



POISONING AND OVERDOSE

Effective: January 1, 2024
Replaces: January 1, 2021

1. BLS Treatment

- 1.1. Routine Medical Care – Adult (700-S04)
- 1.2. Secure patient's airway as appropriate (700-M01)
 - 1.2.1. **Oxygen** – titrate as appropriate
- 1.3. **Blood Glucose Level** (BGL)
- 1.4. Determine the substance and/or dosage of the overdose
- 1.5. If Narcotics or Opioids are suspected:
 - 1.5.1. **Naloxone Intranasal Autoinjector** (EMT-B only), may repeat once (max of two doses total)
 - 1.5.2. If ALS is on scene, Naloxone should be given IV or IM by ALS provider
 - 1.5.2.1. Methadone, Darvon and Darvocet may require repeated doses

2. ALS Treatment

- 2.1. **Vascular Access (IV)**, TKO
- 2.2. **Vascular Access (IO)**, if patient is unconscious
- 2.3. **Consider 12-lead ECG**

3. General Ingestion of a Poison

- 3.1. **Activated Charcoal 1 g/kg PO**, if time of ingestion is less than 1-hour, max dose 50 gm
- 3.2. Charcoal is contraindicated if patient lacks gag reflex and cannot self-administer, or has ingested substance(s) not bound by charcoal, such as: caustics, lithium, metals, ethylene glycol, iron, methanol, other alcohols, or hydrocarbons

4. Narcotics/ Opioids

- 4.1. **Naloxone 1-2 mg IV** (titrate to effect in 0.4mg increments, repeat as needed)
- 4.2. **Naloxone 1-2 mg IM** (repeat as needed)

5. Tri-Cyclic Anti-Depressants

- 5.1. **Sodium Bicarbonate 1 mEq/kg IVP**, max dose of 100 mEq, for hypotension (SBP 90mmHg or less), seizure, and/or a QRS widening greater than 0.10 seconds
- 5.2. If hypotension and seizures persist, or if the QRS becomes greater than 0.12 seconds, administer additional **Sodium Bicarbonate 0.5m Eq/kg IVP**, max dose of 50 mEq

6. Organophosphates/ Cholinergics/ Pesticides

- 6.1. **Atropine 2 mg IVP**, repeat every 5 minutes until asymptomatic, multi-dose vial should be used, if available
- 6.2. If symptoms persist after all interventions, administer:
 - 6.2.1. **Antidote Treatment Nerve Agent Autoinjector** (ATNAA) IM in lateral thigh

7. Dystonic Reactions

- 7.1. Administer **Diphenhydramine 50 mg IV / IM** for dystonic reactions



8. Calcium Channel Blockers – (Diltiazem, Verapamil, Nifedipine)

- 8.1. **Glucagon 1 mg IM** for hypotension (SBP 90mmHg or less)
- 8.2. **Calcium Chloride 10% 20-30 mg/kg IV (max dose 1 gm)**, give over several minutes for persistent hypotension or symptomatic bradycardia
- 8.3. Calcium chloride is contraindicated if the patient is currently taking Digoxin

9. Beta Blockers – (Atenolol, Metoprolol, Nadolol)

- 9.1. **Glucagon 1mg IM** for SBP 90mmHg or less
- 9.2. Treat symptomatic bradycardia as necessary with additional **Glucagon 1 mg IM**