

# 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<sub>2</sub> @ 4-6 lpm per nasal cannula.
  2. If unstable, administer O<sub>2</sub> @ 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 manufacturer's instructions, PO.
- I. Establish peripheral IV access with Isotonic Crystalloid @ TKO.
- J. Types of overdoses & treatments:
  - Calcium Channel Blocker: **Calcium Chloride** 500 mg IV/IO may repeat @ 3-5 minutes to max dose of 1g total.
    - **Pediatric dose:** 20 mg/kg up to total 500 mg per dose.
  - Organophosphate Poisoning: **Atropine** 2-5 mg IV/IO
    - **Pediatric dose:** 0.05 mg/kg
  - Beta Blocker: **Glucagon** 3-10 units (mg) IV/IO slow IV push over 1 minute. May be followed by infusion of 2-5 units/hour.
  - Tricyclic Anti-Depressant: **Sodium Bicarbonate** 1 mEq/kg IV/IO
  - Opioid: **Narcan** 0.4-2 mg IV, IO, IM, IN
    - **Pediatric dose:** 0.005 mg/kg up to 2 mg total initial dose, maximum total dose 10 mg.