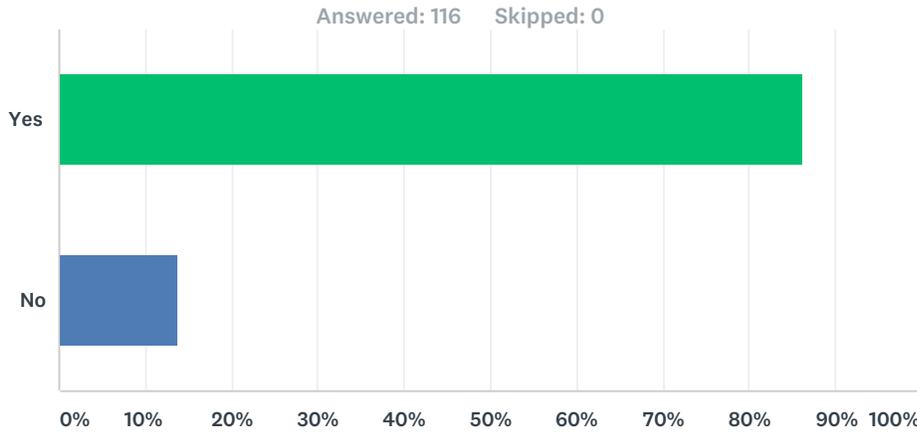


Q1 Do you support issuing the proposed position statement on naloxone as a Position Statement of AAFS?



Answer Choices	Responses
Yes	86.21% 100
No	13.79% 16
Total	116

#	Please Explain Why	Date
1	This is not applicable to my field.	8/1/2017 7:47 AM
2	Due to the high probability of First Responders / Forensic Personnel coming in contact, handling and processing evidence and/or substances which may contain synthetic opioids, these personnel should have access to naloxone as an antidote to inadvertent opioid overdose.	7/30/2017 10:15 PM
3	Submissions of synthetic opioids are increasing annually and it is important that people coming in contact with these dangerous substances have access to Naloxone. PPE is not enough to protect those working so closely with the fatal drugs. I support AAFS recommending that forensic labs, medical staff, and those involved in investigations have access to Naloxone because you never know when you will come in contact with the deadly opioids, much less know if an unknown powder may be dangerous or not upon collection.	7/26/2017 11:40 AM
4	Having Naloxone in the laboratory is very important with the prevalence of synthetic opioids. If an official statement will positively influence laboratory safety, then I am in support of this position.	7/25/2017 11:43 AM
5	It is appropriate and timely.	7/25/2017 10:44 AM
6	It can never hurt to be too prepared. Naloxone is a seemly cheap "break in case of emergency" option for forensic labs to have on hand.	7/24/2017 4:37 PM
7	As a Medicolegal Death Investigator I am exposed to powders of unknown origins aka suspected synthetic opioids unfortunately on a routine basis... either it being on scenes or at the office when I'm processing and undressing bodies that come in from hospitals and scenes. People are getting more creative which how they are using the products and where they are hiding it in their personal effects. And I'm not the only person that handles the body/clothing/paraphernalia/drugs at the office. Everyone does in our office meaning the investigation department, trace department, forensic pathologist, receiving department, toxicology, drug chemistry, to property department. This is epidemic of synthetic opioids is a real problem and it has only just begun... any additional protection anyone in ME or Cornors office is a blessing!	7/23/2017 6:58 AM

