

# **OVERDOSE REPORT FORM**

## To be sent to the Department of Public Health's confidential fax number: 1 866 867-8026 or at <u>surveillance.vigie.nrbhss@ssss.gouv.qc.ca</u> during office hours

# » » Details for use on reverse ««

Identification of reporting individual	
Name:	Function:
Northern village:	Telephone:
Identification of overdose victim (the information collected will be treated as confidential)	
Last name:	First name:
Sex: DM F	Telephone:
Year Month Day	Northern village of residence:
Description of event	
Year   Month   Day   24-h format     Date of overdose:     Approximate time:      Place of overdose:   Private home   Interior public place   Exterior public place   Other:     Northern village:	
If in presence of others, how many overdosed? Fill out one form per individual	
□ Cyanosis □ Caro □ Hyperthermia □ Hea	red state of consciousness   Miosis     liorespiratory arrest   Excessive sweating     t palpitations   Agitation     ucinations   Other:     nown   Agitation
Description of products consumed	
Form, appearance, packaging of product (e.g., powder cocaine, white, sachet with X logo)	Method of consumption     Origin       (e.g., ingested, smoked, injected)     (Northern village, South, Web, other)
Description of interventions	
Administration of naloxone?   Yes     If yes, by whom?   Police officer     If yes, response to naloxone?   Yes     Presence/intervention of first responders?   Yes     Presence/intervention of police officers?   Yes     Toxicology Screen   Yes	No   Unknown     ervener   First responder   Other:     No   Unknown     No   Unknown
For use of Public Health only Year Month Day   Date of reception of report at DPH: Year Year Year	

## **Confidentiality of Data**

The individual making the report commits, for the person who provides the information (victim, witness, other), to gather and transmit all information received confidentially.

The Department of Public Health commits to treating all information confidentially. The form shall be received at a confidential fax at the offices of the Department of Public Health. No data enabling identification of the victim or witnesses of the overdose shall be forwarded to an external party.

## **Explanatory Notes**

### Who can report?

This form is primarily destined for use by professionals of the health network to report on situations reported to them. It may be used by other interveners as needed.

### What to report?

When a situation is considered unusual or worrying related to a drug overdose or opioids overdose as:

- The overdose responds to a severity criterion (ex.: intubation, hospitalisation, death, etc.);
- number of overdose cases that seems higher than usual, or;
- the symptoms of the overdose that seems particularly severe or unusual to the substance consumed, or;
- the circumstances are **unusual**.

#### Who to signal?

- during office hours: surveillance.vigie.nrbhss@ssss.gouv.qc.ca
- outside office hours: Physician on duty for Public Health 1-855-964-2244 (toll free) or 1-819-299-2990

### Explanations on sections of the form

Although it is not obligatory to fill out all sections of the form, it is strongly encouraged to send a maximum of information. <u>The elements</u> of particular importance for documentation are the **date** of the overdose, the **place** of the overdose and the description of the **products** <u>consumed</u>.

#### Date and place of overdose

The information on the date and place of the overdose can help determine whether an outbreak of overdoses is under way. Additional details for the purpose of better geographic identification of the overdose location can be useful if the victim or witness agrees to provide them (e.g., intersection, known public place).

#### Products consumed, form, appearance and packaging

It is important to gather information on all the products consumed before the overdose and not only on the product that the victim or witness believes caused the overdose. If possible, note additional details on the product and its packaging (e.g., format, colour, logo, distinctive signs).

### Other pertinent information

As needed, use an additional sheet to provide any additional information that could help document and explain the situation.