Attachment F1

State Unintentional Drug Overdose Reporting System (SUDORS)

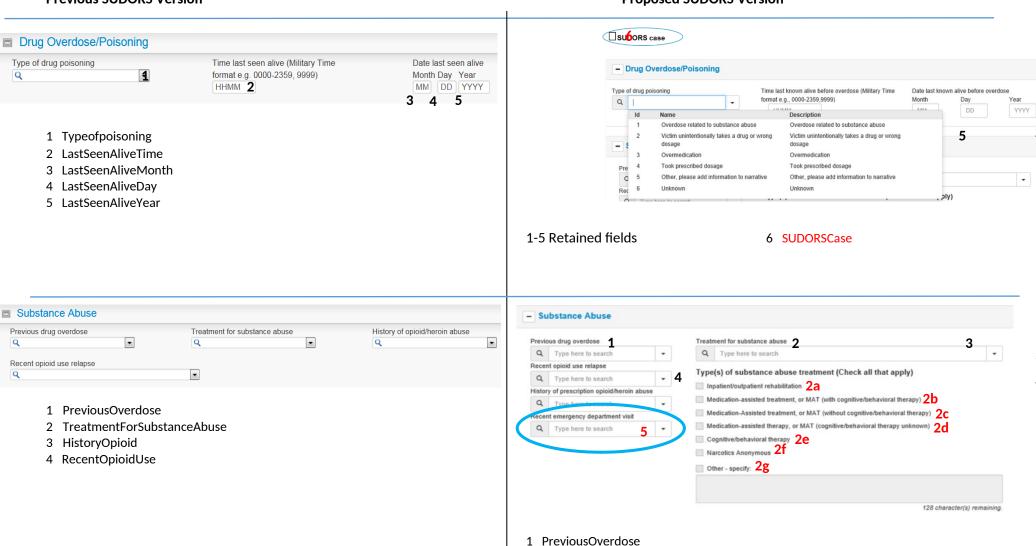
Introduction

This document displays the screens that abstractors use to enter required data elements for the SUDORS module. Each section of the module is shown separately, with a screenshot of the previous version on the left and the new version on the right. Variables that have not changed are indicated with black text with the same number on both the right and the left, and the corresponding variable name is given below the screenshot. Any new variables on the righthand side are flagged in red with additional numbers, and the corresponding variable names given below. Any changes are highlighted in a text box below both screenshots.

SUDORS Tab: Drug Overdose and Substance Abuse Sections

Previous SUDORS Version

Proposed SUDORS Version



2 TreatmentForSubstanceAbuse

2a SubsTx rehab

2b SubsTx_MATcog

2c SubsTx_MAT_nocog 2d SubsTx MAT 2f SubsTx NA

5 RecentED

2g SubsTx Other

3 HistoryOpioid4 RecentOpioidUse

2e SubsTx_CogTherapy

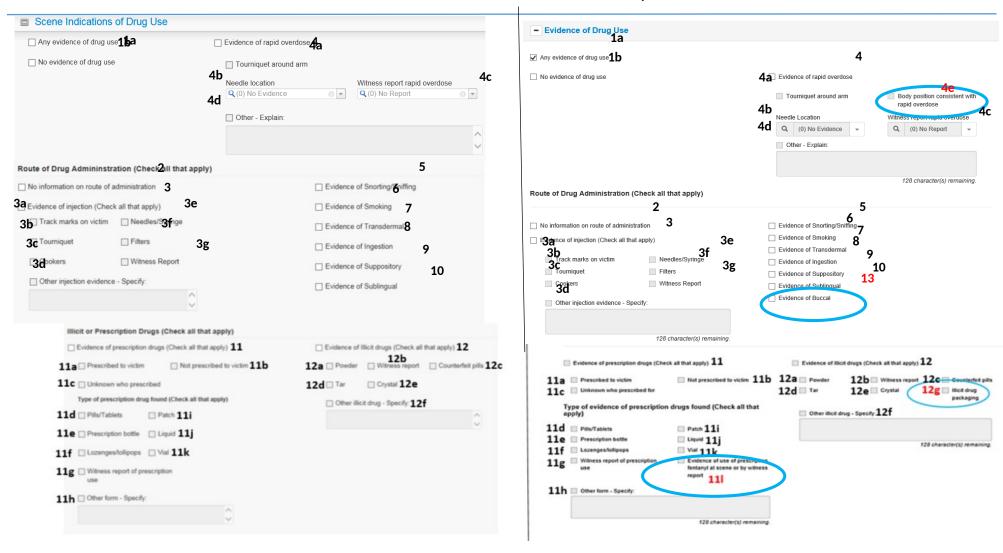
Changes to Drug Overdose and Substance Abuse Sections:

- Additional data element added to Drug Overdose/Poisoning section (#6) that allows the abstractor to identify unintentional/undetermined drug overdose deaths. This facilitates preliminary counts of drug overdose deaths
- <u>1 additional question added to capture recent emergency department visit (#5). This identifies</u> an opportunity for a public health intervention.
- 7 response categories added (#2a #2g) that are designed to detect the type of substance abuse treatment the decedent received. This data can provide important data to treatment providers and public health officials tracking the effectiveness of different treatment approaches.