8	It is extremely important that members have the backing of organizations like AAFS to help persuade their agencies to be current with proper PPE and first aid equipment. It is just as likely that chemists or evidence handlers in the lab will encounter an accidental exposure as first responders.	7/20/2017 4:35 PM
9	The safety and well-being of our highly trained forensic service providers is of utmost importance.	7/20/2017 1:35 PM
10	The document is fine and the link to the DEA briefing guide is helpful, except for the fact that DEA stands for Drug Enforcement Administration, not Agency. This will need to be corrected in the AAFS report.	7/20/2017 12:15 PM
11	Naloxone is life saving. There are no major harmful side effects.	7/20/2017 12:11 PM
12	While as a toxicologist, my opinion is that significant exposure through skin contact or inhalation under normal circumstances is unlikely, I agree that naloxone should be available to first responders and laboratory personnel in the unlikely event of an exposure.	7/20/2017 6:39 AM
13	I am one of the many forensic providers that could be impacted by inadvertent contact - I believe the provision of naloxone should be mandatory as a life saving tool.	7/19/2017 7:05 PM
14	We need to save lives. The opioid epidemic is killing many young people and we need to do everything we can to stop it. Naloxone can be dosed by non-medical personnel and save lives. I worked for the National Institute on Drug Abuse that developed the nasal spray in conjunction with a pharmaceutical company. This is very important.	7/19/2017 4:44 PM
15	At this time, I think it's important for the AAFS to make a formal statement on the topic.	7/19/2017 2:48 PM
16	It is important to realize the hazards associated with the handling and testing of such substances. Use of naloxone may prevent overdose; however, it will not reduce or prevent exposure. Proper safety equipment and instruction will, in most to all instances, eliminate hazards associated with fentanyl, its derivatives and other synthetic opioids. The fact is that fentanyl and other synthetic opioids have been routinely observed in casework samples for several years now with little to no incidence of exposure and overdose to the practitioner or first responder until recent media reports claiming exposure occurred via absorption, etc. Competent and trained practitioners and first responders know that all substances should be treated as hazardous and handled with caution. Similar to synthetic opioids, NBOMe-type compounds are known to be significantly more potent than LSD and are also toxic when airborne particulate is inhaled or the substance is absorbed through the skin, yet no unique position statement was generated. To add, there are differing views on toxicity said to occur via skin absorption: http://www.slate.com/articles/health_and_science/medical_examiner/2017/06/toxicologists_explain_the_medical_impossibility_of_overdosing_by_touching.html It is imperative for organizations to provide proper safety equipment and protocols for the handling and testing substances to help prevent exposure. Most important is to stress the importance and recommend proper procedures to prevent the need of antidote, naloxone.	7/19/2017 11:16 AM
17	This era of synthetic opioids is a real health threat, so the availability of naloxone and training in its use should be mandatory before handling drug evidence or reference standards before attempting analysis.	7/19/2017 8:52 AM
18	I think it looks good. I would like to see a bit more "Although unlikely, symptoms of exposure or overdose may occur rapidly..." And I like that all personnel should be able to recognize an overdose, but I would like a resource from the perspective of the person experiencing the effects. I would like to know what symptoms I should look for in myself so that I know when to seek the assistance of others in case of exposure. And then I'd love to see a resource on that. I haven't found any other than user accounts. Thanks!	7/19/2017 5:33 AM
19	The position statement from AAFS on naloxone should be in agreement with the position statement on the same topic issued on July 12, 2017 by the American College of Medical Toxicology (ACMT) and American Academy of Clinical Toxicology (AACT). If not in agreement, modifications of the AAFS statement should be considered. If in agreement, I support issuing the proposed position statement. See http://www.acmt.net/Library/Fentanyl_Position/Fentanyl_PPE_Emergency_Responders_.pdf Thanks. Corinne Fligner, MD	7/18/2017 6:04 PM
20	While most first responders/departments are likely already well aware of the issue and addressing it, this would be a powerful tool for responders whose departments may be short on budget. It spotlights a critical need for these departments.	7/18/2017 2:59 PM

