



# FR / EMR Scope of Practice Update Scenario: Opioid Poisoning

Scene Survey	
<b>H</b> azards	None
<b>E</b> nvironment	Private residence at midnight
<b>M</b> echanism of Injury	The police were called to attend a noise complaint at a house party. While clearing the residence they found an unresponsive patient on the carpeted floor of the downstairs family room.
<b>P</b> atients (#)	One
<b>A</b> dditional Resources	Fire department first responders have arrived on scene with you.
<b>PPE</b> / <b>G</b> eneral <b>I</b> mpression	The patient is lying supine on the floor. The eyes are closed. The patient is not moving and appears pale on approach.
Primary Survey	
<b>LOC (AVPU)</b>	The patient's eyes are closed, and they do not respond to voice or pain.
<b>Delicate Spine / SMR</b>	Rule out with questioning / no evidence of trauma / soft carpeted floor.
<b>ABCs:</b> <ul style="list-style-type: none"> <li>• Airway</li> <li>• Breathing</li> <li>• Circulation</li> </ul>	Snoring sounds are initially heard, but resolve with a head-tilt/chin-lift. Breathing is slow and shallow, with minimal chest rise. Carotid pulse is weak and rapid. <b>Insert an OPA and direct a First Responder to begin BVM ventilations (1 breath every 5 to 6 seconds).</b>
<b>RBS</b>	The patient has track marks in the crease of the left elbow.
<b>Skin</b>	Cyanotic, cold and pale
<b>O<sub>2</sub></b>	<b>Apply the SpO<sub>2</sub> monitor. Oxygen applied with the BVM ventilations (15lpm).</b>
<b>Airway</b>	Maintained
<b>Position</b>	Maintain supine positioning due to BVM ventilations.
<b>Bandage &amp; Blanket</b>	Not needed
Transport Decision	
<b>Stable or Unstable?</b>	Unstable. <b>If EMR: Direct a partner to prep egress/transport while you continue with your assessment.</b>

## Secondary Survey

<b>Secondary Survey</b>	
<b>History/Interview:</b> <ul style="list-style-type: none"> <li>• <b>Onset</b> – The patient is unresponsive.</li> <li>• <b>Provoke</b> –</li> <li>• <b>Quality</b> –</li> <li>• <b>Region/Radiation</b> –</li> <li>• <b>Severity</b> –</li> <li>• <b>Time</b> –</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Signs and Symptoms</b> – Unresponsive</li> <li>• <b>Allergies</b> – Unknown</li> <li>• <b>Medications</b> – Unknown</li> <li>• <b>Past Medical History</b> – Unknown</li> <li>• <b>Last Oral Intake</b> – Unknown</li> <li>• <b>Events</b> – Found unresponsive by the police</li> </ul>
<b>Baseline Vital Signs:</b> <ul style="list-style-type: none"> <li>• LOC (GCS)</li> <li>• Blood Pressure</li> <li>• Respirations</li> <li>• SpO<sub>2</sub></li> <li>• Pulse</li> <li>• Skin</li> <li>• Pupils</li> <li>• Blood Glucose</li> <li>• Temperature</li> </ul>	<ul style="list-style-type: none"> <li>• U on AVPU (FR). GCS 111 = 3/15 (EMR)</li> <li>• 110/72</li> <li>• Intrinsic: 4, shallow, ineffective. BVM ventilations are effective</li> <li>• 95% with BVM ventilations and 15lpm O<sub>2</sub></li> <li>• 96, weak and rapid</li> <li>• Cyanotic, pale, cold</li> <li>• 1 x 1, equal but not reactive (pinpoint)</li> <li>• 5.3 mmol/L</li> <li>• Not applicable</li> </ul>
<b>Administer 1st dose of naloxone</b>  <b>FOR FR:</b>  <b>FOR EMR:</b>	<b>Administer 0.4mg naloxone IM</b> (following the steps listed on the Administer Naloxone via IM Injection Checklist).  <b>Continue with assessment and treatment on scene while waiting for transportation.</b>  <b>Complete transport after 1st dose, and then continue with assessment and treatment while en route to the hospital.</b>  <b>Notify hospital.</b>
<b>Head to Toe:</b> <ul style="list-style-type: none"> <li>• Head</li> <li>• Neck</li> <li>• Chest</li> <li>• <b>Lung Sounds(EMR)</b></li>   <li>• Abdomen</li> <li>• Back</li> <li>• Pelvis</li> <li>• Lower Extremities</li> <li>• Upper Extremities</li> </ul>	<ul style="list-style-type: none"> <li>• No abnormalities detected.</li> <li>• Trachea is midline. No JVD is noted.</li> <li>• No abnormalities detected.</li> <li>• Clear, equal air entry bilaterally from apex to bases (with BVM ventilations).</li> <li>• Soft x 4. No rigidity or guarding noted.</li> <li>• No abnormalities detected.</li> <li>• Stable.</li> <li>• No abnormalities detected. Peripheral pulses are weak.</li> <li>• Track marks in the crease of the left elbow. Peripheral pulses are weak.</li> </ul>
<b>Ongoing Exam and Treatments</b>	
<b>Vitals Signs</b>	Re-assess vital signs every 5 minutes (unstable patient).
<b>Treatments</b>	Repeat naloxone administration after 3 minutes if the patient remains unstable (no improvement in LOC or respiratory effort), using the following dosing scheme at 3-minute intervals as needed: 1st dose: 0.4mg IM 2nd dose: 0.4mg IM 3rd dose: 0.8mg IM 4th dose: 2.0mg IM
<b>Hospital Report</b>	Name, Age, Gender, C/C, HxC/C, PmHx, Rx, Allergies, Vital Signs, Physical Findings, Protocols / Treatments and Results.