

California Poison Control System

ANTIDOTE CHART

(Suggested Stocking Level is based on dose to treat a 100kg patient for 8 hours and for 24 hours)*

Generic/Brand name	Toxin	Notes	Suggested Stocking Level
Atropine	Organophosphate/ Carbamate insecticide poisoning and other cholinesterase inhibitors (e.g., warfare agents); bradycardia induced by various agents	May require large amounts in severe cholinesterase inhibitor poisoning. Also stocked in the Strategic National Stockpile but will need supplies for first 48 hours. Coordinate with local Homeland Security office.	8 hours: 100 mg or 13 vials (0.4mg/mL, 20 mL each) 24 hours: 200 mg or 26 vials (0.4mg/mL, 20 mL each) Use preservative free product
Antivenom, Crotalidae Polyvalent Immune Fab (ovine)/ CroFab®	Rattlesnake envenomation		8 hours: 12 vials 24 hours: 18 vials, may need up to 35 vials for treatment
Antivenom, Black Widow Spider/Antivenom Latrodectus Mactans®	Black Widow Spider envenomation	Equine base and risk of hypersensitivity	8 hours: 1 vial 24 hours: 1 vial
BAL (Dimercaprol)/ BAL in oil 10%	Heavy Metal poisoning	IM administration only	8 hours: 600 mg <u>or</u> 2 amps (100mg/mL, 3 mL each) 24 hours: 1800 mg <u>or</u> 6 amps (100mg/mL, 3 mL each)
Calcium Chloride Injection	Calcium Channel Blocker poisoning; hypocalcemia induced by various agents	Can cause tissue necrosis if extravasation occurs – use large vein for infusion.	8 hours: 10 g <u>or</u> 10 vials (10 mL, 10 %) 24 hours: 10 g <u>or</u> 10 vials (10 mL, 10 %)
Calcium Gluconate powder	Hydrofluoric acid	For manufacture of topical gel	1 x 100g powder bottle
Calcium Gluconate Injection	Hydrofluoric acid skin exposure or poisoning; hypocalcemia induced by various agents		8 hours: 30 g <u>or</u> 30 vials (10 mL, 10 %) 24 hours: 30 g <u>or</u> 30 vials (10 mL, 10 %)
Calcium Gluconate Gel/Calgonate 2.5% gel®	Hydrofluoric acid dermal burns	For topical Hydrofluoric acid burns	6 x 25 g tubes
Carnitine (L-carnitine)/Carnitor®	Hyperammonemia from Valproic acid toxicity	Use IV	8 hours: 10g <u>or</u> 10 x 1 g vials 24 hours: 19 g <u>or</u> 19 x 1 g vials
Deferoxamine/ Desferal®	Iron poisoning	IV Use ONLY	8 hours: 12 g <u>or</u> 6 x 2 g vials 24 hours: 36 g <u>or</u> 18 x 2 g vials
Digoxin Immune Fab (ovine)/Digibind® or DigiFab®	Digoxin poisoning; other cardiac glycosides (e.g., Oleander, foxglove plants)	Consult with poison center regarding dosing, especially for cardiac glycosides other than digoxin	8 hours: 15 vials of either product 24 hours: 20 vials of either product
DMSA (Succimer)/ Chemet®	Heavy Metal poisoning		8 hours: 1 g <u>or</u> 10 x 100 mg capsules 24 hours: 3 g <u>or</u> 30 x 100 mg capsules
DTPA-Calcium (Diethylenetriamine pentaacetate)/ Pentetate Calcium Trisodium Injection	Dirty Bomb agents; Radioactive plutonium, americium and curium	Stocked in the Strategic National Stockpile but will need supplies for first 48 hours. Coordinate with local Homeland Security office.	8 hours: 1 x 1gm ampule 24 hours: 1 x 1gm ampule
DTPA-Zinc (Diethylenetriamine pentaacetate)/ Pentetate Zinc Trisodium Injection	Dirty Bomb agents; Radioactive plutonium, americium and curium	Stocked in the Strategic National Stockpile but will need supplies for first 48 hours. Coordinate with local Homeland Security office.	8 hours: 1 x 1gm ampule 24 hours: 1 x 1gm ampule
EDTA-Calcium/Versenate®	Heavy Metal poisoning		8 hours: 1 g <u>or</u> 1 amp 24 hours: 3 g <u>or</u> 3 amps
Ethanol IV 10% with 5% Dextrose	Ethylene glycol or Methanol poisoning	Note IV 10% ethanol product no longer manufactured. Fomepizole easier to dose and monitor than ethanol.	8 hours: 2 bottles (1 L each) 24 hours: 4 bottles (1 L each) Note: can be prepared with 95% ethanol product.
Ethanol oral/Vodka	Ethylene glycol or Methanol poisoning	Fomepizole easier to dose and monitor than ethanol. Oral ethanol can be used in an emergency situation.	8 hours: 1 pint 24 hours: 750ml
Flumazenil/	Benzodiazepines	Use small initial dose to	8 hours: 6 mg <u>or</u> 6 x 1 mg/10

