Choose Before You Use

If at all possible, do not use. There is no safe dose of opioids. Help is available, contact your local VA. But if you do use—Choose!

- Go Slow Not taking drugs for even a few days can drop your tolerance, making your "usual dose" an "overdose," which can result in death. If you choose to use, cut your dose at least in half.
- 2. Wait If you choose to use, wait long enough after you use to feel the effects before you even consider dosing again (regardless if IV, snorting, smoking).
- 3. Let Someone Know Always let someone know you're using opioids so that they can check on you. Many who overdose do so when dosing alone.

Buddies take care of Buddies. Share this brochure with a friend or family member.



www.mentalhealth.va.gov/substanceabuse.asp

(Adapted from the Harm Reduction Coalition, Oakland, CA)



You are at higher risk for opioid overdose or death when

• You've <u>not used for even a few days</u>, such as when you are in the hospital, residential treatment, detoxification, domiciliary, or jail/prison.

Lost tolerance = higher risk for overdose (OD).

- You <u>use multiple drugs or multiple opioids</u>, especially: downers/ benzodiazepines/ barbiturates, alcohol, other opioids, cocaine (cocaine wears off faster than the opioid).
- You <u>have medical problems</u> (liver, heart, lung, advanced AIDS).
- You <u>use long-acting opioids</u> (such as methadone) or <u>powerful opioids</u> (such as fentanyl).
- You <u>use alone</u>, and don't let someone know you are using opioids.

Ask a VA clinician if naloxone is right for you

Important considerations:

- Naloxone works only for opioid overdose and may temporarily reverse opioid overdose to help a person start breathing again.
- During an overdose the user cannot react, so someone else needs to give naloxone.
- Encourage family and significant others to learn how to use naloxone (see "Overdose Resources" section).
- If you have naloxone, tell family and significant others where you keep it.
- Store naloxone at room temperature (59° to 77° F), away from light. Avoid extremes of heat or cold (e.g., do not freeze).

CHOOSE BEFORE YOU USE

OPIOID OVERDOSE PREVENTION

Overdose Resources

SAMHSA Opioid Overdose Prevention Toolkit

Contains safety advice for patients and resources for family members

 <u>http://store.samhsa.gov/product/Opioid-Overdose-</u> <u>Prevention-Toolkit/SMA13-4742</u>

Community-Based Overdose Prevention and Naloxone Distribution Program Locator

Identifies programs outside of the VA that distribute naloxone

<u>http://hopeandrecovery.org/locations/</u>

Prescribe to Prevent

Patient resources and videos demonstrating overdose recognition and response, including naloxone administration

• <u>http://prescribetoprevent.org/video/</u>

"How To" VA Naloxone Video

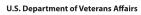
VA Naloxone Nasal Spray:

<u>https://youtu.be/Ow-us7fQE3s</u>

VA Naloxone Auto-Injector Kit:

<u>https://youtu.be/-DQBCnrAPBY</u>





Veterans Health Administration Employee Education System

Signs of Overdose

Signs of an Overdose*

Check: Appears sleepy, heavy nodding, deep sleep, hard to arouse, or vomiting

Listen: Slow or shallow breathing (1 breath every 5 seconds); snoring; raspy, gurgling, or choking sounds

Look: Bluish or grayish lips, fingernails, or skin

Touch: Clammy, sweaty skin

- If the person shows signs of an overdose, see next section "Responding to an Overdose"
 - * Even if the person responds to an initial safety check, bystanders should continue to monitor any person with these signs constantly to make sure the person does not stop breathing and die.

Resources

Consider seeking long-term help at your local VA substance use disorder treatment program

Help on the Web

- » VA Substance Use Disorder Program Locator: www2.va.gov/directory/guide/SUD.asp
- » Substance Use Disorder Treatment Locator for non-Veterans: https://findtreatment.samhsa.gov/
- » VA PTSD Programs: www.va.gov/directory/quide/PTSD.asp

Help is Available Anytime

- » Local Emergency Services: 911
- » National Poison Hotline: 1-800-222-1222
- » Veterans Crisis Line: 1-800-273-TALK (8255), or text - 838255

Responding to an Overdose

1 Check For A Response

- Lightly shake person, yell person's name, firmly rub person's sternum (bone in center of chest where *ribs connect*) with knuckles, hand in a fist
- If person does not respond—Give Naloxone, Call 911

2. Give Naloxone, Call 911

- If you have naloxone nasal spray, DO NOT PRIME OR TEST the spray device. Gently insert the tip of the nozzle into one nostril and press the plunger firmly to give the entire dose of naloxone nasal sprav.
- If you have the naloxone auto-injector, pull device from case and follow voice instructions.
- When calling 911, give address and say the person is not breathing.

3. <u>Airway Open</u> **Rescue Breathing** (if overdose is witnessed)

- Place face shield (optional)
- Tilt head back, lift chin, pinch nose

4. Consider Naloxone Again

breathing again

5. <u>Recovery Position</u>

• If person doesn't start breathing in 2-3 minutes, or

responds to the first dose of naloxone and then stops breathing again, give second dose of naloxone

Because naloxone wears off in 30 to 90 minutes be sure to

stay with the person until emergency medical staff take over or for at least 90 minutes in case the person stops

• If the person is breathing but unresponsive, put the person

on his/her side to prevent choking if person vomits

- Give 1 breath every 5 seconds
- Chest should rise

Chest Compressions (if collapse is unwitnessed)

- Place heel of one hand over center of person's chest (between nipples)
- Place other hand on top of first hand, keep elbows straight, shoulders directly above hands
- Use body weight to push straight down, at least 2 inches, at rate of 100 compressions per minute
- Place face shield (optional)
- Give 2 breaths for every 30 compressions



Rub Sternum



Auto-injector

Nasal Spray (4 mq)





Rescue Breathing

Chest Compressions (if collapse is unwitnessed)

(if overdose is witnessed)





