

# Naloxone Training Resource

## Participant Knowledge Checklist

This checklist provides a guidance for **trainers** to assess the knowledge of the participant following a naloxone training session. As the trainer/educator you should be confident that each knowledge objective was covered in the training and that the participant understands each objective.

| KEY LEARNING OBJECTIVES                  |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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| <b>Drug Poisoning Prevention</b>         |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/>                 | List factors that can increase, and reduce, harms from drug poisoning. | Demonstrates knowledge of factors associated with increased and reduced harms from drug poisoning (e.g., mixing substances, irregular or interrupted use, etc.). <ul style="list-style-type: none"> <li>Using stimulants with opioids DOES NOT reduce or reverse opioid toxicity.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Opioid Poisoning Recognition</b>      |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/>                 | Identify key features of opioid toxicity.                              | Understands key features of an opioid poisoning. <ul style="list-style-type: none"> <li>slow or no breathing (less than 1 breath every 5 seconds or 12 breaths per minute), and</li> <li>less responsive to voice or pain</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Naloxone Basics</b>                   |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/>                 | Understand effects of naloxone on the body.                            | Demonstrates understanding that naloxone: <ul style="list-style-type: none"> <li>Reverses the opioid effect on the body (antidote).</li> <li><b>Restores breathing</b> that is slowed or stopped by opioids.</li> <li>Is <b>safe</b> and has no effect (on the body) if opioids are not involved.</li> <li>Starts working quickly and the <b>temporary</b> effects can last between 30-120 minutes. An opioid poisoning can return when naloxone starts to wear off.</li> <li>WILL NOT reverse effects of stimulants and other non-opioid substances (i.e., benzos, alcohol, xylazine).</li> </ul> <p>Identifies when to stop giving naloxone (when the person is breathing normally).</p>                                                                                      |
| <b>Responding to an Opioid Poisoning</b> |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/>                 | Manage opioid poisoning emergency.                                     | Understands drug poisoning is a medical emergency and escalating emergency response is a critical part of response. <p><i>Describes:</i></p> <ul style="list-style-type: none"> <li>What to tell the 911 operator and emergency responders when they arrive.</li> <li>The recovery position and detail when to put someone in position.</li> <li>The importance of talking to the person experiencing drug poisoning, tell them what is happening even if they are unresponsive.</li> <li>The importance of giving rescue breaths (1 breath every 5 seconds) until normal breathing is restored (12 or more breaths per minute). <ul style="list-style-type: none"> <li>When the body does not get enough oxygen, brain injury can occur within minutes.</li> </ul> </li> </ul> |

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| <input type="checkbox"/> | Implement SAVE ME steps. | <p><i>Describes how to:</i></p> <ul style="list-style-type: none"> <li>• Check if someone is responsive.</li> <li>• <b>Call 9-1-1</b></li> <li>• Check if someone is breathing normally.</li> <li>• Open and re-position the airway.</li> <li>• Give rescue breaths effectively with 1-way face shield.</li> <li>• Every 3 minutes (35-40 breaths) of rescue breathing, re-check breathing and responsiveness. Check again if the person is responsive and if they have started breathing normally.</li> <li>• Give naloxone if the person is not breathing normally.</li> <li>• Continue to evaluate breathing and responsiveness. Provide support.</li> </ul> <p><i>Details the following considerations:</i></p> <ul style="list-style-type: none"> <li>• To prevent injury to the person, use caution when trying to wake them up (i.e., avoid sternal rub).</li> <li>• To prevent delay in response, try to wake someone with unusual breathing sounds (i.e., snoring, gurgling).</li> <li>• If the person is still not breathing normally after giving naloxone, give another dose of naloxone: <ul style="list-style-type: none"> <li>○ Every 3 minutes (35-40 breaths) after last dose of injectable naloxone OR</li> <li>○ Every 3 minutes after the last dose of intranasal (nasal) naloxone.</li> </ul> </li> <li>• Continue rescue breaths while giving naloxone time to work and until the person is breathing normally on their own (<b>12 or more breaths per minute</b>) <ul style="list-style-type: none"> <li>○ Stop giving naloxone once the person breathing normally, even if they are unresponsive.</li> </ul> </li> </ul> |
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**Aftercare**

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| <input type="checkbox"/> | Care for someone immediately after giving naloxone. | <p><i>Describes how to:</i></p> <ul style="list-style-type: none"> <li>• Tell first responders about the first aid provided (e.g., how many doses, time of last dose, substances consumed, etc.)</li> </ul> <p><i>Respectfully and non-coercively encourage the person:</i></p> <ul style="list-style-type: none"> <li>• To go for further monitoring. This is recommended because poisoning can return as temporary effects of naloxone wear off.</li> <li>• To avoid using more opioids until the naloxone wears off. Taking more opioids will: <ul style="list-style-type: none"> <li>○ Have no effect until naloxone has worn off,</li> <li>○ Not ease any precipitated withdrawal symptoms, and</li> <li>○ Not result in desired effects (euphoria).</li> </ul> </li> </ul> <p><i>Details the following considerations:</i></p> <ul style="list-style-type: none"> <li>• If person does not go for further monitoring it is recommended to stay with them for least 2 hours (120 minutes).</li> <li>• If the person regains consciousness, they may be confused. It can be helpful of you: <ul style="list-style-type: none"> <li>○ Tell the person who you are,</li> <li>○ explain what happened and how you responded</li> </ul> </li> </ul> |
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| Additional Information   |                                                    |                                                                                                                                                                                                                                                                                                                                                             |
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| <input type="checkbox"/> | <b>Naloxone Storage &amp; Replacement Supplies</b> | <p>Understands that naloxone should be stored out of the light at room temperature.</p> <p>Can locate the expiry date on a kit or ampoule.</p>                                                                                                                                                                                                              |
| <input type="checkbox"/> | <b>Training &amp; Resources</b>                    | <p>Knows that more information is available at <a href="http://www.towardtheheart.com">www.towardtheheart.com</a>.</p> <p>Drug poisoning response and prevention and response recommendations continue to adapt and change with new evidence. We recommend that individuals refresh their knowledge annually and if skills have not been used recently.</p> |