Kittitas County Prehospital EMS Protocols

SUBJECT: POISONING AND OVERDOSE

General

- A. Establish and maintain airway.
- B. If patient alert, transport.
- C. Unconscious or depressed LOC:
 - 1. If stable, administer $O_2 @ 4-6$ lpm per nasal cannula.
 - 2. If unstable, administer O₂ @ 12-15 lpm per non-rebreather mask.
- D. History to include: search for evidence of toxins (pill bottles, drug paraphernalia, etc.), and bring to emergency department.
- E. Contact Poison Control or Emergency Department for advice.
- F. Establish cardiac monitor if indicated.
- G. Consider endotracheal intubation if appropriate.
- H. If prolonged transport (> 20 minutes), administer **activated charcoal** per manufacturers instructions, PO.
- I. Establish peripheral IV access with Isotonic Crystalloid @ TKO.
- J. Types of overdoses & treatments:
 - <u>Calcium Channel Blocker:</u> Calcium Chloride 500 mg IV/IO may repeat @ 3-5 minutes to max dose of 1g total.
 - Organophosphate Poisoning: Atropine 2-5 mg IV/IOBeta Blocker
 - <u>Beta Blocker:</u> Glucagon 3-10 units (mg) IV/IO slow IV push over 1 minute. May be followed by infusion of 2-5 units/hour.
 - Tryicyclic Anti Depressant: Sodium Bicarbonate 1 mEq/kg IV/IO
 - Opioid: Narcan 0.4-2 mg IV, IO, IM, IN

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