SUDORS Tab: Scene Indications of Drug Use Sections

Previous SUDORS Version

Proposed SUDORS Version



1a IndicationsDrugPara	1a IndicationsDrugPara

- 1b IndicationsNone
- 2 RouteUnknown
- 3 RouteInjection
- 3a IndicationsTracks
- 3b HasEvidenceOfInjectionTourniquet
- 3c HasEvidenceOfInjectionCooker
- 3d HasEvidenceOfInjectionOther
- 3e HasEvidenceOfInjectionNeedle
- 3f HasEvidenceOfInjectionFilter
- 3g HasEvidenceOfInjectionWitnessReport
- 4 HasRapidOverdoseEvidence
- 4a IsTourniquetAroundArm
- 4b NeedleLocation
- 4c RapidOverdoseWitnessReport
- 4d RapidOverdoseOther
- 5 RouteSnorting
- 6 HasRouteSmoking
- 7 HasRouteTransdermal
- 8 RouteIngestion
- 9 RouteSuppository
- 10 HasRouteSublingual
- 11 HasEvidenceOfPrescriptionDrug
- 11a IsPrescribedToVictim
- 11b IndicationsRxDrugs
- 11c IsUnknownWhoPrescribed
- 11d IsPrescriptionPill
- 11e IsPrescriptionBottle
- 11f IsPrescriptionLozenge
- 11g HasEvidenceOfWitnessReportRxUse
- 11h IsPrescriptionOther
- 11i IsPrescriptionPatch
- 11j IsPrescriptionLiquid
- 11k IsPrescriptionVial
- 12 IndicationsDrugsatScene
- 12a HasEvidenceOfIllicitPowder
- 12b HasEvidenceOfIllicitWitnessReport
- 12c IsPrescriptionCounterfeit
- 12d HasEvidenceOfIllicitTar
- 12e HasEvidenceOfIllicitCrystal
- 12f IndicationsOther

- 1b IndicationsNone
- 2 RouteUnknown
- 3 RouteInjection
- 3a IndicationsTracks
- 3b HasEvidenceOfInjectionTourniquet
- 3c HasEvidenceOfInjectionCooker
- 3d HasEvidenceOfInjectionOther
- 3e HasEvidenceOfInjectionNeedle
- 3f HasEvidenceOfInjectionFilter
- 3g HasEvidenceOfInjectionWitnessReport
- 4 HasRapidOverdoseEvidence
- 4a IsTourniquetAroundArm
- 4b NeedleLocation
- 4c RapidOverdoseWitnessReport
- 4d RapidOverdoseOther

4e BodyPosition

- 5 RouteSnorting
- 6 HasRouteSmoking
- 7 HasRouteTransdermal
- 8 RouteIngestion
- 9 RouteSuppository
- 10 HasRouteSublingual
- 11 HasEvidenceOfPrescriptionDrug
- 11a IsPrescribedToVictim
- 11b IndicationsRxDrugs
- 11c IsUnknownWhoPrescribed
- 11d IsPrescriptionPill
- 11e IsPrescriptionBottle
- 11f IsPrescriptionLozenge
- 11g HasEvidenceOfWitnessReportRxUse
- 11h IsPrescriptionOther
- 11i IsPrescriptionPatch
- 11j IsPrescriptionLiquid
- 11k IsPrescriptionVial
- 11L IsPrescriptionFentanyl
- 12 IndicationsDrugsatScene
- 12a HasEvidenceOfIllicitPowder
- 12b HasEvidenceOfIllicitWitnessReport
- 12c IsPrescriptionCounterfeit
- 12d HasEvidenceOfIllicitTar
- 12e HasEvidenceOfIllicitCrystal

12f IndicationsOther
12g HasEvidenceOfIllicitPackage
13 HasRouteBuccal

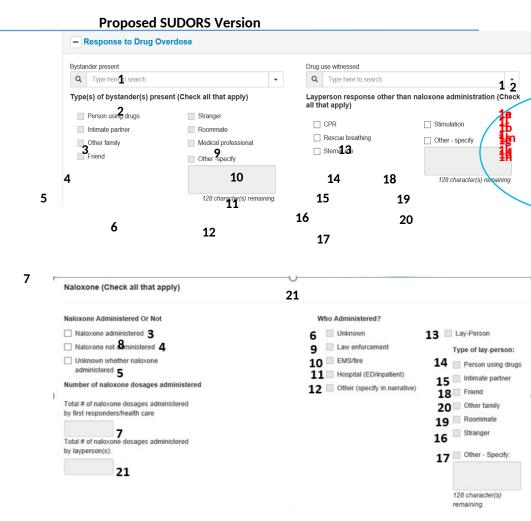
Changes to Scene Indications of Drug Use Sections:

