	<b>COUNTY OF SACRAMENTO</b> EMERGENCY MEDICAL SERVICES AGENCY	<b>Document #</b>	<b>8018.20</b>
	<b>PROGRAM DOCUMENT:</b>  <b>Overdose and/or Poison Ingestion</b>	<b>Initial Date:</b>	<b>10/26/94</b>
		<b>Last Approval Date:</b>	<b>11/01/16</b>
		<b>Effective Date:</b>	<b>11/01/18</b>
		<b>Next Review Date:</b>	<b>05/01/20</b>

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 EMS Medical Director

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 EMS Administrator

**Purpose:**

To serve as treatment standard for Sacramento County Emergency Medical Technicians and Paramedics in treating overdose and/or poison ingestion patients.

**Authority:**

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

**Protocol:**

- A. Make every effort to identify the substance and time of ingestion.
- B. Bring a sample in the original container to the ED whenever possible.
- C. For suspected overdose with insulin or oral hypoglycemic agents or for suspected narcotic overdose with any opiate, refer to Decreased Sensorium Policy PD# 8061.
- D. For suspected overdose of an Organophosphate or Carbamate pesticide, refer to Hazardous Materials Policy, PD# 8029.

**Protocol:**

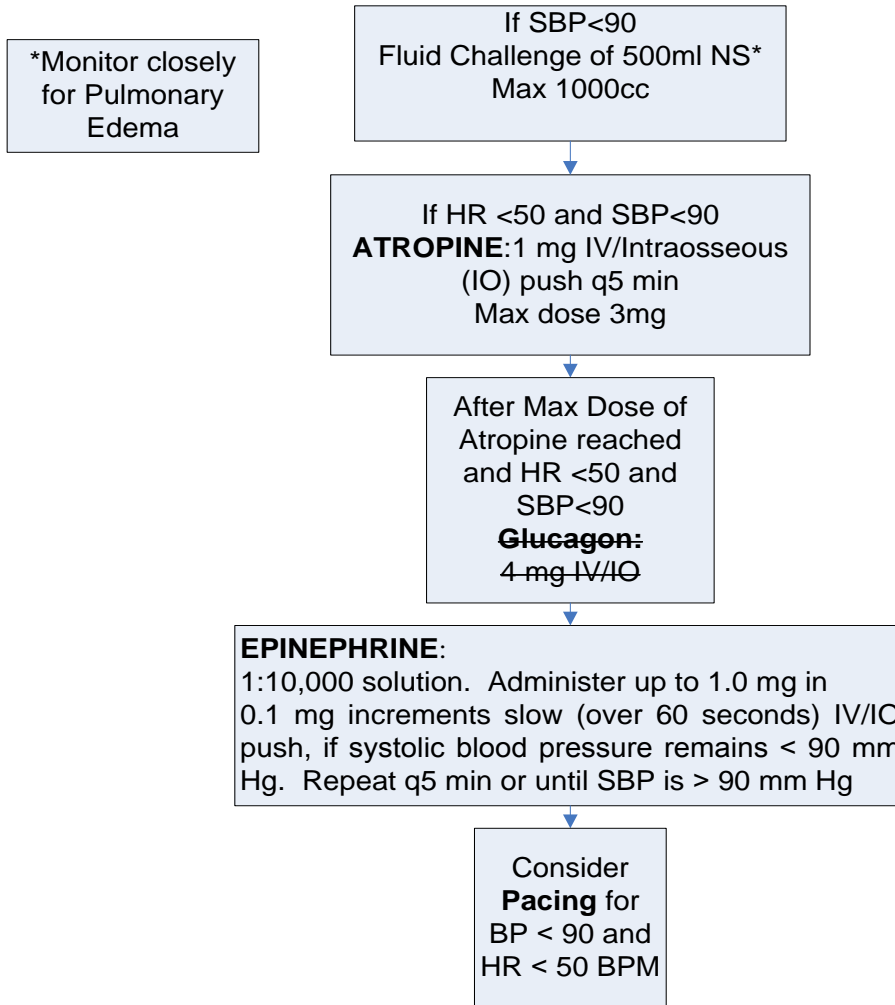
**BLS TREATMENT**

**Supplemental O2** as necessary to maintain SpO2 ≥ 94%. Use lowest concentration and flow rate of O2 as possible.  
**Airway adjuncts** as needed.  
 Refer to Decreased Sensorium Policy PD#8061 BLS Treatment if non-responsive, cannot swallow, no gag reflex, or is unable to protect their airway.  
**Initiate Transport** as soon as possible.

**ALS TREATMENT**

**Initiate Intravenous (IV) access** with a saline lock.  
**Cardiac Monitoring and SPO2.**  
 Refer to Decreased Sensorium Policy PD#8061 if non-responsive, cannot swallow, no gag reflex, or is unable to protect their airway.  
**Initiate Transport** as soon as possible.

**Beta Blockers**



**Tricyclic and Related Compounds**

Fluid Challenge of 1000ml NS\* for SBP < 90

\*Monitor closely for Pulmonary Edema

**SODIUM BICARBONATE:**

1 mEq/Kg slow IV push if any of the following signs of cardiac toxicity are present:

- A. Heart rate > 120 bpm.
- B. SBP < 90 mm Hg.
- C. QRS complex > 0.12 seconds
- D. Seizures.
- E. Premature Ventricular Contractions > 6 per/minute.

**Calcium Channel Blocker**

Fluid Challenge of 1000ml NS\* for SBP < 90

\*Monitor closely for Pulmonary Edema

If HR < 50 and SBP < 90  
**ATROPINE:** 1 mg IV/Intraosseous (IO) push q5 min  
Max dose 3mg

**EPINEPHRINE:**

1:10,000 solution. Administer up to 1.0 mg in 0.1 mg increments slow (over 60 seconds) IV/IO push, if systolic blood pressure remains < 90 mm Hg. Repeat q5 min or until SBP is > 90 mm Hg

Cross Reference:

Transcutaneous Cardiac Pacing PD# 8810  
Decreased Sensorium PD# 8061  
Hazardous Materials PD# 8029