

M040 OVERDOSE AND ACUTE POISONING

EMT	AEMT
EMT-I	Paramedic

PPE and decontaminate when appropriate

- Obtain specific information:**
- Type of ingestion (s)
 - What, when and how much ingested
 - Bring the poison, container, all medication and other questionable substances to the ED (if safe to transport).
 - Note actions taken by bystanders or patient (e.g. induced emesis, "antidotes", etc)
 - Supportive Care is key to overdose management.**

ABC's
IV, oxygen, monitor

Need for airway management?

YES

- Naloxone
- Airway adjuncts and BVM Ventilations as needed

See Airway Management Protocol

NO

Hypotension for age?

YES

IV fluid Bolus per Medical Shock protocol

NO

Altered Mental Status?

YES

Universal altered mental status protocol

- Check BGL
- Consider specific ingestions

NO

Specific ingestion?

<p>Stimulant</p> <p><i>Tachycardia, HTN, agitation, sweating, psychosis</i></p>	<p>Tricyclic antidepressant</p> <p><i>Wide Complex tachycardia, seizure</i></p>	<p>Organophosphate or nerve agent</p> <p><i>DUMBELS or SLUDGE</i></p>	<p>Calcium Channel Blocker</p> <p><i>Bradycardia, Heart block, Hypotension</i></p>	<p>β-Blocker</p> <p><i>Bradycardia, Heart Block, Hypotension</i></p>
<p>Agitated combative patient protocol</p> <p>Benzo for severe symptoms</p>	<p>See Seizure Protocol</p> <p>If intubated, consider hypervent to ETCO 25-30</p>	<p>Supportive Care</p> <p>Atropine</p> <p>(EMT-I requires VO)</p>	<p>20 ml/Kg Bolus</p> <p>Glucagon</p> <p>Calcium and Vasopressor Infusion</p>	<p>20 ml/Kg Bolus</p> <p>Vasopressor Infusion</p> <p>Glucagon (EMT-I requires VO)</p>