Opioid-Associated Emergency for Lay Responders Algorithm

Cascading numbered boxes correspond to actions the provider should perform in sequence. Each box is separated by an arrow that signifies the pathway the provider should take. Some boxes are separated by 2 arrows that lead to different boxes, meaning that the provider should take a different pathway depending on the outcome of the previous action. Pathways are hyperlinked.

Box 1

Suspected opioid poisoning

- Check for responsiveness.
- Shout for nearby help.
- Activate the emergency response system.
- Get naloxone and an AED if available.

Box 2

Is the person breathing normally? If Yes, proceed to $\underline{Box\ 3}$. If No, proceed to $\underline{Box\ 5}$.

Box 3

Prevent deterioration

- Tap and shout.
- Reposition.
- Consider naloxone.
- Continue to observe until EMS arrives.

Box 4

Ongoing assessment of responsiveness and breathing.

Go to Box 1.

Box 5

Start CPR

- Give naloxone.
- Use an AED.
- Resume CPR until EMS arrives.

Note: For adult and adolescent victims, responders should perform compressions and rescue breaths for opioid-associated emergencies if they are trained and perform Hands-Only CPR if not trained to perform rescue breaths. For infants and children, CPR should include compressions with rescue breaths.