature below acknowledges my receipt of \_\_\_\_\_ units of Narcan Nasal Spray \_\_\_\_\_ mgs

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Recipient print name	Recipient signature	Date
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