McLean County Area EMS System

705 N East Street
Bloomington, IL 61701

Phone: (309) 827-4348
Fax: (309) 827-2017

MEMORANDUM

To: System Members

**** INTERIM CLINICAL GUIDENCE****

From: Dylan Ferguson, Paramedic, B.S., L.I.
Director

In effect until 08/31/2017

Date: March 28, 2017

Subject: **Opioid Epidemic**

It should be to the surprise of no one that America is in the midst of an opioid crisis. Pain medication obtained illegally, in addition to illicit drugs such as heroin have been and remain a problem, both across the country and here locally within our own EMS System.

There are other drugs that have been or are anticipated to enter our service area based on information received from law enforcement.

Two drugs in particular are concerning. The first is something referred to as Pink Heroin. Pink heroin otherwise known as U-47700 is 8 times stronger than heroin. It is part of a family of deadly synthetic opioids. There are reports of individuals going into respiratory arrest simply by touching it.

The second is a synthetic opioid called Carfentanil. This drug is 100 times more potent than Fentanyl. There are no approved human uses for this drug, its primary use is for the sedation of large animals (such as elephants). It is lethal in relatively small doses (2mg).

These drugs are particularly concerning, because of their slower than normal metabolism rate. This means that the patients high will last longer, but it also means that patients which have come into contact with these drugs may not respond to our normal doses of Naloxone. There have been individual case reports of eight doses of Naloxone being required to restore the respiratory status of these patients. With an average of two to three times the normal dose of Naloxone.

To that end we are implementing the following interim clinical guidance to address this crisis.

1. Agencies at their discretion may choose to carry Naloxone at levels above the system minimum par level.
2. If a provider has strong reason to believe that an opioid is involved and the patient does not respond to initial doses of Naloxone, providers may continue to give doses of Naloxone every three minutes. Those doses are 2 mg IN, or 0.4 mg IV.
3. EMS providers at any level should not exceed 10 mg of Naloxone without a medical control consult

McLean County Area EMS System

705 N East Street
Bloomington, IL 61701

Phone: (309) 827-4348
Fax: (309) 827-2017

4. Remember that if a patient has an adequate respiratory status maintain a clear airway, but Naloxone is not required
5. Also, remember that we do not administer Naloxone to reinstate consciousness, rather it is administered to restore an adequate respiratory drive.

This guidance does not require an agency to stock more Naloxone than what is already required. The decision whether or not to stock more Naloxone should be based on a community risk assessment and knowledge of your communities.

The primary treatment with an overdose is not Naloxone, but rather ensuring that the patient maintains a patent airway, and has an adequate tidal volume. One of the best treatments that we have for these patients is bag-valve mask ventilations.

This interim clinical guidance shall be in effect until August 31st 2017. At which point it will be extended, placed into the protocol manual, or revoked

****Safety Alert****

1. Fentanyl and Carfentanyl can be absorbed through the skin and accidental inhalation of airborne powder can also occur.

2. First responders should practice standard safety precautions, and at the minimum use gloves and a mask when attending to individuals with suspected overdoses.

3. **Especially if additional substances are ingested, patients may exhibit aggressive behavior, seizures and hallucinations after opioid withdrawal.**