



**POTENTIAL TREATMENT**

- Contact direct medical oversight for specific information about individual toxic exposures and treatments.
- **DO NOT INDUCE VOMITING, ESPECIALLY IN CASES WHERE CAUSTIC SUBSTANCE INGESTION IS SUSPECTED.**
- Use of an opioid antagonist in the treatment of a suspected or known opioid overdose (with altered mental status and/or respiratory depression) as per EMS medical direction:
  - Weight ≤ 20 kg, administer Naloxone 0.1 mg/kg, IV/IO/SQ/IM/IN, or 0.2 mg/kg ET
  - Weight > 20kg, administer Naloxone 2.0mg /dose

**NOTE:** For intranasal administration, use a nasal atomizer and administer no more than 1 mL per nostril.

- Treatment for toxic exposures may be instituted as permitted by medical direction, including the following:
  - High-dose atropine for organophosphates
  - Sodium bicarbonate for tricyclic antidepressants
  - Glucagon for calcium channel blockers or beta-blockers
  - Diphenhydramine for dystonic reactions
  - Dextrose for insulin overdose

**POTENTIAL EXPOSURES**

- Burning overstuffed furniture = Cyanide
- Old burning buildings = Lead fumes and Carbon Monoxide
- Bismuth subsalicylate (e.g. Pepto-Bismol™)\* = Aspirin
- Pesticides = Organophosphates & Carbamates
- Topical benzocaine for dental/gum pain (e.g. Orajel™) = Methemoglobinemia
- Common Plants = Treat symptoms and bring plant/flowers to ED

**SMELLS**

- Almond = Cyanide
- Fruit = Alcohol
- Garlic = Arsenic, parathion, DMSO
- Mothballs = Camphor
- Natural gas = Carbon monoxide
- Rotten eggs = Hydrogen sulfide
- Silver polish = Cyanide
- Stove gas = Think CO (CO and methane are odorless)
- Wintergreen = Methyl salicylate