



# Naloxone Treatment Quarterly Reporting Form

Department of Criminal Justice Services - Byrne/JAG Naloxone for Law Enforcement Grant

Law Enforcement Agency: \_\_\_\_\_

DCJS Grant Number: \_\_\_\_\_ Grant Reporting Period: \_\_\_\_\_

Naloxone treatment incidents during the reporting period: \_\_\_\_\_

1. Number of Naloxone drug overdose treatment incidents based on the number of victims treated per overdose incident?

1 victim     2 victims  
 3 or more victims

2. Number of overdose incidents where children 12 years old or younger who were associated with the overdose victim were present at the scene of the overdose?

none present     1 present  
 2 present     3 or more present

3. Naloxone treatment incidents by location?

residence     business     office  
 street     parking lot     open space  
 other

4. Gender of overdose victims treated?

male     female  
 unknown

5. Age group of overdose victims treated?

17 or less     18-30     31-40  
 41-60     61 and over     unknown

6. Race-Ancestry of overdose victims treated?

Caucasian/white     African American/black  
 Asian/Pacific Islander     Hispanic/Latino  
 Native American     unknown

7. Overdose symptoms? (Check all that apply.)

Looked blue  
 Would not wake up  
 Stopped breathing  
 No response to stimuli  
 other

8. Overdose drugs associated with Naloxone treatment incidents?

heroin     morphine     fentanyl  
 oxycodone     codeine     methadone  
 cocaine/crack     meth     alcohol  
 other     unknown

9. Naloxone treatment incidents based on doses administered?

1 dose     2 doses     3 or more doses

10. Overdose victim's response at the scene of the Naloxone treatment?

Revived     Died     Unknown

11. Naloxone kit use problems or suggestions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_