



## FENTANYL AND CARFENTANIL EXPOSURE IN HEALTH AND COMMUNITY CARE WORKERS

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This fast fact has been developed to protect health and community care workers from accidental exposure to hazardous drugs such as fentanyl and carfentanil and to support the Canadian Action Plan for better informing Canadians about the risk of opioids.

### WHAT ARE FENTANYL AND CARFENTANIL?

Fentanyl is a strong synthetic opioid drug administered to patients to prevent pain following surgery, for the management of chronic pain, and to produce sedation during medical procedures. Although similar in effect to morphine and heroin, fentanyl is 50 to 100 times more potent<sup>1</sup>. Carfentanil is an analog of fentanyl, however, it is 100 times more powerful than fentanyl and 10,000 times more powerful than morphine. As it is the most potent commercially used opioid, carfentanil is inappropriate for use in humans and is intended to be used as a tranquilizer for large animals<sup>2</sup>. Both fentanyl and carfentanil are currently listed in Schedule I of the federal

Controlled Drugs and Substances Act (1996).

Recently, illicit fentanyl, carfentanil and other analogs have been emerging as recreational drugs used by drug abusers.

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### WHAT DOES STREET FENTANYL LOOK LIKE?

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Street fentanyl can come in many forms including powder form similar to heroin, powder form mixed into other drugs such as cocaine, transdermal fentanyl patches, or (green) tablets resembling fake oxycodone pills<sup>3</sup>.



## HOW CAN HEALTH AND COMMUNITY CARE WORKERS BE EXPOSED TO FENTANYL OR CARFENTANIL?

Front-line health and community care workers may become accidentally exposed to fentanyl when working with a patient who has used or overdosed on the drug or its analogs, or when conducting searches of a patient who has the drug

with them. Some examples of tasks that could be hazardous and would require risk assessment include removing the clothing, searching, reviving, and transferring of a patient who has used the drug or has the drug in their possession.

## WHAT ARE THE ROUTES OF EXPOSURE TO FENTANYL AND CARFENTANIL?

Fentanyl and its analogs can enter the body by inhalation, ingestion, or intravenous or intramuscular injection. Skin contact is also thought to be a potential exposure route, but is not likely to lead to overdose unless there is prolonged exposure to large volumes of highly concentrated fentanyl in powder form.<sup>1</sup> Brief skin contact with fentanyl or its analogs is not expected to lead to toxic effects if any visible contamination is immediately removed.<sup>1</sup> It is not yet known whether fentanyl can be absorbed through the eyes. Overall, inhalation and incidental ingestion are the greatest threats to health and community care workers.

## WHAT ARE THE SIGNS AND SYMPTOMS OF FENTANYL OR CARFENTANIL OVERDOSE?

The signs and symptoms of a fentanyl overdose are not distinct from overdoses of other opioids. The symptoms include:<sup>3, 4, 5</sup>

- Trouble walking or talking
- Severe sleepiness, gurgling or snoring sounds
- Slow, shallow breathing
- Bluish lips and nails
- Person is unresponsive
- Cold and clammy skin
- Tiny 'pinpoint' pupils
- Slow heart rate
- Seizures
- Not responding to noise or knuckles being rubbed hard on their breastbone (sternal rub)

## WHAT ARE THE HEALTH EFFECTS OF EXPOSURE TO FENTANYL OR CARFENTANIL?

Health effects of fentanyl and its analogs include rapid depression of the central nervous system, delayed or reduced respiratory function, respiratory arrest, tightening of chest muscles, rise in blood

pressure within the brain, and muscle spasms.<sup>1</sup> Exposure to pure, high potency fentanyl may be fatal as it rapidly slows respiratory function.