- For rapid overdoses (#4), the response option "body position" (#4e) was added based on feedback from medical examiner/coroners and SUDORS abstractors that rapid overdose could be determined by the position of the body.
- <u>Buccal was added to route of drug administration (#13) because it was identified as a route in opioid</u> overdose deaths that was not on the previous list.
- For evidence of illicit drug use (#12), illicit drug packaging (#12g) was added because it occurred in a sufficient number of drug overdose deaths to track. This will also improve the identification of drug overdose deaths involving illicit drugs.
- Scene or prescription evidence of fentanyl (#11L) was added because SUDORS abstractors indicated this information was available and it is critical to determine whether the fentanyl contributing to the overdose was prescribed versus illicitly manufactured.

SUDORS Tab: Response to Drug Overdose and Medical History Sections

Response to Drug Overdose Bystanders present at time of overdose Q Drug Use Witnessed Q Naloxone Administered (Check all that apply) Naloxone administered Administered by law Administered by bystander enforcement Who administered? Administered by EMS/fire ☐ Not administered Person using drugs Friend Unknown Administered by hospital Intimate partner Roommate (ED/inpatient) Stranger Other family Administered, unknown by whom Other (specify in narrative) Other - Specify: Total # of Naloxone dosages administered by first responders/health care Total # of Naloxone dosages administered by bystander: Medical History Treated for pain at time of injury

Previous SUDORS Version



Presence of pulse on first-responder ar Q Type here to search	First-re	sponder intervention(s) other than naloxone
Type nere to search	▼ adminis	stration (Check all that apply)
	23a □ cr	R 23e Provided oxygen
	23b □ Re	scue breathing 23f Other - specify
		inephrine administration
	23d □ Tr	ansport to ED
		128 character(s) remaining.
ystander present and no respo	nse made (Check all reasons for no respons	e)
Did not recognize any abnormalities	24 28 Spati	ally separated (i.e., different room)
Bystander using and impaired 25		are that decedent was using
Public space and strangers didn't in	tervene 26 30 Other	-specify
Reported appormalities but did not		
		128 character(s) remaining.
Medical History		
0.000 0.000	finiury 8	
Medical History Treated for pain at time o		•
Treated for pain at time o		
Treated for pain at time o	rch	•
Treated for pain at time o	rch	₹ 8g
Treated for pain at time o	rch	•
Treated for pain at time o Q Type here to sea Known medical conditions COPD Asthma	rch	8g Migraine
Treated for pain at time o Q Type here to sea Known medical conditions Ba COPD Bb Asthma BC Sleep apnea	rch	8g Migraine 8h Back pain
Treated for pain at time o Q Type here to sea Known medical conditions Ba COPD Bb Asthma BC Sleep apnea	rch	8g Migraine 8h Back pain 8i Hepatitis C 8j HIV/AIDS
Treated for pain at time o Q Type here to sea Known medical conditions Ba COPD Bb Asthma COPD Steep apnea Heart disease	rch	8g Migraine 8h Back pain 8i Hepatitis C 8j HIV/AIDS 8k Other pain
Treated for pain at time o Q Type here to sea Known medical conditions Ba COPD Bb Asthma C Sleep apnea Bd Heart disease	rch s (Check all that apply)	8g Migraine 8h Back pain 8i Hepatitis C 8j HIV/AIDS

