

**San Mateo County Naloxone Test**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employee ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Which of the following is NOT a common causative agent of opioid overdose?
	1. Heroin
	2. Dilaudid
	3. Cocaine
	4. Fentanyl
2. Administration of intranasal naloxone is for Paramedic trained personnel only.
	1. True
	2. False
3. Which of the following is NOT a common symptom of opioid overdose?
	1. Constricted pupils
	2. Euphoria
	3. Diarrhea
	4. Slowed breathing
4. Opioid withdrawal symptoms can mimic flu symptoms.
	1. True
	2. False
5. BSI and PPE are particularly important when evaluating and treating patients with narcotic overdose because \_\_\_\_\_.
	1. Intravenous drug users may be carrying unsafe sharps
	2. Narcotic patches may transfer medication to your skin
	3. All abusers of opioids have a likely incidence of blood-borne diseases such as HIV and hepatitis
	4. A and B
	5. All of the above
6. Naloxone is an opiate \_\_\_\_\_.
	1. Agonist
	2. Antagonist
	3. Reversalist
	4. Revivalist
7. Potential side effects of administering naloxone include \_\_\_\_\_.
	1. Projectile vomiting
	2. Withdrawal signs and symptoms
	3. Patient agitation or violence
	4. A and B
	5. All of the above
8. What is a mucosal atomizer device (MAD)?
	1. The white conical thing that prepares patient mucosa for delivery of naloxone
	2. The white conical device that sprays intranasal naloxone
	3. A magazine
	4. A squeeze bottle used to deliver naloxone
9. When administering intranasal naloxone, you should give a \_\_\_\_\_ push that administers \_\_\_\_\_ of the medication into each nostril.
	1. Short vigorous; half
	2. Short vigorous; all
	3. Slow gentle; half
	4. Slow gentle; all
10. Your prepackaged/manufactured NARCAN requires how many steps to administer:
	1. 4
	2. 1
	3. 6
	4. 2
11. You respond to a 28-year-old male with altered mental status. He is found unconscious with minimal respiratory effort, a strong radial pulse, pinpoint pupils, and fresh track marks on his arms. After a few rescue breaths with the BVM, you deliver IN naloxone and continue to support his respirations via BVM and NPA. Despite what appears to be a classic case of heroin overdose, he fails to awaken. What should you do next?
12. Abandon; he is dead
13. Support ventilations, and attempt to administer oral glucose
14. Continue supporting ventilations until Paramedics arrive
15. Begin CPR
16. You have not seen your partner in 15 minutes, as he/she was packaging narcotics for evidence. You find your partner in the evidence room unresponsive, with shallow, slow respirations and pinpoint pupils. The most appropriate initial management of this incident is what?
17. Administer 2.0 mg intranasal premanufactured naloxone.
18. Immediately manage airway with OPA or NPA; support respirations with BVM
19. Arrest him/her
20. A and B
21. All of the above
22. You are called to an apartment for a 45-year-old male in the lobby with altered mental status. The lobby clerk wants him to be arrested and the patient will not cooperate. The patient has pinpoint pupils, is breathing, is conscious to verbal stimuli, but nods off, and wakes up when you speak to him. The most appropriate initial management of this individual is what?
23. Immediately administer 2 mg (2 ml) of intranasal naloxone
24. Manage airway with OPA or NPA; support respirations with BVM
25. Use physical stimuli to wake him up and call for paramedics to respond
26. A and B
27. All of the above
28. You are searching a room when you open a backpack and a white cloud emits from it, which you inhale. Based on your training and experience, you recognize this substance as heroin. What should you do?
29. Administer your Narcan
30. Call for Paramedics
31. Inform your supervisor of incident and location of substance
32. A and B
33. All of the above
34. You are called to an apartment for an altered 32-year-old. She is somnolent with pinpoint pupils but is breathing adequately. The patient’s boyfriend says she has a history of heroine use, but “has been clean for years” with the help of methadone. Could the methadone be causing her current condition?
35. Yes
36. No
37. Your K9 partner and you are searching a room when your K9 indicates a hit on a package. You notice that your K9 has white substance on its nose, which you are concerned is a narcotic substance. What should you do?
38. Administer your K9 Narcan immediately
39. Inform your supervisor of the incident and location of the substance
40. Respond to the designated veterinarian location, and have dispatch call them with a report of the incident
41. B and C
42. All of the above
43. You are called to an apartment for an altered 32-year-old. She is somnolent with pinpoint pupils but is breathing adequately. The patient’s boyfriend says she has a history of chronic back pain, but usually feels better by taking OxyCodone. You should \_\_\_\_\_.
44. Immediately administer intranasal naloxone
45. Immediately start CPR
46. Place the patient on her side in the recovery position
47. A and B
48. All of the above
49. After administering intranasal naloxone, the individual becomes violent and assaults you. Your next course of action is arresting the suspect and taking them to jail.
50. True
51. False
52. Intranasal naloxone will work on most unconscious patients.
53. True
54. False
55. If you, in good faith, after a complete assessment, including ABC management, administer intranasal naloxone to a patient who is altered but not from opioids, \_\_\_\_\_.
56. You may face disciplinary action from the state and the department
57. The patient ends up with nothing but a wet nose
58. The good Samaritan law protects you
59. You will be sent to a re-certification course on naloxone administration
60. What color is a box of naloxone?
61. Royal blue
62. Chartreuse
63. Peach
64. Kelly green
65. You respond to a call for a man down in an alley. Upon arrival, you find a 40-year-old male unresponsive, with shallow, slow respirations, a radial pulse, and pinpoint pupils. You begin to manage his airway with OPA or NPA and ventilate with BVM. While doing this, you see track marks on his arms and administer intranasal naloxone, with no effect. What should you do next?
66. Start CPR
67. Continue to manage his airway with OPA or NPA and ventilate with BVM
68. Place the patient on his side in the recovery position
69. Wait for ALS
70. What is the minimum weight of the patient in order to use intra-nasal naloxone?
71. 44 lbs.
72. 15 lbs.
73. 25 lbs.
74. 100 lbs.
75. None of the above
76. A patient must be at least 18 years old to be administered intra-nasal naloxone.
77. True
78. False
79. Canine handlers must go through a separate 1-hour course for delivery of Narcan to canines as it is a slightly different formulation and anatomy.
80. True
81. False