This protocol is for trained CIP Paramedics only. If during assessment, procedure, or treatment the patient is found to have a medical emergency in need of hospital treatment, the CIP visit will be suspended, and local MCA protocols utilized.

Purpose: To provide additional guidelines beyond the CIP General Assessment and Care for evaluating, caring for and educating patients with Substance Use Disorder.

1. Follow CIP General Assessment and care protocol
2. Obtain additional vital signs, history, and diagnostics pertinent to condition and/or as ordered by physician which may include:
	1. Vitals/examinations:
		1. Site infections/wounds
		2. COWs assessment/score
		3. CIWA assessment/score
		4. Signs of substance intoxication
		5. Oral health
		6. Hygiene
	2. History:
		1. Evaluate risks for concurrent polysubstance use
		2. Use history for prescribed medications and illicit substances
		3. Intervention history
		4. Immunization status
3. On scene medication administration may include:
	1. Use of approved MCA protocols and medications up to the extent of standard paramedic treatment according to protocol.
4. On scene interventions may include:
	1. [x]  Vaccinations see CIP Vaccination protocol (optional)
	2. [x]  Wound Care see CIP Wound Care protocol (optional)
	3. [x]  Naloxone Leave Behind see CIP Naloxone Leave Behind protocol (optional)
	4. [ ]  Medication Assisted Therapy (MAT) for Opioid Use Disorder see CIP Medication Assisted Therapy protocol (optional)
	5. Intervention resource referrals
5. Consider transport to the emergency department for the following:
	1. COWS score >36
	2. CIWA score greater than or equal to 9
6. On-scene education and suggested support sources may include:
	1. Harm reduction/safer use education
	2. Syringe Service Program (SSP) opportunities
	3. Risks of self-medicating
	4. Withdrawal risks
	5. Local resources



