# **Monterey County EMS System Policy**



Protocol Number: E-5 Effective Date: 5/23/2023 Review Date: 6/30/2027

# **OVERDOSE AND POISONING**

# **BLS CARE**

**Routine Medical Care** 

Identify and locate the substance. Protect self and consider contacting California Poison Control at (800) 222-1222.

Prevent additional contact with the substance, as warranted. Prevent further access to the substance by the patient.

Do not induce vomiting. Give nothing by mouth.

**Substance-Specific Treatment** (in addition to Routine Medical Care):

#### Suspected Opioid Overdose

**Naloxone, up to 4 mg intra-nasal (IN),** if respirations are less than 10/minute. Assess for improved respiratory rate and quality. May repeat one time if respirations remain less than 10/minute.

### ALS CARE

**Routine Medical Care** 

**Substance-Specific Treatment** (in addition to Routine Medical Care):

### Suspected Opioid Overdose

**Naloxone, up to 2 mg IV/IM/IN/IO,** if respirations are less than 10/minute. Titrate to improved respiratory rate and quality. May repeat up to 8 mg if respirations remain less than 10/minute.

May be administered **IM** by an EMT working under the supervision of a paramedic.

Naloxone 4 mg IN if using a single-dose IN device.

<u>Medication for Addiction Treatment (MAT)</u> \*\* Requires a physician order through medical control. \*\* (877)4 EMS BUP or (877)436-7287) See EMS System Policy #4520: MAT – EMS-Buprenorphine (Opioid Withdrawal) Flowchart. Provider agencies must have approval from the EMS Agency in order to participate in this Local Optional Scope of Practice (LOSOP) item.

**Buprenorphine 16 mg SL** may be administered to patients with symptoms of opioid withdrawal or for patients who have been successfully resuscitated with naloxone following a near-fatal opioid overdose. If symptoms worsen or persist, **may repeat 8 mg SL** (for a total maximum dosage of 24 mg SL).\_

See EMS System Policy #4520 for inclusion and exclusion criteria and further details.

# Ingestion of Non-Petroleum Based Substance or Non-Caustic Substance

Activated Charcoal 1 gm/kg PO should be considered if the time of ingestion was less than one  $(\leq 1)$  hour prior to EMS arrival and if the patient is alert and able to safely swallow liquid.

### Organophosphate Poisoning

Atropine 2 mg IV/IO. May repeat every 5 minutes while symptomatic.

# Cyclic Anti-Depressant Overdose

**Sodium Bicarbonate 1 mEq/kg IV/IO.** Use for widened QRS (> 100 msec), hypotension, tachycardia, or heart block.

Seizures are usually brief and self-limited. ACTIVE seizures may be treated with **midazolam** 0.1 mg/kg IV (not to exceed 5 mg) or 0.2 mg/kg IM/IN (not to exceed 10 mg).

# Dystonic Reaction

Diphenhydramine 25 or 50 mg IV/IM.

# **Beta Blocker Overdose** (with symptomatic bradycardia or hypotension)

Glucagon 3 mg IV/IM/IO. (First-line treatment.)

**Calcium Chloride 1 gram slow IV/IO** (over 5 minutes). May repeat once in 10 minutes if patient remains hypotensive.

Atropine 1 mg IV/IO. May repeat once in five minutes if no improvement in heart rate.

### Calcium Channel Blocker Overdose (with symptomatic bradycardia or hypotension)

**Calcium Chloride 1 gram slow IV/IO** (over 5 minutes). May repeat every 10 minutes while symptomatic.

### Glucagon 3 mg IV/IM/IO.

Atropine 1 mg IV/IO. May repeat once in five minutes if no improvement in heart rate.

# CHEMPACK Deployment.

### Nerve Agent Poisoning

Atropine (auto-injector or injectable)

• Atropine 2 mg IM auto-injector. May repeat every 5 minutes until symptoms relieved. OR

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Atropine 2 mg IV/IO. May repeat every 5 minutes while symptomatic.

### 2-PAM (Pralidoxime) IM auto-injector.

Administer 1 auto-injector IM for mild symptoms such as mild shortness of breath, or for moderate symptoms such as sweating, twitching, and weakness.

Administer 3 auto-injectors IM for severe symptoms such as seizures, apnea, or copious secretions.

**Diazepam** (auto-injector or injectable)

• **Diazepam 5 mg IM auto-injector**. Administer 1 auto-injector IM for seizures or severe muscle twitching. May repeat every 5 minutes for seizures and every 10 minutes for muscle twitching until symptoms resolve.

OR

• **Diazepam 5 mg IV/IM/IO** titrated to effect for seizures. May repeat every 10 minutes for continued seizures. Maximum total dose is 30mg.