


| | | | |
|---|---|---------------------|----------|
|  | COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY | Document # | 8018.23 |
| | <u>PROGRAM DOCUMENT:</u> Overdose and/or Poison Ingestion | Initial Date: | 10/26/94 |
| | | Last Approval Date: | 06/13/24 |
| | | Effective Date: | 05/01/23 |
| | | Next Review Date: | 06/01/26 |

 Signature on File
 EMS Medical Director

 Signature on File
 EMS Administrator

Purpose:

To establish the treatment standard for overdose and/or poison ingestion patients.

Authority:

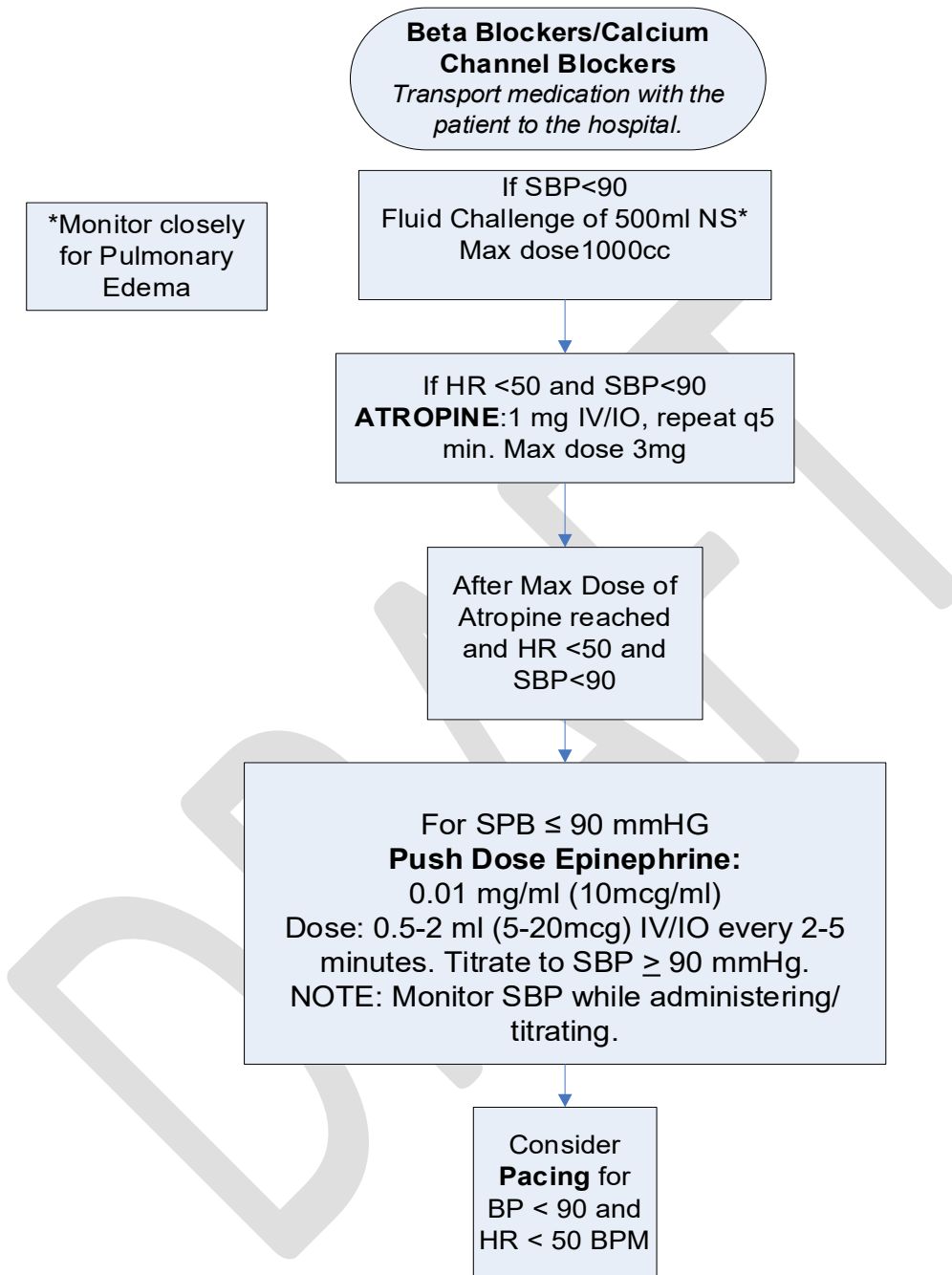
- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

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.
- D. For a suspected overdose of an Organophosphate or Carbamate pesticide, refer to PD# 8029 – Hazardous Materials

Protocol:

| BLS |
|---|
| <ol style="list-style-type: none"> 1. Supplemental O₂ as necessary to maintain SPO₂ ≥ 94%. Use lowest concentration and flow rate of O₂ as possible. Airway adjuncts as needed. 2. Initiate transport as soon as possible. |
| ALS |
| <ol style="list-style-type: none"> 1. Establish vascular access. 2. Cardiac Monitoring and SPO₂. 3. Initiate transport as soon as possible. |



Tricyclic and Related Compounds

*Monitor closely
for Pulmonary
Edema

Fluid
Challenge of
1000ml NS*
for
SBP < 90

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.

DRAFT

Cross Reference: PD# 8029 – Hazardous Materials
PD# 8810 – Transcutaneous Cardiac Pacing