



Western Nevada College ENVIRONMENTAL HEALTH AND SAFETY

SPOTLIGHT ON SAFETY

Nevada continues to face a critical public health challenge concerning trends in drug and opioid-involved overdose fatalities.

Overdose Mortality Trends & Substances:

Nevada has recently experienced notable increases in overdose fatalities, trending in the wrong direction compared to the national average in some demographic and substance sectors. The crisis is increasingly driven by synthetic opioids like illicitly manufactured fentanyl, frequently mixed with stimulants or other substances, leading to a complex “polysubstance” overdose landscape. Nearly 2 out of 3 overdose deaths in Nevada involve an opioid, over half involve a stimulant (such as methamphetamine), and a significant portion involve both.

Nevada actively tracks emergency room encounters, hospital admissions, and mortality through the [Nevada Opioid Overdose Surveillance Dashboard](#)

Demographics & Locations & Prevention

- **Regional Disparities:** Clark County (home to Las Vegas) accounts for the vast majority of statewide overdose fatalities, though rural and northern regions, including Carson City and Washoe County, consistently report high rates relative to their populations.
- **Age & Gender:** Fatalities disproportionately impact males, who account for over 65% of overdose deaths. The highest number of overdose deaths are generally found in the 25 to 54 age range.
- **Circumstances of Overdose**
- **Home Settings:** Over 80% of overdoses occur in a home setting.
- **Bystander Presence:** Bystanders are present in over half of fatal overdose incidents.
- **Prescription Reduction:** Nevada has seen significant success in reducing the number of opioid painkillers prescribed statewide, dropping by almost 40%.
- **Naloxone & Harm Reduction:** Naloxone distribution and Overdose Education initiatives are widely deployed across the state to reverse the effects of opioids during an emergency.

WNC received a supply of Naloxone nasal spray (generic name for Narcan) from CASAT (<https://casat.org/>), a community outreach center based within the School of Public Health at the University of Nevada, Reno. Naloxone kits will be located in WNC’s Cintas AED cabinets, in our Emergency Response Teams’ backpacks, and in Dini’s Student Center as supplies last.

Please consider taking the suggested 20-minute Opioid Overdose Response Awareness training in Vector Solutions for an overview of response procedures and opioid reversal agents, such as Naloxone.

OPIOID OVERDOSE



**IF YOU SUSPECT AN OPIOID
OVERDOSE, CALL 911**

**GET A NALOXONE KIT FROM AN
AED CABINET**

**THEN REMEMBER
SAY, LAY, SPRAY, & STAY**

Say: Loudly “Are you OK?”

Lay: Lay the person on their back, support their neck with your hand, and tilt head back.

Spray: Gently insert the tip of the nozzle into one nostril of the patient, until your fingers on either side of the nozzle are against the bottom of the patient's nose. Press the plunger firmly to spray one dose of naloxone into one nostril (either one).

Stay: Watch for 2–3 minutes; if they do not wake up, give a second dose by spraying in the opposite nostril.

Continue: Give a new dose every 2 to 3 minutes, alternating nostrils, until the person wakes up or emergency personnel arrive.

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