

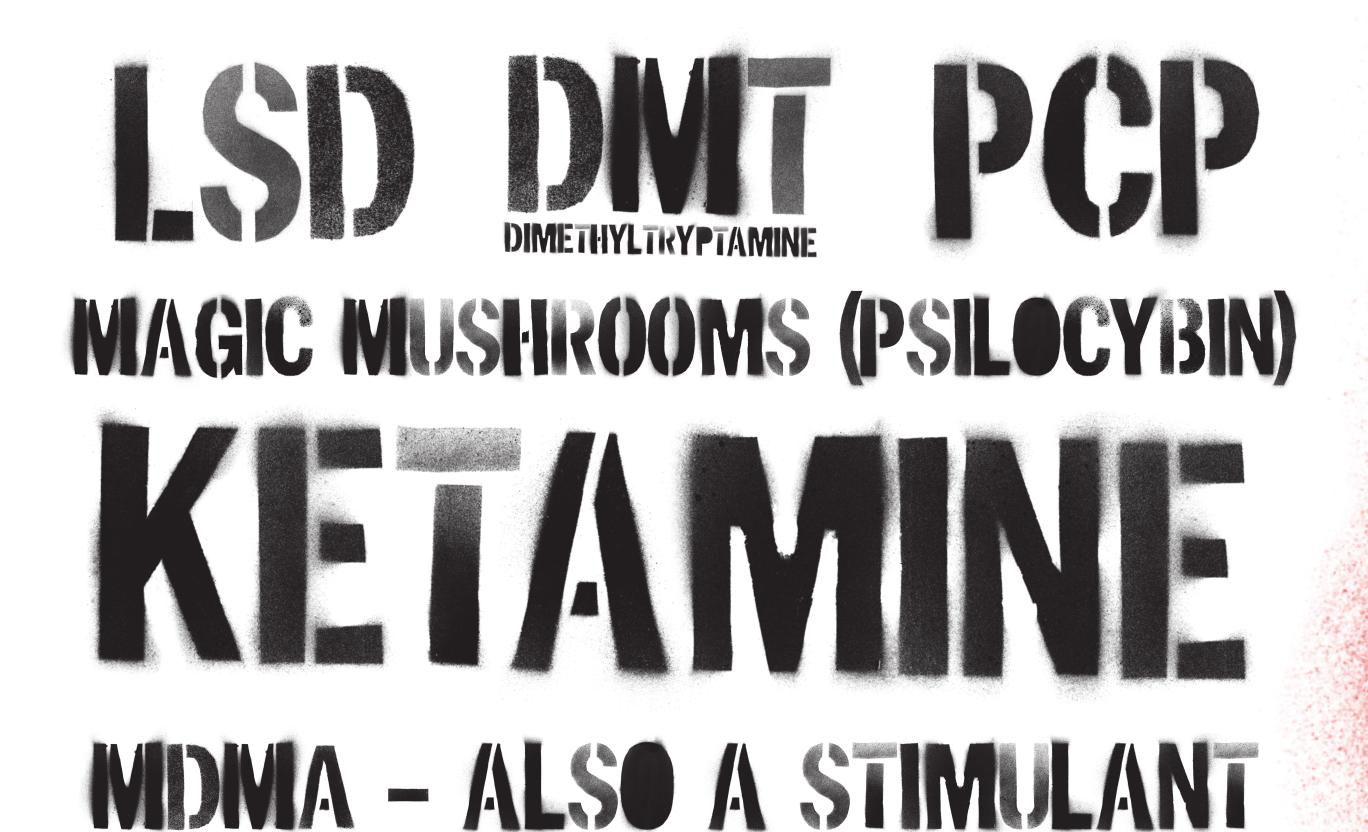
PREVENTION AND RESPONSE

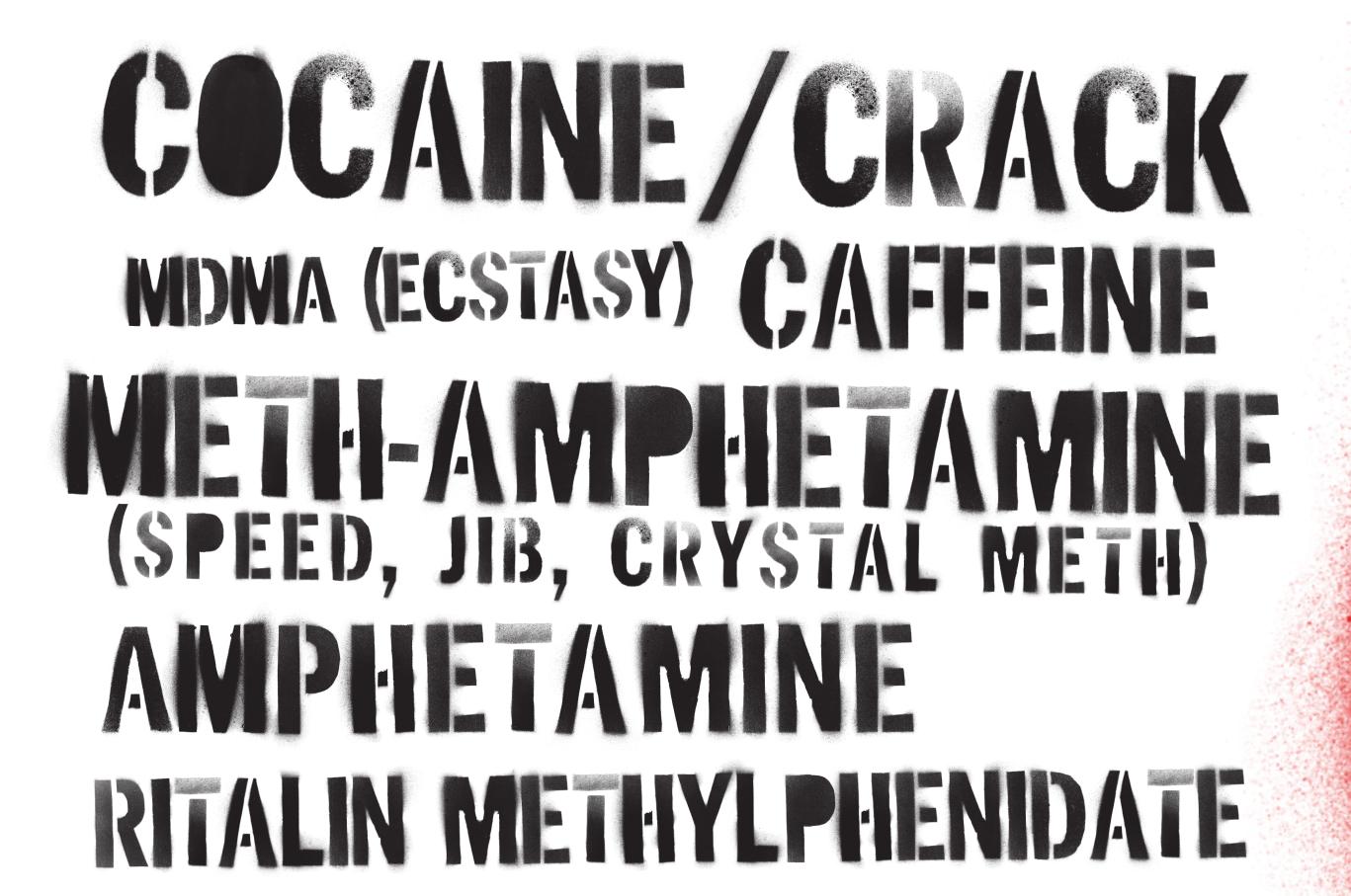
PSYCHEDELIUS

SIMULANIS

#4

DEPRESSANTS







OXYCODONE CODEINE DEMEROL FENTANYL/CARFENTANIL PENTAZOCINE (TALWIN) HYDROCODONE (VICODIN, OXYCONTIN) HYDROMORPHONE (DILAUDID)

OVERDOSE RISK FACTORS

MIXING

Prevention: use one drug at a time and let it take full effect, don't mix highest risk (least predictable or unknown) ones, if mixing drugs with alcohol - use drug first.

TOLERANCE

Prevention: use less at times your tolerance might be reduced (e.g. health).

ENVIRONMENT

Prevention: "fix with a friend", leave door unlocked, call someone.

QUALITY

Prevention: tester shots, use a reliable/ consistent dealer, start small and do a tester if using a new dealer or if in a new town. Overdose does not usually happen right away - up to three hours after taking an opioid. Stagger use with friends so some one can act as the designated responder.

HEALTH / PREVENTION

eat, drink, sleep, see a doctor, carry inhaler, treat infections, etc. be aware.

SI WILL AND SIGNS OF OVERDOSE

SHORT OF BREATH

