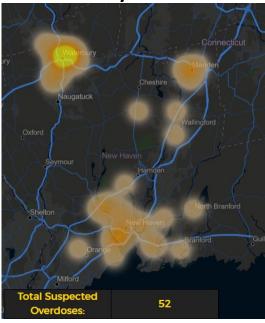


PH) CT EMS SWORD

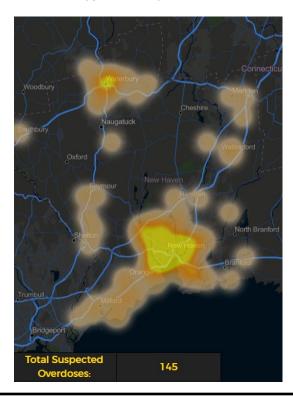
Statewide Opioid Reporting Directive Newsletter

December 2023, Issue LV

New Haven County CPCC vs. API



November 2023, (above /\) New Haven County, as reflected in calls made to the Connecticut Poison Control Center as part of the SWORD program. Below \(\sqrt{} \) as reflected in the API data automatically exported for New Haven County for the same period in November.



OEMS API Preliminary Results

The Connecticut Department of Public Health Office of Emergency Medical Services has been experimenting with an API (Application Programming Interface) which enables data from EMS EPCR's (Electronic Patient Care Records) to automatically populate ODMAP (the Federal software program Connecticut uses to track overdoses) if data in the run form indicates a suspected opioid overdose. While this testing goes on, EMS are reminded that they still need to call the Connecticut Poison Control Center (CPCC) to report all suspected opioid overdoses as required by law.

Three takeaways from the early data.

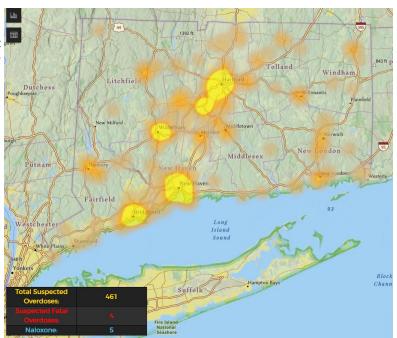
- 1. EMS Sword Compliance is highly variably by town/ service. Failure of EMS to call the CPCC impacts the local health departments in the data and surveillance efforts. We estimate statewide SWORD compliance has fallen to 50%. The API data fills in notable gaps in compliance, particularly in the New Haven area.
- 2. The API data is closely aligned demographically with SWORD data. A sample of the API data shows the overdose gender breakdown of 71% male/29% female. SWORD data shows the 72% male/28% Female. Both data sets show the age group most likely to overdose is 30-34, followed by 35-39 and 40-44.
- 3. SWORD narratives are more detailed in their description of the overdose, including who administered the first naloxone, side effects of naloxone, any paraphernalia found, and history of the event. SWORD narratives have particularly been revealing in their description of patients overdosing on Percocets that were later believed to be counterfeit, as well as patients who overdosed and required naloxone who stated they had only used cocaine.

Current Plan:

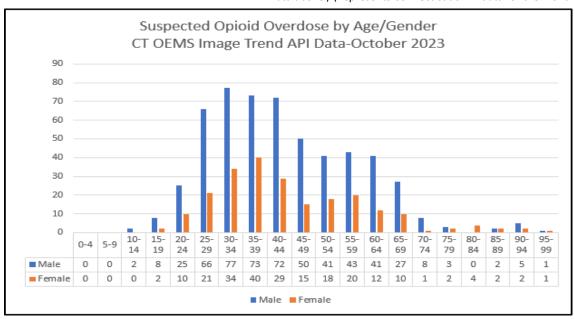
1. EMS is encouraged to include as much detail in their written PCR narratives describing the overdoses they respond to. These narratives are read in detail when overdose spikes are suspected.

API Preliminary Results cont. from pg. 1

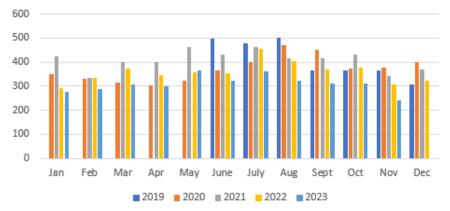
- 2. EMS should continue to call the CPCC to report suspected opioid overdoses. The current combination of data sources: SWORD, the new API, the Epicenter Syndromic Surveillance, which reviews emergency department overdose data and the Office of the State Medical Examiner, which reports on fatalities, provides a variety of important views on the status of the ongoing epidemic.
- 3. Users of ODMAP should understand that the new API will increase the number of overdoses reported, as well as possible spike alerts, and be familiar with the individual data source filters that can be used to isolate data.



Data above /\ represents Connecticut's API data for the month of October 2023.



