

List of Availability of Antidote Drugs at Southern Health-Santé Sud
Consult with the Manitoba Poison Control Centre 1-855-776-4766

Drug/Dosage Form	Indication	Usual Treatment Dose/Adult Patient (70 kg)	Treatment Duration	Site Availability	Starter Therapy*	Full Therapy**
acetylcysteine 200 mg/mL – 10 mL or 30 mL vial	acetaminophen overdose	150 mg/kg IV over 15 to 60 minutes, then 50 mg/kg over 4 hours then 100 mg/kg over 16 hours	20 hours	Regional – 15 vials (30 mL) ALL others – 4 vials (30 mL) OR 12 vials (10 mL)	3 vials (30 mL) or 9 vials (10 mL)	4 vials (30 mL) or 12 vials (10 mL)
activated charcoal 50 g suspension (aqueous)	overdose of acetaminophen, ASA, atropine, barbiturates, digoxin, etc.	50 to 100 grams PO/NG, Usual: 50 grams PO/NG (Note: should be given within two hours of ingestion of an overdose except in exceptional circumstances)	usually X 1 dose only	ALL – 2 doses	1 dose	1 dose
atropine 0.6 mg/mL – 1 mL amp, or 0.4 mg/mL 1mL amp	drug-induced AV conduction impairment, organophosphate and carbamate insecticide intoxication	doses up to 5 mg IV every 10 minutes for 5 doses	hours	ALL 0.6mg/mL - 50 amps 0.4mg/mL - 65 amps	5 mg	25 mg
cyproheptadine 4 mg tabs	serotonin syndrome	8 mg TID	days	Regional – 25 tabs	8 mg	100 tabs
dantrolene 20 mg/70 mL	malignant hyperthermia	1 or 2.5 mg/kg IV, may repeat as necessary until patient response occurs, usually up to 10 mg/kg	1 day IV	Regional – 36 vials Surgical – 36 vials	4 x 20 mg vials	40 x 20 mg vials
deferoxamine 2 gram vial	iron overdose	15 mg/kg /hour by IV infusion. Total dose NOT to exceed 6 grams/24 hours	12 to 24 hours	ALL – 3 vials		3 X 2 grams
digoxin immune fab – bovine (DigiFab) 40 mg vial (FRIDGE)	digoxin overdose	depends on # tablets ingested if ingested	single dose	Regional – 6 vials		10 to 20 vials (6 vials usually adequate for most overdoses)
flumazenil 0.1 mg/mL – 5mL vials	benzodiazepine overdose	Usual dose: 0.3 mg to 0.6 mg IV every minute. Maximum 2 mg in 1 hour	1 day	ALL – 4 vials	4 x 5 mL vials	20 vials (5 hours of 2 mg/hour)
fomepizole 1 gram/mL – 1.5 mL vial	ethylene glycol (EG) OR methanol (M) overdoses	Load: 15 mg/kg over 30 minutes, then 10 mg/kg every 12 hours X 4 doses, then 15 mg/kg every 12 hours	continue until EG levels are less than 3 mmol/L OR M levels are less than 6 mmol/L	Regional – 4 vials ALL others – 2 vials	2 vials	8 to 10 vials
glucagon 1 mg vial	beta-blocker overdose	3 to 10 mg IV bolus followed by 0.5 to 5 mg/hour infusion	hours	ALL – 15 vials	15 x 1 mg vials (5 mg then 2 mg/hour X 4)	100 x 1 mg vials
hydroxocobalamin (Cyanokit) 1 X 5 g vial/kit (replaces Cyanide Kit)	cyanide poisoning	5 grams; may repeat 5 grams dose once	hours	Regional – 1 kit	1 kit	1 kit

* Based on 70 kg patient for 1st 4 hours treatment **Based on 70 kg patient for complete treatment *** Not stocked in Southern Health-Santé Sud, may be accessible through the WRHA

KEY for Site Availability: Regional (Bethesda, Boundary Trails Health Centre, Portage) , Surgical (Altona, Ste.Anne, Carman), and ALL (hospitals with ACTIVE emergency room)

