

	<b>Department Name Address</b>	<b>BLS</b>	<b>EMT</b>
		<b>Revision #</b>	
		<b>Implementation Date</b>	
<b>Protocol</b>	<b>4.2.25 Poisoning or Overdose - Pediatric</b>	<b>Last Reviewed/Update Date</b>	
<b>Author / Owner</b>		<b>Medical Director</b>	

This protocol will address common poisoning or overdose treatments. If you are unsure of the overdose or exposure, treat the symptoms as they present. If you are unable to rule out trauma, follow the Baseline Trauma Care Standards. Rapid assessment and support of airway, ventilation, oxygenation, and circulation are paramount in toxicological emergencies. Physical signs such as pupil size and response to light, skin color and temperature, seizure activity and heart rate may have a particular value and diagnostic significance to the patient with a toxic exposure.

1. Baseline Care Standards.
2. Maintain airway per Airway Management protocol.
3. Monitor O<sub>2</sub> saturations.
4. Try to find the source of the poisoning or overdose; ask patient, bystanders, search for pill bottles, etc.
5. Call poison control **1-800-222-1222**.
6. If the patient is cooperative, maintaining an airway, and not mentally altered administer:
  - *Activated Charcoal 1 gm/kg PO.*
7. Perform blood glucose test. If glucose is <60 mg/dl, go to Diabetic Emergencies protocol.
8. If patient is seizing, go to Seizure protocol.
9. If combative, restrain patient per protocol.
10. Call for ALS intercept.
11. Transport.

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*Medical Director's Signature*

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*Date*

Disclaimer:

The protocols have been developed by the North Dakota Department of Health are meant to be used as general guidance for developing protocols for individual emergency medical services agencies. These sample protocols are not meant to be medical or legal advice; nor do they establish standards of care. Each emergency medical services agency must tailor protocols based on their specific needs or capabilities. Local medical directors must be consulted with and approve any protocol(s) prior to becoming operational in an emergency medical services agency. directors must be consulted with and approve any protocol(s) prior to becoming operational in an emergency medical services agency. The North Dakota Department of Health make no representation on the accuracy of information contained herein and accepts no liability for any loss or damage arising from any content error or omission