CARE OF THE SUBSTANCE OVERDOSE PATIENT

PURPOSE:

To provide guidelines that would assure that all considerations, treatments, documentation, and adequate time periods to evaluate the status and condition of a critically ill overdose patient are done.

PROTOCOL:

1. The ED provider or RN (if designated) will consult Poison Control for suspected ingestions and antidotes. The recommendations from Poison Control are to be documented in the patient’s record. Verification will be completed upon admission and implemented if not done in the ED.

2. In circumstances where the recommended treatment is not ordered or the ordered treatment is unable to be administered:
   - The nurse must document that the medical provider was notified.
   - The medical provider must document in the record his/her justification for not following the recommendations.

3. Treatments will be completed as follows:
   - Initiation/continuation of mechanical ventilation based on the patient’s mental status and need for airway protection.
   - Insertion of oral or nasal gastric tube as indicated
   - If charcoal recommended, administer immediately.
   - Initial workup to be obtained:
     - CMP
     - CBC
     - Ethanol level
     - Acetaminophen level
     - Salicylate level
     - EKG
     - Urine Hcg (for women of childbearing age)
     - Urine toxicology screen (as deemed necessary)
     - Other tests as warranted by patient condition or substance ingested
   - Test for other specific drugs as recommended by Poison Control.
   - Repeat lab tests per MD order/ Poison Control recommendations or if patient’s condition warrants.
   - If the patient is admitted to the hospital then provider must follow the computerized overdose order set. This will be initiated by the Emergency Room Provider and completed by the Attending Physician.
     - During computer downtimes the paper form of the Checklist for Overdose Patients will be utilized (form #13343)
• If admitted to the ICU or PCU. The Attending Physician will contact Pharmacy for a consult within 24 hours of admission.
  o Pharmacist must document the consult in the patient’s medical record.
  o Pharmacist consult to include the side effects of known/suspected drugs ingested, and estimated half lives of each drug.

• Consider the need for a consultation by Psychiatry based on patient condition and circumstances of the overdose prior to discharge.
• Neurologist consult to be obtained if medically indicated

Reference Links:

CHECKLIST FOR OVERDOSE PATIENTS

BRAIN (NEUROLOGIC) DEATH DETERMINATION
### Document Control Tracking File

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<thead>
<tr>
<th>Title: Care of Substance Overdose Patient</th>
<th>Forms #: 13343</th>
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<td>Document Owner: Director for Critical Care</td>
<td>Department:</td>
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**Reviewed by the following:**
- **Medical Director of Critical Care - Herbert Lehman, M.D.** Date: 5/11 4/13
- **Director of Emergency Services - Sarah Tubbert** Date: 5/11 4/13
- **Pharmacy Karen Whalen** Date: 6/11 4/13
- **Director for Quality Resources – Dorothy Haag** Date: 8/12 11/12 4/13
- **Director for Critical Care – Diana Farneti** Date: 4/13
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- **Clinical Reviewer – Stacey McDonald** Date: 4/13
- **Dr. Norma Cooney** Date: 4/13

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**Additional Approvals:**

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**Revisions:**
- 8/12 Deleted references to policies - *Determination of Death by Neurologic Criteria & Identifying, Procuring & Utilizing Deseased Donor Organs*
- 11/12 Title changed from *Care of the Comatose Patient with Poly-Pharmacy Overdose* to present; policy rewritten

4/13 The Overdose Policy and Checklist has been revised to encompass all overdose patients rather than just polypharmacy overdoses. The guidelines for treatments and utilization of resources has also been updated to comply with Poison Control recommendations. The Overdose Checklist has been updated to guide patient care in compliance with the revised policy as indicated. The form was changed to reflect computer downtime. #3: If the patient is admitted to the hospital then provider must follow the computerized overdose order set.

**List References:**

- R = Research
- L = Literature
- N = National Guidelines
- E = Expert Opinion

**Original Date:** 2/11

**Reviewed/Revision Dates:** 3/11 4/11 8/12 11/12 4/13