1	BystandersPresent	12	IsNaloxoneAdminOther	1 BystandersPresent	9	IsNaloxoneAdminLaw
2	, WitnessedDrugUse	13	IsNaloxoneAdminBystander	1a BystanderUser	10	IsNaloxoneAdminEMS
3	NaloxoneAdministered	14	IsNaloxoneWhoPerson	1b BystanderPartner	11	IsNaloxoneAdminHospital
4	IsNaloxoneNotAdmin	15	IsNaloxoneWhoPartner	1c BystanderFamily	12	IsNaloxoneAdminOther
5	IsNaloxoneUnknown	16	IsNaloxoneWhoStranger	1d BystanderFriend	13	IsNaloxoneAdminBystander
6	IsNaloxoneAdminUnknown	17	IsNaloxoneWhoOther	1e BystanderStranger	14	IsNaloxoneWhoPerson
7	NaloxoneTotalResponder	18	IsNaloxoneWhoFriend	1f BystanderRoomate	15	IsNaloxoneWhoPartner
8	TreatedforPain	19	IsNaloxoneWhoRoommate	1g BystanderMedical	16	IsNaloxoneWhoStranger
9	IsNaloxoneAdminLaw	20	IsNaloxoneWhoOtherFamily	1h BystanderOther	17	IsNaloxoneWhoOther
10	IsNaloxoneAdminEMS	21	NaloxoneTotalBystander	1i BystanderCPR	18	IsNaloxoneWhoFriend
11	IsNaloxoneAdminHospital			1j BystanderBreathing	19	IsNaloxoneWhoRoommate
				1k BystanderSternal	20	IsNaloxoneWhoOtherFamily
				1l BystanderStim	21	NaloxoneTotalBystander
				1m BystanderIntOther	22	HadPulse
				2 WitnessedDrugUse	23a	a FirstResponderCPR
				3 NaloxoneAdministered	23b	FirstResponderBreathing
				4 IsNaloxoneNotAdmin	23c	FirstResponderEpinephrine
				5 IsNaloxoneUnknown	23d FirstResponderED	
				6 IsNaloxoneAdminUnknown 23e FirstResponder(e FirstResponderOxygen
				7 NaloxoneTotalResponder	eTotalResponder 23f FirstResponderOth	
				8 TreatedforPain	24	BystanderNotRecognize
				8a MedHx_COPD	25	BystanderUsing
				8b MedHx_Asthma	26	BystanderPublic
				8c MedHx_Apnea	27	BystandernoOD
				8d MedHx_Heart	28	BystanderSeparated
				8e MedHx_Obesity	29	BystanderUnaware
		8f MedHx_Injury			30	BystanderReasonOther
				8g MedHx_Migraine		
				8h MedHx_BackPain		
				8i MedHx_HepC		
				8k MedHx_OtherPain		
				8I MedHx_OtherBreathing		

Changes to Response to Drug Overdose and Medical History Sections:

- 8 additional data elements (#1a #1h) capture more detail on the bystanders of the fatal overdose. This information can be critical in allocating naloxone and other training resources to people who are likely to be present during fatal opioid overdoses.
- 6 additional data elements (#1i #1n) expand the list of bystander's response to the overdose and emerge from state abstractors work on SUDORS. This will increase information on bystanders responses to fatal overdose and can inform training of bystanders likely to respond to overdoses.
- 12 additional data elements capture information on decedent's pre-existing conditions that: 1) may have contributed to the fatal overdose (#8a #8e and #8l), 2) be related to injection drug use (#8i and #8j), or 3) explain the decedent's use and/or prescription of opioid pain relievers (#8f #8h and #8k).
- 7 additional data elements (#24 #30) capture reasons bystander's response to an overdose were delayed. Identifying these reasons can provide critical knowledge in improving responses to potentially fatal drug overdoses.
- 1 additional data element (#22) was added to capture the condition of the decedent when first responders arrived.

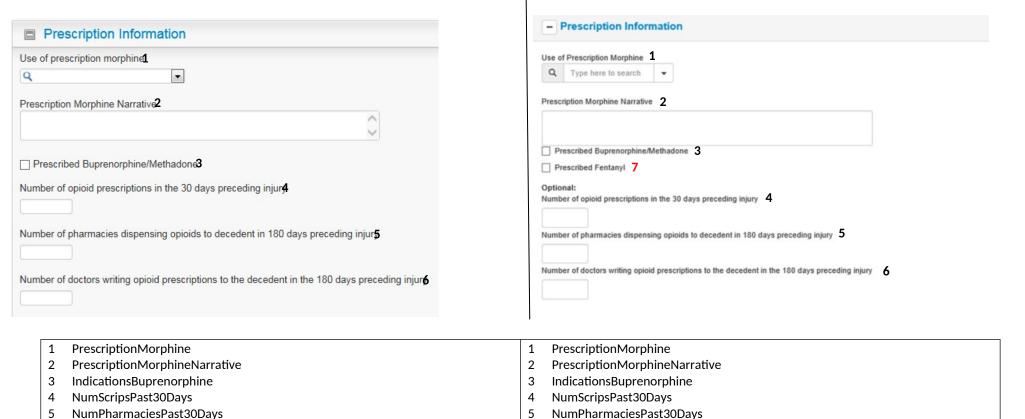
 This information is important because the appropriate medical response may vary depending on whether the decedent had a heart beat when first responders arrived.
- <u>6 additional data elements (#23a #23f) were added to capture the full array of treatments first responders administred to drug overdose decedents. This can inform training for future responses to potentially fatal drug overdoses.</u>

SUDORS Tab: Prescription Information Section

Previous SUDORS version

NumDoctorsPrescribing30Days

Proposed SUDORS version



Changes to Prescription Information Section:

• 1 additional variable added to capture evidence that the decedent was prescribed fentanyl. This information is critical in determining whether the death was most likely linked with prescription fentanyl versus illicitly manufactured fentanyl.

FentanylRx

NumDoctorsPrescribing30Days