Romazicon®		avoid abrupt awakening/delirium. Do not use in patients on chronic benzodiazepine therapy as withdrawal will occur.	mL vials 24 hours: 12 mg <u>or</u> 12 x 1 mg/10 mL vials
Fomepizole (4-MP)/Antizol®	Preferred antidote for Ethylene glycol or Methanol poisoning	Manufacturers will replace expired stocks	8 hours: 1.5 g <u>or</u> 1 x 1.5mL (1g/mL) vials 24 hours: 6.0 g <u>or</u> 4 x 1.5 mL (1g/mL) vials
Glucagon	Beta-blocker/Calcium Channel blocker poisoning	Anticipate nausea and vomiting	8 hours: 90 mg <u>or</u> 90 x 1 mg kits 24 hours: 250 mg <u>or</u> 250 x 1 mg kits
Hydroxycobalamin/ Cyanokit®	Cyanide poisoning	Safer to use than the nitrites found in the conventional cyanide antidote kit.	8 hours: 10 g <u>or</u> 2 kits 24 hours: 10 g <u>or</u> 2 kits
Methylene Blue	Methemoglobinemia		8 hours: 400 mg <u>or</u> 4 x 10mL (10 mg/mL) amps 24 hours: 600 mg <u>or</u> 6 x 10mL (10mg/mL) amps
N-Acetylcysteine (NAC)/ Mucomyst® or generic (oral preparation)	Acetaminophen poisoning	Use orally. Dilute at least by a 3:1 ratio.	8 hours: 28 g <u>or</u> 5 x 30mL (20%) vials 24 hours: 56 g <u>or</u> 10 x 30 mL (20%) vials
N-Acetylcysteine (NAC)/ Acetadote® (IVpreparation)	Acetaminophen poisoning	Loading dose should be infused slowly over 45-60 minutes. Generic N-acetylcysteine can be used IV if Acetadote® is not available (consult with poison center and give via micropore filter).	8 hours: 24 g <u>or</u> 1 carton of 4 x 30mL (20%) vials 24 hours: 30 g <u>or</u> 5 x 30 mL (20%) vials
Naloxone/Narcan®	Opiate and Opioid overdose	Use small initial dose to avoid abrupt awakening/delirium.	8 hours: 20 mg <u>or</u> 50 x 0.4mg/2mL amps <u>or</u> 2 x 10mg/10mL vials 24 hours: 40 mg <u>or</u> 4 x 10mg/mL vials
Octreotide acetate/ Sandostati n®	Oral Sulfonylurea poisoning	Avoid long-acting depot products.	8 hours: 200 mcg <u>or</u> 2 x 1mL (0.1mg/mL) amps 24 hours: 1000 mcg <u>or</u> 1 x 5ml (0.2mg/mL) MDV
D-Penicilliamine/ Cupramine®	Heavy Metal poisoning	Possible cross-sensitivity in patients allergic to penicillin	8 hours: 500 mg <u>or</u> 2 x 250mg capsules 24 hours: 1500 mg <u>or</u> 6 250 mg titratable tablets
Physostigmine/ Antilirium®	Anticholinergic poisoning especially antimuscarinic agitated delirium	Administer at low dose (0.5 mg) and slowly(over 2-5 mins)to avoid severe side effects including bradycardia, asystole and seizures(contraindicated in TCA poisoning)	8 hours: 4 mg <u>or</u> 2 x 2mL (1mg/mL) amps 24 hours: 20 mg <u>or</u> 10 x 2 mL (1 mg/mL) amps
Pralidoxime (2-PAM)/Protopam®	Cholinesterase inhibitor poisoning (Organophosphate or "nerve gas" agent) poisoning	Also stocked in the Strategic National Stockpile but will need supplies for first 48 hours. Coordinate with local Homeland Security office	8 hours: 7 g <u>or</u> 7 x 1gm (20mL) vials 24 hours: 18 g <u>or</u> 18 x 1gm (20mL) vials
Prussian Blue/ Radiogardase®	Dirty bomb agents; radioactive cesium, thallium and non-radioactive thallium	Stocked in the Strategic National Stockpile but will need supplies for first 48 hours. Coordinate with local Homeland Security office	Minimum order is 25 bottles (30 capsules each)
Pyridoxine (Vitamin B ₆)	Isoniazid (INH) poisoning	Large amounts needed for poisoning: 5 grams is the minimum antidotal dose used in an ingestion of an unknown amount. Note: the 100 mg in 1 ml vials contain the preservative chlorobutanol. A 5 gram dose requires 50 vials and will deliver a toxic dose of the preservative	8 hours: 9 g <u>or</u> 3 vials(100 mg/mL, 30 mL each) or the equivalent (Use preservative free product.) 24 hours: 24 g <u>or</u> 8 vials(100 mg/mL, 30 mL each) or the equivalent
Vitamin K ₁ (Phytonadione)/ Mephyton® or AquaMephyton®	Warfarin, warfarin-based anticoagulants and super-warfarin based rodenticide poisoning	If patient actively bleeding, use fresh frozen plasma or Factor VII concentrate	8 hours: 50 mg or 10 x 5mg tabs <u>or</u> 5 x 10mg/mL amps 24 hours: 100 mg <u>or</u> 20 x 5 mg tabs or 10 x 10mg/mL amps

Expert advice regarding use of antidotes is available 24 hours a day/7 days a week from the California Poison Control System**. Call us at:

1-800-222-1222

***Adapted from Dart RC et al. Annals of Emergency Medicine. 2009; 54(3):386-394.**

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****The California Poison Control System is part of the University of California San Francisco School of Pharmacy, Department of Clinical Pharmacy and is responsible to the California Emergency Medical Services Authority.**

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