OPIOID OVERDOSES NEEDING DROPLET PRECAUTIONS

Direction for responding to overdoses will be as dynamic as our current situation. The information provided may change day-to-day and please check back regularly for the most up to date recommendations.

We recognize that people who use drugs are doing incredible work to keep communities safe and reduce possible transmission while continuing to respond to the overdose crisis. Staff (including experiential workers) at some sites have been trained to provide breaths using Bag-Valve-Mask (BVM) ventilation.

We do not recommend using a BVM or high flow oxygen when responding to an opioid overdose this time. If BVM use is necessary, appropriate personal protective equipment (PPE) should be used i.e. gown, gloves, a fit tested N95 respirator and eye protection. At this time we cannot determine if other activities in opioid overdose response produce aerosols. Check back soon.

BVM AND HIGH FLOW OXYGEN IN THE CONTEXT OF COVID-19

Viruses can be passed from one person to the next a few different ways (e.g. contact, droplet and airborne). In the context of COVID-19, 'social distancing' and other public health recommendations are being made based on droplet precautions.

Some activities such as BVM and the use of non-rebreather masks or other high flow oxygen (> 16L/min) procedures are aerosol generating medical procedures (AGMP) i.e. generates small droplet nuclei in high concentration which presents a risk for airborne transmission of pathogens not otherwise spread by airborne route. This means, with AGMP activities, infection control precautions change from droplet (surgical mask) to airborne (fit-tested N95 respirator).

The risk from use of BVM or high flow oxygen (< 16 L/min) due to AGMP can be reduced by using a bacterial and viral BVM filter or a HEPA filter. Until we know more, airborne PPE precautions are still required with the use of a filter.

OTHER RECOMMENDATIONS

- BCCDC’s THN kit face shield masks have a one way valve filter to decreases possibility of transmission for the responder.
- The face shields are large/oversized and impermeable and cover enough space to prevent responder exposure to respiratory fluids. Place the mask and hold it in place for the duration of the response and dispose of the mask immediately after use. The responder(s) should thoroughly wash/clean their hands.
- Anyone not responding to overdose should leave the room/area. Those essential to response should don appropriate PPE equipment (contact/droplet precautions for non BVM, surgical mask; and airborne precautions for BVM/high flow O2, fit-tested N95 mask).
- New or appropriately cleaned PPE is required with each OD event.
- Do not reuse equipment that is meant for one-time-use only (e.g. face shields, airways, etc.)
- Cleaning OPS/SCS: no need to change what you use to clean, it is recommended to increase frequency of cleaning.
- Clear out all non-essential items (e.g. papers, books, food, etc.) from consumption areas.