M015 ALCOHOL/DRUG INTOXICATION

EMT	AEMT	EMT-I	Paramedic

Clinical intoxication

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Determine LOC and assess ABCs

- Obtain vital signs
- Perform head to toe exam
- Determine medical history, medications
- Check BGL unless mild symptoms. Check BGL if considering release

Always consider alternative diagnoses:

See Universal Altered Mental Status Protocol

↓ **NO**

BGL <60 mg/dL or clinical condition suggests hypoglycemia?

YES → Hypoglycemia protocol

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Does patient have evidence of **incapacitating intoxication?**

YES → Transport to ED

NO ↓

Does patient have signs of **acute illness or injury?**

YES → Transport to ED

NO ↓

These findings suggest lower level of intoxication that is low risk. These may decline treatment and/or transport and be released to LE or to a sober friend or family member.

Bystander Administered Naloxone:
Refer to Naloxone protocol regarding bystander administered Narcan and patient refusal.

DEFINITIONS:

Intoxicated patient with any of the following must be transported to ED:

Incapacitation Intoxication

- Inability to maintain airway
- Inability to stand from seated position and walk with minimal assistance
- Disoriented
- Speech is not understandable
- At immediate risk of environmental exposure or trauma due to unsafe location

Acute Illness or injury

- Abnormal vital signs
- Physical complaints that might indicate underlying medical emergency (e.g. chest pain)
- Seizure or hypoglycemia
- Signs of trauma or history of acute trauma
- Signs of head injury, e.g. bruising, lacerations, abrasions
- Speech that is not understandable or abnormal aside from slight slurring
- Evidence of other substance abuse