# WHAT CAN BE DONE TO CONTROL EXPOSURE TO FENTANYL AND CARFENTANIL?

## ESTABLISHING EFFECTIVE ILLICIT DRUG SEARCH MEASURES AND PROCEDURES:

Employers have an obligation to take every precaution reasonable in the circumstances for the protection of a worker. This includes conducting an organizational risk assessment, and developing clear guidelines on how to handle situations when workers may encounter illicit drugs while caring for patients who may be suspected of or are known to use the drug or its analogs. Employers covered by the Health Care and Residential Facilities regulation must ensure these guidelines and trainings are developed in consultation with the Joint Health and Safety Committee. Health care workers should avoid unnecessary handling of illicit drugs. If workers encounter such substances they should conduct a situational risk assessment (see below), follow safe work practices accordingly, and advise security and/or law enforcement.

### SITUATIONAL RISK ASSESSMENTS:

A situational risk assessment should be done to assess the risk of fentanyl exposure to health and community care workers. This risk assessment evaluates:

1. **The quantity and form of the opioid:** Is it in pill form or a large quantity of loose powder?
2. **The type of packaging:** Is it in a sealed baggie or loose powder on the individual's clothing?
3. **The potential for exposure:** Is there a chance of accidental inhalation or prolonged contact with bare skin (which may lead to accidental contamination of mucous membranes from direct contact)?

Based on the predicted risks, the following precautions or actions can be taken (see table to the right):<sup>6</sup>

Risk Level	Example Situations	Precaution/Action
Minimal	It is suspected that fentanyl may be present but no fentanyl products are visible	<ul style="list-style-type: none"> <li>Follow organization's standard operating procedures</li> <li>Continuously conduct situation risk assessments to determine further precautions and actions to take</li> </ul>
	Small amounts of drugs in pill form are present on an overdosed patient	<ul style="list-style-type: none"> <li>Prevent skin and eye contact by donning proper PPE (see requirements below)</li> <li>Do not handle pills - advise security and law enforcement</li> <li>If you must handle the pills, always wear double nitrile gloves</li> </ul>
	Minimal quantities of white powder drug is present on an overdosed patient	<ul style="list-style-type: none"> <li>If you encounter any powder - assume it is fentanyl or carfentanil</li> <li>If it is contained in an open baggy, do not attempt to seal the baggy by releasing the air in it as it will become airborne</li> <li>Donn proper PPE immediately (see requirements below)</li> <li>Where there is any signs of powdered carfentanil, exit the site immediately</li> <li>Advise security and law enforcement to attend the scene to assess the situation</li> </ul>
Moderate	Large quantities of white powder present in the environment	<ul style="list-style-type: none"> <li>Health and community care workers should not encounter these situations unless entering a private dwelling where drugs are being sold or produced. If this level of contamination were present, immediately exit the site and advise security and law enforcement.</li> </ul>
High		

## PERSONAL PROTECTIVE EQUIPMENT:

Although experience so far has indicated health and community care workers are at a low risk for exposure<sup>7</sup>, in situations where there is a risk of exposure to fentanyl and its analogs, the precautionary principle should be applied. This principle is an approach used when there is scientific uncertainty regarding the severity of the harm a hazard may cause. In these situations, the highest reasonable level of precautionary measures should be taken. It is recommended that health and community care workers conduct a situational risk assessment and wear the appropriate level of PPE, as required by the employer and established in consultation with the Joint Health and Safety Committee.

Standard personal protective equipment should be worn by health and community care workers who are working with patients suspected or known to have fentanyl or carfentanil. This may include gowns, aprons, eye protection, booties and (double) nitrile gloves based on the situational risk assessment conducted (including the form and quantity of the drug). As a minimum, fit-tested N95 respirators should be worn if there is a risk of respiratory exposure to the drug. The US Centers for Disease Control (CDC)<sup>8</sup> and FentanylSafety.com<sup>9</sup> can be used as references for examples of additional PPE currently being recommended for law enforcement and emergency medical service (EMS) workers.

