

Harm Reduction & Overdose Prevention

Visit a Syringe Service Program:

- Sterile syringes & other supplies at no cost
- Sharps containers & safe disposal of used syringes
- Naloxone kits & training
- Overdose prevention education
- HIV & Hepatitis C testing, education & linkage to care
- Referrals to medical, mental & sexual health services
- Referrals to substance use disorder treatment & recovery supports

If you are using drugs:

- Carry naloxone
- Teach those around you to use & carry naloxone
- Do not use alone
- Have a safety plan for every time you use

Hours & Locations:

[Minnesota Syringe Exchange Calendar \(www.justushealth.mn/minnesota-syringe-exchange-calendar\)](http://www.justushealth.mn/minnesota-syringe-exchange-calendar)

Using Naloxone for a Drug Overdose

Opioids are a group of drugs including prescription opioids, heroin, fentanyl, and fentanyl analogs. Opioids can cause slow or troubled breathing. Naloxone, also called Narcan, is the medicine that blocks the effects of an opioid during an opioid overdose emergency. Naloxone only works with opioids. However, in Minnesota, other non-opioid drugs such as cocaine, methamphetamine, or marijuana sometimes are mixed with opioids, including fentanyl.

Signs of an Overdose

- Unresponsive or unable to wake up
- Blue or pale lips or nails
- Shallow, raspy, or paused breathing
- Gurgling sounds in the throat
- Slow heart rate

Responding to an Overdose

- Call 911 right away, stay with the person
- Give 2 rescue breaths
- Administer naloxone if available
- Continue rescue breaths until help arrives
- If little/no effect after 2 minutes, administer another dose of naloxone (every 2 minutes)
- Continue rescue breaths until help arrives

Steve's Law/Good Samaritan Law:

Anyone in Minnesota can administer naloxone when acting in good faith to respond to an opioid overdose emergency.

Go to and stay at the hospital:

Naloxone lasts approximately 30-45 minutes; as the naloxone wears off, the person needs medical supervision because of slow or troubled breathing.

Poison Control (1-800-222-1222):

Poison Control is a confidential call center, available 24/7 for questions about drug interactions, or suspected poisoning, including drug overdose. Medical providers monitor the phones.

Accessing Substance Use Disorder and Mental Health Treatment

If you have private insurance, call the back of your insurance card to discuss treatment options. If you have medical assistance (MNsure, MA), no insurance, or if you have trouble accessing treatment through your private insurance, call the Front Door. You must live in Hennepin County to use this service.

Front Door (612-348-4111)

- For a Rule 25 appointment:
 - Press # for language.
 - Press 0 to talk to Social Services Intake.
- A public health nurse or social worker will answer the phone.
- They can give you three places to call to set up your own Rule 25 appointment. There are also first come, first served locations.
- Front Door can answer social services related questions and connect you to other resources.
- If you have mental health or substance use disorder treatment placement issues, please call the Clinical Review Team at 612-879-3671.

Other Resources

- **Fast-Tracker (www.fast-trackermn.org/)**
Visit Department of Human Services (DHS) Fast Tracker for a statewide searchable database of mental health and substance use disorder treatment openings.
- **Detox 612-879-3646**
Call 1800 Chicago, a detox and withdrawal management 40-bed facility.
- **Mental health emergencies 612-596-1223**
Call Community Outreach for Psychiatric Emergencies (COPE) 24/7 for mental health emergencies anywhere in Hennepin County.
- **For thoughts of suicide 1-800-273-TALK (8255)**
Call the Suicide Hotline 24/7 if you are having thoughts of suicide.

Rule 25 or Chemical Dependency Assessment*:

This is a required appointment to enter treatment for a substance use disorder and typically takes a few hours. A provider will ask about your health history, recovery journey, and needs.

After the appointment:

The provider will write an Assessment Summary and Plan that is good for 45 days. It will show what type of treatment and services they recommend.** Some examples are inpatient, outpatient, and medicine-assisted treatment (e.g. buprenorphine/suboxone, methadone, or naltrexone).

In the meantime:

- Talk to your provider about withdrawal management.
- Go to the hospital or detox if needed.
- Carry naloxone.
- Visit a syringe service program.
- Safely dispose of supplies.
- Build your support network.
- Make plans for work and family life.
- Ask for peer support services, treatment navigation and/or attend support groups.

*DHS is revising the Rule 25 process. Eventually, there will be "Direct Access" so clients can go directly to treatment of their choice. Learn more at [Substance Use Disorder Reform \(https://mn.gov/dhs/sudreform/\)](https://mn.gov/dhs/sudreform/)

**The Assessment Summary and Plan summarizes the services that are recommended to be covered by Medical Assistance.