

**Carmel Fire Department
Mobile Integrated Health Program**

Quick Response Team (QRT) – Wellness Check

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Behavioral/Mental Health/Opioid Referral

Indications: This protocol provides general guidance for the evaluation of patients after a recent naloxone administration under the Carmel Fire Mobile Integrated Health Program. The EMT or Paramedic (CP) as part of a Quick Response Team (QRT) will respond to a residence on request from 911 Dispatch, on request by the patient through 911 triage, on referral from a Healthcare system or on referral from behavioral or mental health provider. The CP will follow guidelines outlined by the primary care/behavioral health/mental health providers, Hospital System, or EMS treatment protocols or on-line medical direction orders for the management of post-naloxone follow-up.

Purpose: Assist the patient (family/caregiver) by increasing awareness of the disease through education on addiction. Monitor patient condition after discharge including: patient medication compliance, patient willingness to inflict self-harm or commit suicide. Monitor the patient's general health status including vital signs. Communicate with the behavioral health/mental health/substance use disorder provider or on-line medical direction on the condition of the patient as well as on the general well-being of the patient as well as continuing medication reconciliation and continuity plan.

EMS Provider Directives:

Follow General Protocols for CP Patient Assessments. Note that some parts of this directive listed here may be done in cooperation/coordination with a peer recovery coach (*). The medical provider (EMT or paramedic) is responsible for all medical aspects of the encounter.

- (1) * - Discuss events that brought about this meeting
 - a. History of addiction/disease – how long and last time used?
 - b. Drug of choice?
 - (2) Conduct a general overview of health including but not limited to:
 - a. Past medical/surgical history
 - b. Social history
 - c. Family history
 - d. General review of systems
 - e. Medications and allergies
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- f. Do you have a PCP? Last time visited and any future appointments
 - g. Review the social determinates of health questionnaire
 - (3) * - Inquire about any suicidal ideations, homicidal ideation
 - (4) Ask about and evaluate for signs and symptoms of withdraw
 - (5) Perform a focused and directed patient assessment including
 - a. Focused physical exam as indicated
 - b. Blood Pressure, Pulse, Pulse Oximetry
 - c. Possible 4 or 12 lead EKG as indicated
 - (6) Interventions (If necessary) following medical treatment and transport protocols if indicated
 - (7) Discuss Goals for patient care needs.
 - (8) * - Discuss treatment options available for substance use disorder
 - a. What treatment have you done before?
 - b. What helped and what didn't?
 - c. Last time you were in outpatient or inpatient treatment center?
 - d. What do you need to avoid that could make you use again?
 - e. What type of program do you think would work for you?
 - f. Set up time for next meeting

If immediate treatment is needed, follow the specific emergency medical services care treatment protocol that meets patient current medical condition.

