



# Opioid Overdose Training Follow-up

Date:        /        /

Thank you for your time. The information gathered below helps improve the response to opioid overdoses within New Mexico communities. You may choose not to answer questions, and all the responses you provide are confidential.

**Create a unique ID.** This makes sure the answers are anonymous.

First two letters of first name:	First two letters of mother's first name:	Birth year ( <u>last</u> 2 digits):	County of residence (number):	1 – Bernalillo 2 – Doña Ana 3 – Rio Arriba 4 – Santa Fe 5 – Other
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

**Instructions:** A few months ago, you participated in a training on how to respond to an opioid overdose. Please answer the following questions about that training.

1	As a result of the training, I learned new information and skills.	Strongly Agree	Agree	Disagree	Strongly Disagree
2	The training adequately prepared me to accurately recognize overdose symptoms.	Strongly Agree	Agree	Disagree	Strongly Disagree
3	I remain confident that I can effectively use the skills I learned in the training to respond to an overdose.	Strongly Agree	Agree	Disagree	Strongly Disagree
4	I have used the information and skills I learned in the training.		YES		NO
5	I have accurately identified an opioid overdose since the training.		YES		NO
6	I have administered Narcan/naloxone since the training.		YES		NO
7	I have administered rescue breathing since the training.		YES		NO
8	Please share any recommendations for how the training could be improved or any content that could be further developed.				