21	Good general information for scientists and first responders who may come in contact with fentanyl or a fentanyl analog.	7/18/2017 2:41 PM
22	Our laboratory has purchased Narcan and specialized personal protective equipment to ensure that our technicians and analysts are provided the necessary tools to have an elevated level of safety while performing their regular job duties. We have also recently evaluated the fentanyl field test kits from Sirchie for our crime scene response team and have found them to be another valuable tool to have when having to collect unknown substances.	7/18/2017 1:49 PM
23	It is logical and relevant.	7/18/2017 1:29 PM
24	The risk of synthetic opioid exposure is increasing and more awareness is needed.	7/18/2017 1:21 PM
25	We are seeing more and more fentanyl and its analogs. Since it works so rapidly we need to be able to treat an exposure if necessary.	7/18/2017 12:16 PM
26	I believe that it covers the generally accepted protocols that have been adapted by forensic laboratories in response to the opioid crisis.	7/18/2017 11:45 AM
27	shouldn't it be for both inadvertent and intentional overdoses?	7/18/2017 10:50 AM
28	First responders frequently are exposed to dangerous and uncontrollable environments. On occasion they ignore safety protocols and expose themselves to hazardous substances. Should an exposure occur, immediate life saving naloxone can be administered. It is imperative that training is provided to detect symptoms of opioid poisoning and how to administer naloxone.	7/18/2017 10:45 AM
29	I do not think it is appropriate for AAFS to address this issue.	7/18/2017 10:43 AM
30	As a forensic scientist working in a lab very closely with the drug analysis section, I am fearful for my colleagues and myself regarding inadvertent exposure to dangerous opioids.	7/18/2017 10:39 AM
31	Yes, I support issuing this document for safety issues. However, the term forensic service location should be expanded or show examples of all entities for which the document pertains.	7/18/2017 10:12 AM
32	With the quick rising popularity of fentanyl it is important to ensure forensic service providers and first responders are informed about the potential risks.	7/18/2017 10:12 AM
33	Safety information should always be provided when available. I think that within the statement it would be helpful to provide a reminder that preventing exposure is most important and provide a link in how to treat any drug substance as if it contains something lethal. Naloxone should be seen as last ditch safety net..	7/18/2017 9:31 AM
34	It is an important safety measure that should be present in all labs synthesizing or handling opioids and homes where opioids are in use.	7/18/2017 9:19 AM
35	The reference to the US Drug Enforcement Agency is incorrect. It is the Drug Enforcement Administration, not Agency. This editorial fix is necessary to validate the referenced report	7/18/2017 9:11 AM
36	There is no evidence that airborne dust or particles on a surface can cause an overdose with synthetic opioids. This is perpetuating fake news hysteria. Please see the statement by the American College of Medical Toxicology.	7/18/2017 8:41 AM
37	For its potential life saving in accidental exposure cases.	7/18/2017 8:17 AM
38	I voted yes, however I have my hesitation. I am not certain that AAFS represents itself as a clinical organization involved in treatment (for example, the way ASAM-Amer Acad of Addiction Medicine is). Therefore, I am not certain that it is our role to recommend clinical interventions to prevent societal harm. I don't disagree with the recs; I am just not sure that it is our role to give it. If our role is to give clinical guidelines, there are many other guidelines we should give...reducing violent confrontations; how to survive a sexual assault; treatment of PTSD; trauma crisis intervention etc. I think the discussion of clinical guidelines should be held at the next conference at the board of directors meeting, as to whether this fulfills or detracts from AAFS' mission and goals. I am happy to discuss this further. Dean De Crisce, Secty Psych Section. decrisce.md@gmail.com.	7/18/2017 8:16 AM
39	Yes, however since there is a great deal of misinformation and rumor being circulated, the statement should be less alarmist and explain that reasonable precautions such as gloves and masks are effective barriers to exposure so as to avoid the possibility that first responders and other technicians either refuse to render aid or perform collection and testing.	7/18/2017 7:59 AM

