



BLS

ALS

- Ensure patent airway
- O₂ saturation PRN
- O₂ and/or ventilate PRN

Symptomatic suspected opioid OD with RR <12

- Treat per Poisoning / Overdose Protocol (S-134)

For suspected opioid withdrawal or opioid use disorder, request for ALS to provide treatment and transport¹

For patients and/or other individuals suspected of opioid use disorder, provide Leave Behind Naloxone Kit with education per the Leave Behind Naloxone Program²

- Monitor/ECG
- IV/IO ^(A)
- Capnography

Symptomatic suspected opioid OD with respiratory depression (RR<12, SpO₂<96%, or EtCO₂ ≥40 mmHg)

- Treat per Poisoning / Overdose Protocol (S-134)

Complete COWS score using S-145A¹

For suspected opioid withdrawal in patients ≥16 years with COWS score ≥8¹

- Contact opioid withdrawal base
- Buprenorphine-naloxone (Suboxone®) 16 mg/4 mg SL BHO (opioid withdrawal base)
- Reassess after 15 min
- Repeat with buprenorphine-naloxone (Suboxone®) 8 mg/2 mg SL to a max of 24 mg/6 mg
- Recommend transport to emergency department
- Ensure warm handoff

If patient declines transport:

- Verify patient contact information
- Ensure warm handoff
- Attempt to arrange non-EMS transport to appropriate facility
- Provide Leave Behind Naloxone kit and education
- Provide MAT information, coaching, and brochure

Buprenorphine Pilot Program exclusion criteria:

- Any methadone use within the last 10 days
- Lack of opioid withdrawal signs or symptoms
- Under 16 years of age
- Severe medical illness (e.g., sepsis, respiratory distress)
- Unable to give consent or comprehend potential risks and benefits for any reason, including altered mental status

¹ For agencies participating in the Buprenorphine Pilot Program

² For agencies participating in the Leave Behind Naloxone Program