BODY IS HOT/SWEATY OR HOT/DRY

CONFUSION, HALLUCINATIONS

VOMITING

CLENCHED JAW

SHAKY AND FITTING

CHEST PAIN

SEIZURES

LOSING CONSCIOUSNESS

SEVERE HEADACHE

SIMULANI RESPONSE **OVERDOSE**

OVER-AMPED:

THE PERSON IS CONSCIOUS AND NOT HAVING OVERDOSE SYMPTOMS

- Keep calm
- Give water or fluid with electrolytes.
- Cool
- Fresh air
- Don't let them take more drugs

OVERDOSE:

- Call 911
- Stay with the person
- Keep them conscious, hydrated, calm and cool
- If heart has stopped do "hands only" CPR if you know it
- There are no medications to safely reverse a stimulant overdose



OPIOIS AND DEPRESSANTS

SIGNS OF OVERDOSE

PERSON CANNOT STAY AWAKE

CAN'T TALK OR WALK, BODY LIMP

NO RESPONSE TO YELLING OR RUBBING KNUCKLES ON CENTRE OF CHEST

SLOW OR NO BREATHING, GURGLING OR WEIRD SNORING SKIN IS COLD, PALE, OR BLUISH, LIPS BLUE

PUPILS ARE VERY SMALL OR EYES ROLLED BACK

VOMITING

SLOW OR NO PULSE

OPIOIDS AND OVERDOSE DEPRESSANTS RESPONSE

STIMULATE AND CALL 911

AIRWAY

VENTILATE

EVALUATE

MEDICINE

EVALUATE

STIMULATE

- Use the person's name
- Let them know you are going to touch them
- Give a sternal rub
- Call 911

