

NYS Suspected Opioid Overdose Syndrome – NEMESIS v3.4.0

Records for inclusion are limited to 911 Response, Intercept and Mutual aid.

1. NEMESIS v3 - Naloxone administration is documented (eMedications.03) AND [response to medication (eMedications.07) indicates patient improvement OR narrative (eNarrative.01) contains “improved”, “improvement in loc”, “more responsive”, “now awake”, “began breathing”, “became conscious”, “pt came to”, “pt woke up”, “became responsive”, “more alert”, “positive response to Narcan”].

2. Primary or secondary impression(s) indicate an opioid overdose:

- NEMESIS v3 - Primary/secondary impression (eSituation.11, eSituation.12) starts with any of the following:
 - T40.0: Poisoning by, adverse effect of and underdosing of opium
 - T40.1: Poisoning by and adverse effect of heroin
 - T40.2: Poisoning by, adverse effect of and underdosing of opioids
 - T40.3: Poisoning by, adverse effect of and underdosing of methadone
 - T40.4: Poisoning by, adverse effect of and underdosing of other synthetic narcotics- Fentanyl, Tramadol, etc.
 - T40.6: Poisoning by, adverse effect of and underdosing of other and unspecified narcotics

AND

- Any of the following is true:
 - No naloxone administration is documented in (eMedications.03)
 - Naloxone administration is documented in (eMedications.03) and response to medication (eMedications.07) indicates patient improvement or unchanged
 - Naloxone administration is documented in (eMedications.03) and response to medication (eMedications.07) is not documented

3. Primary or secondary impression(s) indicate an opioid related disorder

- NEMESIS v3 - Primary/secondary impression (eSituation.11, eSituation.12) starts with F11: Opioid related disorders

AND

- Naloxone administration is documented in eMedications.03 or eNarrative.01

4. Primary or secondary impression(s) indicate an unspecified drug overdose:

- NEMESIS v3 - Primary or secondary impression (eSituation.11, eSituation.12) starts with any of the following:
 - T50.9: Poisoning by, adverse effect of and underdosing of other and unspecified drugs, medicaments, and biological substances
 - T65.9: Toxic effect of unspecified substance

AND

- Opioid term is mentioned in narrative:
 - Narrative (eNarrative.01) or complaint (eSituation.04) contains “opioid”, “opiate”, “opium”, “dope”, “smack”, “heroin”, “hod”,

"speedball", "methadone", "suboxone", "morphine", "tramadol", buprenorphine", "codeine", "norco", "oxy", "vicodin", "Percocet", hydrocodone", "opana", "dilaudid", "hydromorphone", "fentanyl". Common misspellings and other variants of these terms are included.

AND

- Any of the following are true:
 - Naloxone administration is documented in eMedications.03 and response to medication (eMedications.07) indicates patient improvement or unchanged.
 - Naloxone administration is documented in eMedications.03 and response to medication (eMedications.07) is not documented
 - Naloxone administration is documented in eNarrative.01

AND

- Fentanyl (4337), Morphine (7052), Oxycodone (7804), Hydromorphone (3423), and Tramadol (10689) are not an administered medication in (eMedications.03).

5. Primary or secondary impression(s) indicate a non-specific drug or opioid overdose, cardiac arrest, apnea, or respiratory failure *AND* opioid term is mentioned in narrative *AND* naloxone is administered *AND* Patient fatality is indicated:

- NEMSIS v3 (eSituation.11, eSituation.12):
 - Apnea: R06.81; Cardiac arrest: I46; Drug overdose codes: T40.0-T40.4, T40.6, T50.9, T65.9; Respiratory failure: J96.0, J96.9

AND

- Narrative (eNarrative.01) or complaint (eSituation.04) contains "opioid", "opiate", "opium", "dope", "smack", "heroin", "hod", "speedball", "methadone", "suboxone", "morphine", "tramadol", buprenorphine", "codeine", "norco", "oxy", "vicodin", "Percocet", hydrocodone", "opana", "dilaudid", "hydromorphone", "fentanyl". Common misspellings and other variants of these terms are included.

AND

- Naloxone administration is documented in eMedications.03 or eNarrative.01

AND

- Incident/Patient Disposition (eDisposition.12) indicates patient death.
- Initial Patient Acuity (eSituation.13) or Final Patient Acuity (eDisposition.19) are Dead without Resuscitation Efforts (Black).
- Reason CPR/Resuscitation Discontinued (eArrest.16) is 3016005 "Obvious Signs of Death".
- End of EMS Cardiac Arrest Event (eArrest.18) is 3018001 Expired in ED 3018003 or Expired in the Field.

6. Opioid term mentioned in narrative (with no rule out term) *AND* overdose term mentioned in

narrative (with no rule out term) AND at least two additional terms (Narcan, method, LOC, physiologic sign) mentioned in narrative AND there are no narcotic medications listed under administered medications:

- NEMESIS v3 - Narrative or complaint contains opioid term AND overdose term (term is excluded if preceded by a rule out term: rule out”, “r/o”)
 - Opioid terms: "opioid", "opiate", "opium", “dope”, “smack”, "heroin", “hod”, "speedball", "methadone", "suboxone", “morphine”, “tramadol”, buprenorphine”, “codeine”, “norco”, ”oxy”, “vicodin”, “Percocet”, hydrocodone”, “opana”, “dilaudid”, “hydromorphone”, “fentanyl”.

AND

- Overdose terms: ”overdose”, “overdosed”, “od”, “od’d”

AND

- Narrative (eNarrative.01) or complaint (eSituation.04) contains a term from at least two of the following groups (common misspellings and other variants of these terms are included):
 - LOC: “nodding off”, “unresponsive”, “altered LOC”, “AMS”, “unconscious”, “loss of consciousness”
 - Method: “inject”, ”snort”, ”tinfoil”, “ingest”, “smoke”, “freebase”, “syring” and “spoon”, “needle” and “spoon”
 - Narcan: “Narcan”, “naloxone”
 - Physiological sign: “pinpoint pupil”, “injection mark”, “track mark”, “blue”, “cyano”, “stop breathing”, “respiratory arrest”, “inadequate breathing”, “agonal breathing”

AND

- Fentanyl (4337), Morphine (7052), Oxycodone (7804), Hydromorphone (3423), and Tramadol (10689) are not an administered medication in eMedications.03