

From : Rhodes, Jason (RIDOH) <Jason.Rhodes@health.ri.gov>

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Subject : FW: Alert: Increased Drug Overdose Activity in Cranston, Coventry & W. Warwick

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Inquiries can be made by replying to this communication.

Public Health Advisory: Rhode Island Overdose Action Area Response Cranston, Coventry, and West Warwick

The Rhode Island Department of Health (RIDOH) is issuing a public health advisory due to increased drug overdose activity in Cranston, Coventry, and West Warwick.

From Monday, April 9–Sunday, April 15, 2018, RIDOH received seven reports of suspected drug overdoses from hospital emergency departments. Increased drug overdose activity in this area is considered more than five non-fatal/fatal overdoses within a seven-day period.

Emergency responders, Emergency Department (ED) providers, and overdose treatment providers should be aware that in 2016, over 50% of Rhode Island's overdose deaths involved fentanyl. Fentanyl is 100 times more potent than morphine and 50 times more potent than heroin. Most cases of fentanyl-related overdoses have been linked to illicitly-manufactured fentanyl.

Emergency Medical Services, Fire Departments, and Law Enforcement:

Promptly identify signs and symptoms of opioid overdose, including central nervous system depression (i.e., coma, lethargy, or stupor); constipation; nausea; vomiting; respiratory depression; and seizures.

If fentanyl is suspected, multiple doses of naloxone may be required to reverse overdose.

Intramuscular injection is preferred.

Train your staff and use personal protective equipment to prevent occupational exposure to fentanyl and other synthetic opioids.

Share 401-942-STOP (7867), Rhode Island's recovery hotline that connects individuals in crisis with treatment and recovery support. English and Spanish-speaking counselors licensed in chemical-dependency are available 24 hours a day, 7 days a week.

Print and share RIDOH treatment and recovery education materials with overdose patients, family members, and/or other caregivers.

Emergency Department and Hospital Providers:

If fentanyl is suspected, multiple doses of naloxone may be required to reverse overdose.

Intramuscular injection is preferred.

Screen for fentanyl in all blood and urine toxicology tests for all suspected overdose patients.

Dispense intranasal/intramuscular naloxone kits to emergency department patients, family members, and/or other caregivers at risk for opioid overdose.

Encourage overdose patients to connect with a peer recovery specialist prior to ED discharge.
Refer patients to the Rhode Island Centers of Excellence where Medication Assisted Treatment (MAT) options for opioid use disorder are available at outpatient programs throughout the state.
Share 401-942-STOP (7867), Rhode Island's recovery hotline that connects individuals in crisis with treatment and recovery support. English and Spanish-speaking counselors licensed in chemical-dependency are available 24 hours a day, 7 days a week.
Report suspected overdoses using RIDOH's 48-hour reporting system.
Print and share RIDOH treatment and recovery education materials for overdose patients, family members, and/or other caregivers.

Overdose Treatment Providers and the Rhode Island Centers of Excellence:

Be prepared for transition care of overdose patients to and from community resources.
Screen for fentanyl in all blood and urine toxicology tests for all suspected overdose patients.
Print and share RIDOH treatment and recovery education materials for overdose patients, family members, and/or other caregivers.

Pharmacists:

Ensure naloxone is readily available for dispensing without a prescription.
When appropriate, educate customers of the serious health risks associated with being prescribed opioids, including accidental overdose, coma, and/or death.
When appropriate, educate customers of the serious health risks associated with being co-prescribed opioids and benzodiazepines and/or other central nervous system (CNS) depressant medicines.
Print and share "Knowing the Risks of Taking Opioid Prescription Pain Medications" with customers who are being dispensed opioids.
Prescribe naloxone when appropriate, especially if customers are being co-prescribed an opioid and a benzodiazepine.

General Public:

Visit PreventOverdoseRI.org, a user-friendly website offering many resources for people who may be at risk of overdose, health care professionals who would like to learn more about treating addiction, as well as concerned family members and friends.
Use and share 401-942-STOP (7867), Rhode Island's recovery hotline that connects individuals in crisis with treatment and recovery support. English and Spanish-speaking counselors licensed in chemical-dependency are available 24 hours a day, 7 days a week.
Carefully follow dosage instructions for opioid prescription pain medications. Opioids should only be taken as directed. Misuse and abuse of opioids can be illegal, extremely harmful, and even deadly.
Safely store opioid prescription pain medications in a locked container and out of reach of children – only one dose can cause an accidental overdose.
Get rid of medicines safely by locating a safe disposal site near you. Many locations in the state also offer opioid prescription pain medication disposal; make sure the drug disposal location accepts controlled substances. If a drug disposal site cannot be reached, the Food and Drug Administration (FDA) recommends flushing opioid prescription pain medications down the toilet.
Get life-saving naloxone at Rhode Island pharmacies without a prescription from a doctor. Learn how

to properly use naloxone by asking your pharmacist, or watch this video.

Rachael Elmaleh | Communications Specialist

Drug Overdose Prevention Program

Rhode Island Department of Health

3 Capitol Hill

Providence, Rhode Island 02908

Desk: (401) 222-1678

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