

FINAL TEST

Name *(please print legibly)* _____

Email *(please print legibly)* _____

- 1) What is the leading cause of accidental death among adults in the US?

- 2) What vital function stops first during an opioid overdose?

- 3) Name three signs of opioid overdose
 - 1.
 - 2.
 - 3.

- 4) Name three risk factors that **increase** the risk of fatal opioid overdose
 - 1.
 - 2.
 - 3.

- 5) Do cocaine or other stimulants **increase** or **decrease** risk of heroin overdose?
 - Increase
 - Decrease

- 6) Name three actions which can **reduce** the chances of an opioid overdose:
 - 1.
 - 2.
 - 3.

- 7) Is naloxone the same drug as Narcan?

- 8) How many years after expiration has naloxone been demonstrated to continue working?

- 9) What certification is needed for a lay person in New York to carry and administer naloxone?

10) Does naloxone work on all opioids (including fentanyl) or just heroin?

- All opioids (including fentanyl)
- Just heroin

11) Does naloxone work on xylazine? If not, should it be administered anyway?

12) If you find a person who is not breathing, and do not know if opiates are the cause, should you administer naloxone? Why?

13) What simple technique do we suggest you employ to ascertain if a person is responding to external stimulus and might have overdosed?

14) What are the A & B of life?

A:

B:

15) Do we recommend doing CPR *or* Rescue Breathing during an overdose?

- CPR
- Rescue breathing

16) Why must you support the person for 1-2 hours after the naloxone reverses the overdose?

17) If someone feels discomfort after a reversal, how long until this usually lessens?

18) Why is the “recovery position” face down?

19) What one action (other than naloxone administration) could be done to reduce the chance that a fatal opioid overdose?

20) Do you feel competent enough to teach others how to administer naloxone in an emergency?

BONUS: Has there *ever* been a case of HIV transmission from an accidental needlestick in the community?

PRACTICE TEST

Name *(please print legibly)* _____

Email *(please print legibly)* _____

- 1) What is the leading cause of accidental death among adults in the US?

- 2) What vital function stops first during an opioid overdose?

- 3) Name three signs of opioid overdose
 - 1.
 - 2.
 - 3.

- 4) Name three risk factors that *increase* the risk of fatal opioid overdose
 - 1.
 - 2.
 - 3.

- 5) Do cocaine or other stimulants *increase* or *decrease* risk of heroin overdose?
 - Increase
 - Decrease

- 6) Name three actions which can *reduce* the chances of an opioid overdose:
 - 1.
 - 2.
 - 3.

- 7) Is naloxone the same drug as Narcan?

- 8) How many years after expiration has naloxone been demonstrated to continue working?

9) What certification is needed for a lay person in New York to carry and administer naloxone?

10) Does naloxone work on all opioids (including fentanyl) or just heroin?

- All opioids (including fentanyl)
- Just heroin

11) Does naloxone work on xylazine? If not, should it be administered anyway?

12) If you find a person who is not breathing, and do not know if opiates are the cause, should you administer naloxone? Why?

13) What simple technique do we suggest you employ to ascertain if a person is responding to external stimulus and might have overdosed?

14) What are the A & B of life?

A:

B:

15) Do we recommend doing CPR *or* Rescue Breathing during an overdose?

- CPR
- Rescue breathing

16) Why must you support the person for 1-2 hours after the naloxone reverses the overdose?

17) If someone feels discomfort after a reversal, how long until this usually lessens?

18) Why is the “recovery position” face down?

19) What one action (other than naloxone administration) could be done to reduce the chance that a fatal opioid overdose?

20) Do you feel competent enough to teach others how to administer naloxone in an emergency?

BONUS: Has there *ever* been a case of HIV transmission from an accidental needlestick in the community?

1. What is the leading cause ... **1) Overdose**
2. What vital function... **2) Breathing**
3. Name 3 signs of opioid overdose: **3) Doesn't respond to sternal rub**
Limp body
Blue lips or fingernails
Shallow, erratic or stopped breathing
Loss of consciousness
Vomiting
Awake but unable to talk
Choking sounds, or snore like gurgling noises
Pulse is slow, shallow or erratic or stopped
4. Name three factors... **4) Mixing with other drugs**
Using alone
Tolerance is down
Age and physical health
Mode of administration
Previous non-fatal OD
5. Do cocaine and... **5) increase**
6. Name three actions... **6) Have naloxone on hand**
Don't use alone
Don't mix drugs
Taste the shot
Purity tests
Education on OD prevention
Use less if tolerance is low
7. Is naloxone... **7) Same**
8. How many years... **8) 20**
9. What certification... **9) Nothing**
10. Does naloxone work on ... **10) All**
11. Does naloxone work on xylazine... **11) No, and yes**
12. If you find a person... **12) Yes, because it won't harm them**
13. What simple technique... **13) Sternal rub**
14. What is the A & B of life? **14) A Airway B Breathing**
15. Do we recommend doing... **15) Rescue Breathing**
16. Why must you support the person .. **16) Slow acting opiates might return**
insure they don't use more drugs
17. If someone feels discomfort... **17) About 15 minutes**

18. Why is the “recovery position”...

19. What one action...

20. Do you feel competent...

21. Has there ever been?

18) Reduce asphyxiation from vomiting

19) Rescue breathing

20) If the answer is not yes, see me after

21) No