References: 1) WRHA list of available antidote/critical care drugs Oct 2012 2) CPS 1998 3) AHFS 1998 4) Critical Care Med 26(2):377, 1998

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intralipid 20% - 250 mL or 500 mL	a) local anesthetic, antidepressant, antipsychotic induced cardiac toxicity	1.5 mL/kg over 1 minute, then follow with 0.25 mL/kg/minute. May repeat bolus every 3 to 5 minutes up to 3 mL/kg	hours	Regional – 1000 mL Surgical – 1000 mL	2 X 500 mL 4 x 250 mL	
leucovorin 10 mg/mL – 50 mL vials (FRIDGE)	methotrexate rescue	4 grams/day	3 days	Regional *Stock in pharmacy	2 X 50 mL vials	24 X 50 mL vials (12 grams/3 days)
methylene blue 10 mg/mL – 5 mL vial	methemoglobinemia	1 to 2 mg/kg slowly over 5 minutes and follow with fluid flush of 15 to 30 mL. Total dose not to exceed 7 mg/kg	may repeat after 1 hour if needed	Regional – 6 vials Surgical – 3 vials	6 X 5 mL vials (280 mg = 2mg/kg X 70 kg X 2)	10 X 5 mL vials (7 mg/kg)
naloxone 0.4 mg/mL 1 mL amps & 10 mL vials	opiate overdose	0.4 to 2 mg every 2 or 3 minutes. For high potency opioids: 0.4, 0.4, 2, 10 mg at 2 to 3 minute intervals. May follow with 0.1 to 3 mg/hour continuous infusion.	1 day	Regional – 100 mg ALL others – 26 mg (65 x 1 mL)	13 mg	100 mg
neostigmine 0.5 mg/mL or 1 mg/mL – 10 mL vials	neuromuscular blocker reversal	dosage varies depending on depth of blockade; ranges from 0.025 to 0.07 mg/kg	hours	Regional – 5 vials Surgical – 5 vials		5 X 10 mL vials
octreotide 100 mcg/mL – 1 mL amp (FRIDGE)	sulfonylurea overdose	50 to 100 mcg in emergency situations or 50 mcg/hour in continuous IV solution	8 to 24 hours. May continue with subcut injection of 100 to 600 mcg/day in 2 to 4 doses	Regional – 20 amps ALL others – 10 amp	4 x 1 mL amps	20 X 1 mL amps
pralidoxime 1 gram vial (Special Access-Baxter)	organophosphate poisoning	1 to 2 grams initially, may be repeated in 1 hour and thereafter every 4 to 12 hours as needed OR 500 mg/hour continuous infusion	24 hours	Regional – 4 vials		24 vials
phentolamine 10 mg/mL (FRIDGE)	extravasation	5- 10 mg infiltrated or 5-15 mg IV	1 day	ALL – 3 vials	3 vials	3 vials
protamine 10 mg/mL – 5 mL vial	heparin, enoxaparin and dalteparin overdose	25 to 50 mg after heparin infusion overdose, 1 mg per 1 mg after enoxaparin or dalteparin overdose	single dose	ALL – 1 vial	1 vial	1 vial
pyridoxine 100 mg/mL – 30 mL vials	isoniazid overdose	equal dose to isoniazid, generally 1 to 4 grams in 30 to 60 minutes then 1 gram IM every 30 minutes until entire dose given (5 grams if unknown dose)	24 hours	Regional – 2 vials		2 vials (minimum on hand)
botulism antitoxin	botulism			NOT STOCKED***		
calcium EDTA 50 mg/mL	lead poisoning			NOT STOCKED***		
calcium gluconate gel	hydrofluoric acid burns			NOT STOCKED***		
dimercaprol 100 mg/ML	heavy metal poisoning			NOT STOCKED***		
penicillamine 250 mg caps	lead poisoning			NOT STOCKED***		
physostigmine 1 mg/mL –	baclofen overdose			NOT STOCKED***		

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