NOR-CAL EMS	05-0409	Poisoning / Exposures
Nor-Cal EMS Policy & Procedure Manual		BLS/ALS Protocols
Effective Date: 12/07/2018		Next Revision: 12/07/2020
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Authority - Health and Safety Code Division 2.5, California Code of Regulations, Title 22, Division 9

Assess ABC's
History and Physical exam
Determine type of agent involved and time of exposure/ingestion
Vital Signs (including Blood Glucose if able)
Oxygen: Titrate to SPo2 to 94%

If BG is less than 65 treat as appropriate and see ALOC protocol

ALS

Establish IV/IO
ECG

Seizure
see seizure protocol

Organophosphate / Carbamate poisoning
Atropine 0.05 mg/kg IV/IO/IM PRN
Goal to reduce s/s (No max dose)

Dystonic Reaction
Diphenhydramine 1mg/kg IV/IM not IO max 50mg

Tricyclics:
Symptoms- Wide QRS/Ventricular arrythmia or hypotension not responsive to fluid bolus.
Seizure unresponsive to Benzodiazepines.

Sodium bicarbonate 1 meq/kg slow IV push
If remains hypotensive
Push dose epinephrine 5-10mcg every 1-5 minutes

Beta blockers:
Consider activated charcoal
Symptomatic Hypotension:
Fluid bolus
Consider Atropine 1mg IV/IO
Glucagon 1mg IV/IO
Pacing as appropriate
If remains hypotensive
Push dose epinephrine 5-10mcg every 1-5 minutes

Calcium Channel blockers:
Consider activated charcoal
Symptomatic Hypotension:
Fluid bolus
Calcium Chloride 20mg/kg very slow IV over 10 minutes or until Systolic BP is over 70
If remains hypotensive
Push dose epinephrine 5-10mcg every 1-5 minutes

Exposure/Decontamination:
Remove clothing
Brush off powders
Wash off liquids with copious amounts of water
IF SAFE- transport container/label and/or a sample of the agent

Activated Charcoal
Ingestion less than 1 hours
Greater than 30 min transport time
Patient alert and able to swallow

Dose 1gm/kg orally (max 50gm)
Contraindications
Organophosphates, hydrocarbons, corrosives, acids and alkali products