40	I think that the position paper as it stands on naloxone is fine, and is needed to help clarify the need for readily available naloxone at all sites where accidental contact with opioids can occur. I think that there is still a need for a position paper regarding safety measures that should be taken at laboratories. There is a significant amount of literature available on PPE/safety measure that are recommended for first responders, but a glaring lack of guidance on PPE/safety measures/environmental measures that should be utilized in a forensic lab setting.	7/18/2017 7:30 AM
41	Can save lives if exposure occurs.	7/18/2017 7:23 AM
42	Has AAFS felt the need to issue statements on other safety related Forensic Science issues?	7/18/2017 6:49 AM
43	Ultimately, I believe that this initiative is very important, but I think there needs to be a discussion about potential quantity/amount or remarks about what is currently being reported. I think the current language seems to suggest that recent reports of "dusting off uniforms" is a confirmed link to opioid overdose, while this may be inaccurate. I do support the emphasis on being able to identify an opioid overdose by those administering naloxone.	7/18/2017 6:34 AM
44	Due to potential funding deficits and slow management responses in some laboratories, issuing this position statement may quicken the implementation of a Naloxone availability program to affected personnel.	7/18/2017 6:22 AM
45	Naloxone is not "low cost". Medical personnel should do the training for lab staff.	7/18/2017 6:18 AM
46	The Police Department I currently work for, Westfield Police Department, IN, has already implemented Narcan (Naloxone) to all officers and investigators.	7/18/2017 6:17 AM
47	I feel that any position on treating an accidental exposure should also cover PREVENTING an accidental exposure. The recent position issued from ACMT and AACT was much more appropriate and included PPE as well as naloxone availability/use. http://www.acmt.net/Library/Fentanyl_Position/Fentanyl_PPE_Emergency_Responders_.pdf I also feel the title should be more than just "Naloxone".	7/18/2017 6:11 AM
48	Naloxone is an important safety measure for all those who may be exposed to synthetic opioids and are at risk of an overdose due to that exposure.	7/18/2017 6:06 AM
49	At this time, naloxone is the best "anti-dote" available to practitioners who may be exposed to synthetic opioids. Better safe than sorry.	7/18/2017 5:32 AM
50	Because those persons who are trying to render aid are at risk of being affected by these synthetic opioids.	7/18/2017 5:28 AM
51	This statement simply aligns the AAFS with any number of local, county, and state recommendations.	7/18/2017 4:56 AM
52	Many neighboring jurisdictions are having a hard time getting their management to sign off on them getting naloxone. This is another thing they can use to pursue them.	7/17/2017 11:21 PM
53	This is a reasonable safety measure.	7/17/2017 7:02 PM
54	Half-life of Naloxone is short and discretion of administration by personnel in any setting must be considerable or it may delay getting victim to definitive medical care. Ready access may actually encourage, not prevent, an already risky behavior. Administration provides false security that victim I free from danger and without definitive medical care, they may relapse and die..	7/17/2017 5:37 PM
55	it will save lives	7/17/2017 5:15 PM
56	We understand there is an opioid and opiate epidemic in the US from multiple causes, not the least being physicians endorsing and over prescribing at the behest of pharma, who also make naloxone, but truly what other drug or medication or treatment therapy has the Academy endorsed in such a manner? What is the forensic aspect and rationale of endorsing such a treatment? It does not seem it is our place as a forensic sciences organization to endorse medical or resuscitation treatment, even though it is humane. It is best done by those in medicine, EMS, police, and local governments. Just my thoughts. Thank you.	7/17/2017 5:13 PM
57	Safety is of utmost importance	7/17/2017 5:12 PM
58	It's an articulate, workable, and well supported set of recommendations that could serve to guide a variety of public and private training regimens for first responders, laboratory staff, and clinical personnel. In addition, it could become a stand-alone document for general dissemination to forensic and criminalistics laboratories, as well as to medical personnel who work in various settings.	7/17/2017 4:47 PM

59	Too many deaths from ODs that could potentially been "rescued".	7/17/2017 4:06 PM
60	Should also broaden the statement to include the public health value of non-prescription access to naloxone for everyone and recommend all law enforcement and officers of the court to have and use naloxone when necessary.	7/17/2017 3:50 PM
61	I have personally seen naloxone reverse the toxic effects of an opioid overdose in a emergency setting... All for it.	7/17/2017 3:23 PM
62	Exposure to synthetic opiates can quickly result in respiratory arrest. If naloxone is not immediately available and administered, death can quickly result.	7/17/2017 2:40 PM
63	It is important for forensic analysts who handle seized drugs to have access to naloxone. AAFS issuing a position statement may help agencies justify the purchase.	7/17/2017 2:35 PM
64	Critical to be pro-active and provide a means to protect Forensic Scientists performing the analysis in the lab in the event other mechanisms (PPE, engineering) fails.	7/17/2017 2:28 PM
65	Although I agree with the position relating to forensic science providers.... first responders is a very different issue. In San Bernardino County, where temperatures routinely exceed the approved storage conditions for narcan, it would be difficult to ensure that law enforcement first responders would be able to administer an effective dose of the drug. It would seem that, at least in urban areas, EMS would be a better solution. Due to the variability of storage conditions, it would seem more prudent to leave decisions on supplying law enforcement field personnel to the local agency.	7/17/2017 2:21 PM
66	Safety for forensic personnel that may involve with, or come into physical contact with the synthetic fentanyl analog carfentanil is of utmost importance and concern.	7/17/2017 1:57 PM