NORTH COAST EMERGENCY SERVICES

POLICIES AND PROCEDURES

Subject: Poisoning/Overdose Treatment Policy

I. Definition A. None.	
A. None. II. Basic Life Support	
Note: Public Safety First-Aid and First Responders require prior authorization from their agencies AND North	
Coast EMS to carry and administer intranasal Narcan.	
A. Provide General Medical Care.	
B. Consider contacting Poison Control: 1-800-222-1222 if transport is extended or delayed.	
C. Suspected narcotic overdose:	
1. In the presence of respiratory depression or arrest:	
a. Administer nasal spray Narcan 4 mg IN.	
III. Advance Adult	ed Life Support Pediatric (less than 14 years of age)
A. Cyclic antidepressants:1. In the presence of widened QRS	A. Cyclic antidepressants:1. In the presence of widened QRS
complex on EKG.	complex on EKG.
a. Administer Sodium	a. Administer Sodium Bicarbonate
Bicarbonate 50 mEq/dL IV.	1mEq/kg, IV or IO, may repeat
(1) May repeat once if widened	0.5mEq/kg, every 10 minutes.
QRS complex persists.	B. Narcotic overdose:
B. Narcotic overdose:	1. In the presence of respiratory
1. In the presence of respiratory	depression or arrest:
depression or arrest:	a. Pediatrics Greater than 20 kgs.
a. Administer Narcan titrated to	Administer Narcan 0.4 -2.0mg IV, IM,
achieve adequate respiratory	IO or IN. IN dose is 2mg/2cc
drive IV/IM/IN.	administered to each nostril or with
C. Phenothiazine/dystonic reaction:	preloaded Narcan IN device.
1. Administer Diphenhydramine 1 mg/kg	b. Neonates/Infants less than 20 kg:
IV/IM. Max dose 50 mg.	0.01mg/kg – 0.1mg/kg IV, IM or IO.
	C. Phenothiazine/dystonic reaction:
	1. Administer Diphenhydramine 1-
2mg/kg, IV, IM or IO slowly.	
IV. Special Considerations	
A. Narcan should only be administered in the presence of respiratory depression or arrest. Narcan is not indicated in the presence of decreased mentation alone.	
V. Base Orders	
A. None.	
VI. Contraindications	
A. None.	
VII. Cross Reference	
A. General Medical Care Policy No. Draft	
B.	