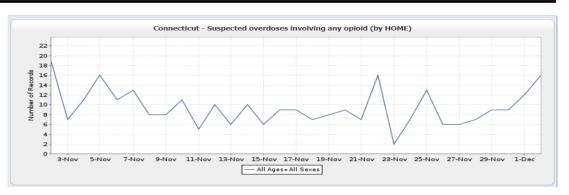
Suspected Overdoses by month June 2019-November 2023

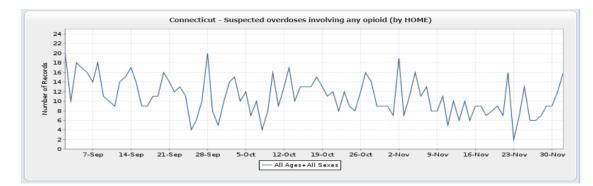


Data sourced from Connecticut Poison Control through the SWORD program. This sample was extracted in December 2023

Right >: Suspected
Overdoses Involving Any
Opioid, totaled by day, for
the previous 30 days:

Information sourced from EpiCenter system, December 2023.





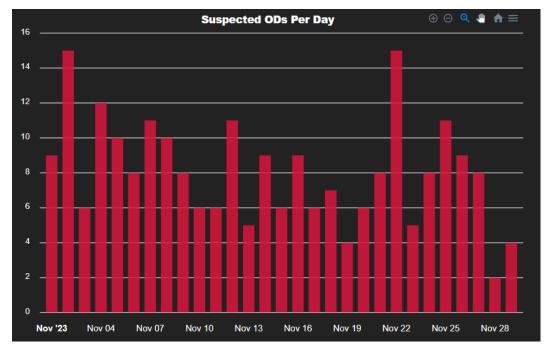
Left: < Suspected overdoses involving any opioid by day previous 3 months
Information sourced from EpiCenter

system, December

2023.

Right >: This graph represents EMS reported opioid overdoses by incident day during October 2023.

This graph was sourced from OD-MAP in December 2023.

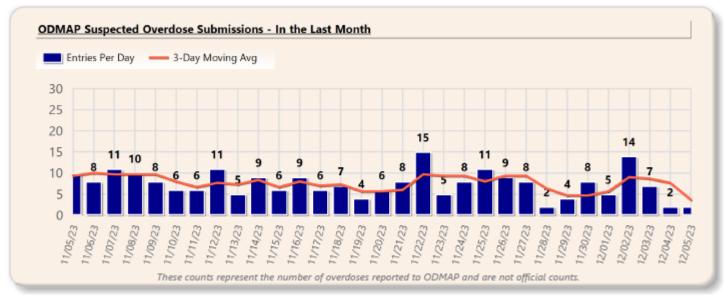


SWORD Statewide Reporting November 2023

In the month of November 2023, there were 242 calls to the Connecticut Poison Control Center (CPCC) for SWORD. Of these calls, 230 were non-fatal and 12 were reported as fatalities. There were 209 total naloxone administrations: 120 non-fatal multiple doses of naloxone administered, 82 non-fatal single dose naloxone, 27 non-fatal with no naloxone administered and two non-fatal naloxone administration unknown. Of the 12 fatalities, six received multiple doses of naloxone, one received a single dose, and five with no naloxone administered.

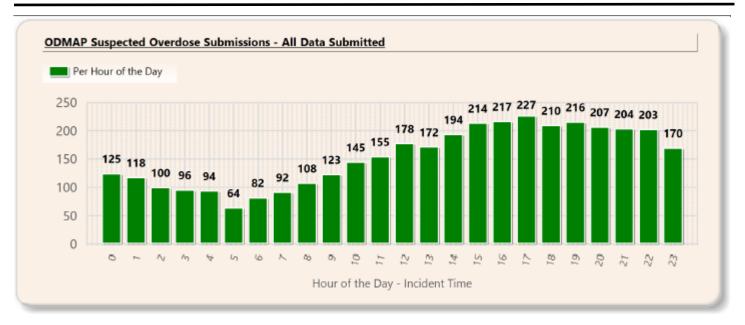
The 242 cases involved suspected overdoses from all of our counties: Fairfield 33, Hartford 105, Litchfield 13, Middlesex seven, New Haven 52, New London 18, Tolland five and Windham nine.

^{*}Numbers subject to change



ODMAP Suspected OD Submissions by day.

This graph shows total suspected overdoses called in each day during the time period.



Cumulative (June 2019—November 2023) Overdoses by the Hour of the Day

This graph shows the hour of the day suspected overdose incidents have occurred statewide since the SWORD program began on June 1, 2019.

Do you need help accessing ODMAP Click here to contact the ODMAP Helpdesk, or call (301) 489-1744



Department of Public Health Office of Emergency Medical Services

Click here to contact OEMS regarding the SWORD program,

ODMAP, or feedback, <u>Click here</u> to check out the SWORD page on our website

410 Capitol Ave Hartford, CT 06134 860-509-7975

Thank you for your participation!

