

FOOMKA QAADASHADA NALOXONE (NALOXONE INTAKE FORM) INDIVIDUAL DISTRIBUTION

FOR OFFICE USE ONLY

<p>Form identification number: _____</p> <p>Date of Kit Distribution: ____/____/____</p> <p>Number of kits provided: _____</p> <p>How is this naloxone funded? <input type="radio"/> ODH Project DAWN <input type="radio"/> Other (non-ODH) _____</p> <p>What is the role of the person distributing naloxone? <input type="radio"/> Community Health Worker/Public Health Professional <input type="radio"/> First Responder/Law Enforcement Officer <input type="radio"/> Healthcare/Behavioral Health Provider <input type="radio"/> Lay Distributor <input type="radio"/> Peer <input type="radio"/> Pharmacist <input type="radio"/> Volunteer <input type="radio"/> Other _____</p>	<p style="text-align: center;">Distribution Setting:</p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="radio"/> Community Access Point <input type="radio"/> Court System <input type="radio"/> ED/Urgent Care <input type="radio"/> FQHC/non-LHD Clinic <input type="radio"/> Hospital System <input type="radio"/> Jail/Corrections <input type="radio"/> Leave-Behind (EMS/LEO) <input type="radio"/> Local Health Department (LHD) <input type="radio"/> Mobile Unit </td> <td style="width: 50%; vertical-align: top;"> <input type="radio"/> Online Mail-order <input type="radio"/> Pharmacy <input type="radio"/> QRT <input type="radio"/> School/University <input type="radio"/> Street Outreach <input type="radio"/> Syringe Service Program <input type="radio"/> Treatment/Recovery <input type="radio"/> Vending/Dispensing Machine <input type="radio"/> Other _____ </td> </tr> </table> <p>Zip Code of Distribution: _____ <input type="radio"/> N/A (online)</p> <p>County of Distribution: _____ <input type="radio"/> N/A (online)</p>	<input type="radio"/> Community Access Point <input type="radio"/> Court System <input type="radio"/> ED/Urgent Care <input type="radio"/> FQHC/non-LHD Clinic <input type="radio"/> Hospital System <input type="radio"/> Jail/Corrections <input type="radio"/> Leave-Behind (EMS/LEO) <input type="radio"/> Local Health Department (LHD) <input type="radio"/> Mobile Unit	<input type="radio"/> Online Mail-order <input type="radio"/> Pharmacy <input type="radio"/> QRT <input type="radio"/> School/University <input type="radio"/> Street Outreach <input type="radio"/> Syringe Service Program <input type="radio"/> Treatment/Recovery <input type="radio"/> Vending/Dispensing Machine <input type="radio"/> Other _____
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Da'da ☐ 14 ama ka yar ☐ 15-24 ☐ 25-34 ☐ 35-44 ☐ 45-54 ☐ 55-64 ☐ 65+ ☐ Ma rabo inaan sheego

Waa maxay jinsiga aad isku tirisaa?
☐ Dheddig ☐ Lab ☐ Labeeb ☐ Ma rabo inaan sheego ☐ Ma qorna _____

Waa maxay qoomiyadda iyo isirka aad isku tirisaa? Fadlan mid dooro.
☐ Caddaan ☐ Madow/Maraykanka Madaw ☐ Hisbaanik/Laatino ☐ Aasiyaan ☐ Reer Hawaii/Reer Jasiiradaha Baasifigga
☐ Hindida Ameerikaanka Dhaladka ah ama Reer Alaska ☐ Wax kale ☐ Ma rabo inaan sheego
☐ Iska-dhal/dad kala duwan iska dhaleen (xagga hoose, sax saar dhammaan kuwa khuseeya)

☐ Caddaan ☐ Madow/Maraykanka Madaw ☐ Hisbaanik/Laatiino ☐ Aasiyaan
☐ Reer Hawaii/Reer Jasiiradaha Baasifigga ☐ Hindida Ameerikaanka Dhaladka ah ama Reer Alaska ☐ Cid kale

Waa maxay zip code-ka Ohio ee meesha aad deggan tahay? _____ ☐ Ma rabo inaan sheego ☐ Ma deggani Ohio

Waa tee degmada Ohio ee aad deggan tahay? _____ ☐ Ma rabo inaan sheego ☐ Ma deggani Ohio

Ma isticmaashay daroogo sanadkii hore (aan ahayn marijuana)? ☐ Haa ☐ Maya ☐ Ma rabo inaan sheego

Waligaa si xad dhaaf ah ma u isticmaashay ama goobjoog ma ka ahayd cid si xad dhaaf ah u isticmaashay? ☐ Haa ☐ Maya
☐ Ma rabo inaan sheego

Kani ma waxa weeye naloxone-kii (Narcan) koowaad ee aad hesho? ☐ Haa ☐ Maya ☐ Ma rabo inaan sheego

Hadday tahay maya, maxaa ku dhacay sanduuqaagii hore?
☐ Sanduuqaagii aniga ayaa la ii isticmaalay ama cid kale oo si xad dhaaf ah u isticmaashay daroogo → Qofkaasi ma badbaaday?
☐ Haa ☐ Maya ☐ Ma rabo inaan sheego
☐ Daawada sanduugayga ku jirtaa waa dhacday
☐ Wax kale
☐ Ma rabo inaan sheego