

**MEHLVILLE FIRE PROTECTION DISTRICT  
EMERGENCY MEDICAL SERVICES  
GUIDELINES FOR PREHOSPITAL EMERGENCY CARE**

**SUBJECT: 900.05 ORIGINAL ISSUE 5/08  
MEDICAL EMERGENCIES: LATEST REVISION 11/15  
OVERDOSE/POISONING**

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**Pre-Hospital Actions:**

1. Universal cardiac care with airway management as indicated.
2. Infuse Normal Saline to maintain a systolic blood pressure of 90-100 mmHg.
3. Obtain blood glucose determination.
4. If blood glucose level less than 60, treat the patient according to the hypoglycemia protocol.
5. Administer 0.4 mg. - 2.0 mg. Narcan/Naloxone subQ, IM, IV or per ET tube. May repeat as needed. Narcan/Naloxone may also be administered using the Mucosal Atomization Device (MAD). When using the MAD, 1mg should be sprayed into each nostril. The MAD device may be used as the primary delivery mechanism for Narcan/Naloxone, but additional doses should be given IV.
6. Contact Medical Direction and report as much information as possible regarding the ingestion. Bring pill bottles to the ER.
7. If possible and if agent ingested has been identified, contact Poison Control for specific antidote.
8. EMS crews may be asked to fill out an affidavit in the ER if the patient has made statements concerning suicidal or homicidal ideation. This should also be noted on the trip sheet.

**All patients thought to have overdosed should have an IV started and be placed on a cardiac monitor.**

**STANDARD PRECAUTIONS MUST BE OBSERVED.**