

Responding to substance use incidents and overdoses are not new for Interior Health employees or other first responders. There is little to no risk for a staff member to be harmed during response to an overdose or substance use event from exposure. IH has staff who regularly sit bedside/near people who are actively using drugs as their primary job (i.e. overdose prevention site nurse or clinicians), this work is facilitated in a way that supports staff safety. Below you will find information about substance use, exposure, PPE, and risk-mitigation steps, with a focus on exposures that occur as a one-off or infrequently.

### **If you touch any unknown substance directly:**

- Avoid touching your eyes, nose, and mouth
- Wash your hands with soap and water
- Avoid using hand sanitizer to clean your hands. Alcohol based hand sanitizer does not deactivate or remove contaminants from the skin.

### **Care of a patient:**

- Patient care PPE is used regardless of substance use and/or suspicion of substance use, eg. nitrile gloves; medical mask may be used as otherwise clinically indicated (e.g. not related to substance use alone)
- If a substance(s) are visible (i.e. on a nightstand), ask the patient to store them safely in their backpack or a bag and away from staff or other patients.

### **Cleaning:**

- The same PPE standards apply, gloves and a medical mask are suitable.
- Standard cleaning procedures for hospital apply. Use of Oxivir, Accel, or Peridox wipes is sufficient to clean up any visible powder/residue.

### **Can someone overdose from touching substances?**

There is no harm related to casual touching of substances. There has been widespread inaccurate information on dermal (through the skin) fentanyl exposure risk. There is no risk to the health care staff/provider of overdose from accidentally touching fentanyl. Further, there are no recorded overdoses in B.C. from anyone touching fentanyl. Accidental or incidental dermal illicit fentanyl exposure (i.e., touching fentanyl on bare skin) does not present a health risk.

### **References & Resources:**

- [BCCDC: Assessing the risk of occupational fentanyl exposures in overdose prevention services \(OPS\) and safe consumption services \(SCS\) sites in British Columbia](#)
- [NCBI: Preventing Occupational Fentanyl and Fentanyl Analog Exposure to Emergency Responders](#)
- [BCCDC OD Toolkit](#)
- [PHSA Controlled Substance Risk Assessment \(CRSA\) Tool](#)