## NALOXONE:

Naloxone is a safe and effective medication used to temporarily block the effects of fentanyl and other opioids. Due to the high potency of fentanyl and its analogs, multiple doses of naloxone may be needed to treat a fentanyl overdose.<sup>1</sup> Naloxone only temporarily blocks the effects of respiratory depression caused by opioids (for 30-90 minutes) so medical attention is still required following its administration. Health and community care workers should also be advised that they may encounter violence and/or aggression from patients experiencing withdrawal symptoms following the intake of Naloxone. Employers also have a legislated responsibility to ensure their workers are protected from workplace violence.

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## WHERE CAN I FIND MORE INFORMATION?

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- Health Canada's Action on Opioid Misuse: <http://healthycanadians.gc.ca/healthy-living-vie-saine/substance-abuse-toxicomanie/misuse-plan-abus-index-eng.php>
- Get Naloxone Kits for Free: <https://www.ontario.ca/page/get-naloxone-kits-free>
- BCCDC Decision Support Tool Administration of Naloxone: [www.bccdc.ca/resource-gallery/Documents/.../Epid/.../NaloxoneDSTUseforRN.pdf](http://www.bccdc.ca/resource-gallery/Documents/.../Epid/.../NaloxoneDSTUseforRN.pdf)
- Canadian Centre on Substance Abuse Drug Alerts and Bulletins: <http://www.ccsa.ca/eng/collaboration/ccendu/ccendu-drug-alerts-and-bulletins/pages/default.aspx>
- Safety Data Sheets (example): [http://www.restek.com/documentation/msds/34082\\_useng.pdf](http://www.restek.com/documentation/msds/34082_useng.pdf)
- Fentanyl Safety for First Responders: <https://www.fentanylsafety.com/>
- National Institute for Occupational Safety and Health (NIOSH). Fentanyl: Preventing Occupational Exposure to Emergency Responders: <https://www.cdc.gov/niosh/topics/fentanyl/risk.html>

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<sup>1</sup> National Institute for Occupational Safety and Health (NIOSH). (2016). Fentanyl: Preventing Occupational Exposure to Emergency Responders. Retrieved from <https://www.cdc.gov/niosh/topics/fentanyl/default.html>

<sup>2</sup> National Institute for Health (NIH). (n.d.), Carfentanil. Retrieved from <https://pubchem.ncbi.nlm.nih.gov/compound/carfentanil#section=Top>

<sup>3</sup> Government of Saskatchewan (2016). Fentanyl: Advisory for Saskatchewan Health Care Providers. Retrieved from [www.publications.gov.sk.ca/redirect.cfm?p=85693&i=99217](http://www.publications.gov.sk.ca/redirect.cfm?p=85693&i=99217)

<sup>4</sup> RCMP. (2017). What is fentanyl? Retrieved from <http://www.rcmp-grc.gc.ca/en/what-is-fentanyl>

<sup>5</sup> Government of Ontario. (2017). Get naloxone kits for free. Retrieved from <https://www.ontario.ca/page/get-naloxone-kits-free>

<sup>6</sup> Alberta Health Services. (2017). Emergency medical services Opioid Misuse-Interim Guidance for First Responders. Retrieved from [https://www.fentanylsafety.com/wp-content/uploads/OPIOID-MISUSE-INTERIM-GUIDANCE\\_2.pdf](https://www.fentanylsafety.com/wp-content/uploads/OPIOID-MISUSE-INTERIM-GUIDANCE_2.pdf)

<sup>7</sup> British Columbia Ministry of Health. (2017). Guidance statement regarding Personal Protective Equipment for Emergency Medical Services and Health Care Workers dealing with overdose victims.

<sup>8</sup> US Centers for Disease Control <https://www.cdc.gov/>

<sup>9</sup> Fentanyl Safety. (n.d.). Job-Specific Fentanyl Safety for First Responders - Paramedics. Retrieved from <https://www.fentanylsafety.com/job-specific/>