

OVERDOSE/ALCOHOL ABUSE

NOTE: Never assume drug/alcohol abuse occurring alone. Be alert for medical emergencies and/or injuries

Drug Abuse

Signs & Symptoms:

Uppers:	Excitement, increased pulse/breathing rates, rapid speech, dilated pupils, sweating, restless, hyperactive (approaching apprehensive and uncooperative)
Downers:	Sluggish, sleepy, uncoordinated, decreased pulse/breathing rates, slurred speech
Hallucinogens:	Increased pulse rate, dilated pupils, “sees” or “hears” things, aggressive/timid
Narcotics:	Reduced pulse rate, reduced breathing rate and depth, constricted pupils, profuse sweating, decreased skin temperature, sleepy/coma
Volatile Chemicals:	Dazed, swollen membranes of nose/mouth, changes in heart rhythm

Treatment

- I. ***Perform initial patient assessment***
 - A. Be prepared to provide basic life support
- II. ***Establish/maintain patent airway***
- III. ***Administer Oxygen at 15 lpm via nonrebreather mask***
 - A. Assist ventilations if required
- IV. ***Treat for shock***
- V. ***Talk to the patient to gain confidence and help maintain LOC***
- VI. ***Perform rapid trauma exam or detailed physical exam to assess for signs of injury***
- VII. ***Protect the patient from self-injury/hurting others***
- VIII. ***Transport as soon as possible***
 - A. Contact medical control for specific interventions

- B. Document time, amount and type of drug, if known
- C. Transport all containers with patient

Overdose/Alcohol Abuse Continued

- D. Perform on-going assessment
 - 1. Monitor ABCs
 - 2. Obtain vital signs every five minutes
 - 3. Stay alert for seizures/vomiting

Alcohol Abuse

Signs & Symptoms

- Odor of alcohol on breath (not conclusive)
- Swaying/unsteadiness
- Slurred speech/rambling thought patterns
- Flushed face
- Nausea/vomiting
- Drowsiness
- Altered mental status/hallucinations
- Violent/destructive/erratic behavior

Withdrawal

- Insomnia
- Muscular weakness/gross tremors
- Fever
- Seizures
- Nausea/vomiting/sweating
- Disorientation/confusion
- Hallucinations
- Rapid heartbeat

Treatment

- I. ***Perform initial patient assessment***
 - A. Be prepared to provide basic life support
- II. ***Establish/maintain patent airway***
 - A. Be prepared to suction
- III. ***Administer Oxygen at 15 lpm via nonrebreather mask***
 - A. Assist ventilations if required
- IV. ***Treat for shock***
- V. ***Talk to the patient to gain confidence and help maintain LOC***
- VI. ***Perform rapid trauma exam or detailed physical exam to assess for signs of injury***
- VII. ***Protect the patient from self-injury/hurting others***
- VIII. ***Transport as soon as possible***
 - A. Perform on-going assessment

1. Monitor ABCs
2. Obtain vital signs every five minutes
3. Stay alert for seizures/vomiting
4. Position patient to avoid aspiration of vomitus