AIRWAY:

- Check mouth
- Look, listen and feel

VENTILATE

- Alone: give 2 breaths then prep naloxone
- Not alone: start CPR while someone else prepares naloxone

EVALUATE

MEDICINE:

PREPARE AND ADMINISTER NALOXONE

- Ampoules: shake contents and snap off top
- Draw up the entire contents (1 ml = 0.4 mg)
- Hold needle tip up, push air out
- Site location: Shoot into muscle, not a vein. Thigh muscle is preferred
- Inject: use a 90 degree angle and push in the plunger until the syringe 'clicks'

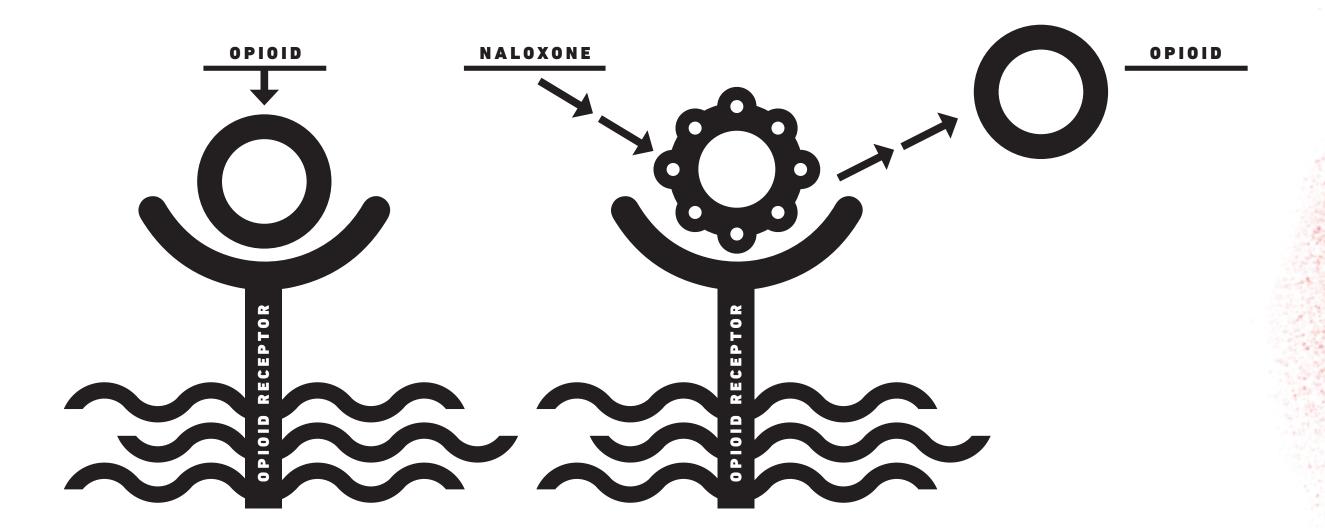
EVALUATE

- Give CPR
- Is a second dose required?

CONTINUE TO ADMINISTER EVERY 3-5 MINUTES AND DO CPR UNTIL HELP ARRIVES

HOW DOES NALOXONE WORK?

NALOXONE KNOCKS THE OPIOID OFF THE RECEPTOR SITE - WHICH REVERSES THE OVERDOSE



NALOXONE WEARS OFF IN 20-90 MINUTES

THE PERSON PROBABLY WON'T REMEMBER, AND THEY MIGHT FEEL SICK (WITHDRAWAL)

EXPLAIN WHAT HAPPENED AND BE SUPPORTIVE

DON'T ALLOW THE PERSON TO DO MORE DRUGS (THEY WILL BE WASTING THE DRUG AND MIGHT OD AGAIN)

WITHDRAWAL SYMPTOMS WILL START TO GO AWAY AS THE NALOXONE WEARS OFF (20-90 MINUTES)

STAY WITH THE PERSON FOR 2 HOURS: THE OVERDOSE MAY RETURN

CARING FOR YOUR TAKE-HOME-NALOXONE KIT

KEEP OUT OF SUNLIGHT AND KEEP AT ROOM TEMPERATURE

EXPIRES IN ABOUT 2 YEARS

IF YOU NEED ANOTHER KIT FOR ANY REASON, PLEASE GET A REPLACEMENT

IF YOU USE YOUR NALOXONE IN AN OVERDOSE EVENT. REPORT TO YOUR LOCAL RHA

WWW.STREETCONNECTIONS.CA

WWW.TOWARDTHEHEART.COM

WWW.MHRN.CA

PROVINCIAL OVERDOSE PREVENTION, RECOGNITION AND RESPONSE TRAINING MANUAL: HTTP://WWW. GOV.MB.CA/FENTANYL/SERVICE-PROVIDERS.HTML

