

TAKE HOME NALOXONE: PARTICIPANT KNOWLEDGE CHECKLIST

This checklist provides a guideline to assess the knowledge of the participant following the training session. As the Educator you should be confident that each knowledge objective was covered in the training and that the participant understands each of the objectives.

Participant's Name: _____

Date: MM / DD / YYYY

Educator's Name (Print): _____

INITIALS	KNOWLEDGE OBJECTIVE
	<p>Overdose Prevention</p> <ul style="list-style-type: none"> • Knows causes, contributing factors, and prevention strategies to ODs
	<p>General Overdose Knowledge</p> <ul style="list-style-type: none"> • Understands stimulant OD – there is no antidote • Knows the application of <i>myths</i> in responding to OD can be harmful
	<p>Signs of Opioid Overdose</p> <ul style="list-style-type: none"> • Understands the signs of opioid OD: <i>breathing is very slow/erratic or not there at all, fingernails/lips blue or purple, unresponsive to stimulation/sternal rub, deep snoring/gurgling sound, body is limp, unconscious</i> • Understands that naloxone does not work for non-opioid ODs
	<p>Recovery Position and Calling 911</p> <ul style="list-style-type: none"> • Knows the recovery position & knows to put the person in this position if they have to leave them alone to keep airway clear • Understands the importance of calling 911, knows what to say to the 911 operator and knows to debrief EMS when they arrive
	<p>Stimulation & Application of Breaths</p> <ul style="list-style-type: none"> • Knows how to provide stimulation: <i>Sternal Rub/Say the person's name/Tell them to breathe</i> • Knows how to provide breaths and use 1-way face mask
	<p>Naloxone Administration</p> <ul style="list-style-type: none"> • Knows how to administer naloxone, including: 1 mL into muscle of upper shoulder, upper thigh, or upper-outer quadrant of buttocks; if no change in condition within 3-5 minutes – should give another dose of naloxone.
	<p>Evaluation & Aftercare</p> <ul style="list-style-type: none"> • Knows the effect of naloxone only lasts 30-90 minutes & the OD can return • Knows to stay with person to communicate to that person: what happened, not to let person take more drugs; sickness will go away, more opioids will have no effect while naloxone is active, and more drugs will make OD more likely to return when effect of naloxone wears off • Knows to watch for OD symptoms returning
	<p>Care of Naloxone Vial, Program Evaluation, Refill</p> <ul style="list-style-type: none"> • Knows how to store naloxone: at room temperature & away from light • Knows to watch the expiry date on ampoules • Knows to keep naloxone in a regular place & let others know where it is in case of emergency • Knows to return to the site to obtain another kit if they have used theirs, or it has become lost or stolen