



Opioid Overdose and Naloxone Education Training



National Fentanyl Awareness Day

May 7, 2024 6:00pm

Please join the Fairfax Prevention Coalition on May 7, 2024 at 6pm EST for a virtual Opioid Overdose and Naloxone Education Training. This training is open to the community and strongly suggested for all community members. Educate yourself on illicit fentanyl overdoses and be apart of the solution!

Register at:

<https://events.gcc.teams.microsoft.com/event/fc9a3505-983f-4116-b7ee-1d035cc98c37@a26156cb-5d6f-4172-9d7d-934eb0a7b275>

What is an opioid?

- Opioids can be prescription medications like oxycodone, hydrocodone, codeine, morphine, and fentanyl which is used to treat pain. Heroin is another opiate that is derived from morphine.
- Fentanyl is an opioid that is 50 to 100 times stronger than morphine. Nonmedical fentanyl has rapidly contributed to drug overdoses.
- Synthetic pills, or fake pills are made to look like prescription opioids such as OxyContin, Percocet or tranquilizers like Xanax, or stimulants like Adderall.
- Opioids can be mixed/cut into any substance. Any pill or drug purchased on the street has the potential to contain opioids.

What does an opioid overdose look like?

- Unresponsive or unconscious
- Gurgling or snoring sounds, often referred to as a death rattle.
- Breathing will be shallow, slow or stop
- Pinpoint pupils
- Skin feels cold and clammy
- Fingernails and lips are blue or pale for lighter skin. For darker skin, gray or ashen.



Please visit www.fairfaxcounty.gov and search “revive” additional upcoming training dates and more information. Free Naloxone provided with each training.

You can call or email: CSBRevive@fairfaxcounty.gov or 703-449-6313.

[Fairfax Prevention Coalition - Working toward a healthy and safe community free of substance](#)



Fairfax County is committed to nondiscrimination on the basis of disability in all county programs, services and activities. Reasonable accommodations will be provided upon request.
For information, call 703-324-7000, TTY 711.

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