APPENDIX C - Poisoning antidotes stocking list^a

Consult Poison Control Centres for advice on patient management.

| Antidote | Indication | Minimum Stock ^b |
|---|---|--|
| Acetylcysteine 200 mg/mL vial | Acetaminophen overdose | $30 \times 10 \text{ mL}^{\circ}$ (or $10 \times 30 \text{ mL}$) |
| Activated Charcoal, Aqueous | May be suggested for various agents in overdose situations. | 5 x 250mL |
| | | 5 x 112.5 mL: |
| Atropine 1 mg/10 mL PLS | Organophosphate or carbamate insecticide poisoning | 2 x 10 mL In addition to crash cart stock. |
| Calcium gluconate 1 g vial | Calcium channel blocker overdose | 3 x 10 mL |
| Deferoxamine 500 mg vial | Iron toxicity Aluminum toxicity | 10 x 500mg |
| Dextrose 50%, PLS | Hypoglycemia | 2 x 50mL syringes In addition to crash cart stock. |
| Ethanol 100% (Alcohol Dehydrated) 10mL amp | Methanol or ethylene glycol poisoning | 30 vials Stations may choose to stock fomepizole rather than ethanol 100%. |
| Flumazenil 0.1 mg/mL | Benzodiazepine overdose | 5 x 5 mL |
| Folic acid 5 mg/mL | Methanol or ethylene glycol poisoning (adjunctive therapy) | 6 x 10 mL |
| Glucagon 1 mg (1 u) vial | Hypoglycemia or insulin shock Beta-blocker or calcium channel blocker overdose | 5 vials |
| Naloxone 0.4 mg/mL | Narcotic overdose | 10 x 1 mL |
| Octreotide 100 mcg/mL x 1 mL amp | Sulfonylurea overdose | 3 x 1 mL |
| PEG with Electrolytes (CoLyte, Golytely) | Sustained release medications eg. Duralith, Cardizem SR,CD, Isoptin SR, Adalat XL | 3 x 4L |
| Phentolamine mesylate 10 mg/1 mL | Epinephrine or Dopamine Extravasation | 3 x 1 mL |
| Protamine sulfate 10 mg/mL | Enoxaparin overdose (anti-heparin agent) | 3 x 5 mL |
| Pyridoxine 100 mg (Vitamin B6) amp | INH Overdose | 50 x 100 mg/mL, 1 mL |
| Sodium Bicarbonate 50 mEq PLS | Overdose: Tricyclic Antidepressants, ASA. | 3 x 50mL In addition to crash cart stock. |
| Thiamine | Ethelyne glycol poisoning | 3 x 100 mg/mL amp |
| Vitamin K (phytonadione) 10 mg/mL | Warfarin overdose | 5 x 1 mL |

(e.g., agricultural areas).

b When possible, minimum stocking quantities based on treatment of one 70 kg patient for 24 hours.

Nursing stations may increase these quantities if deemed necessary based on size of community or time

^a Optional medications that might be stocked are fomepizole (rather than ethanol) for methanol and ethylene glycol poisoning and pralidoxime in communities where organophosphate poisoning is possible (e.g., agricultural areas).

^c Minimum stock suggestion for acetaminophen increased based on possibility of two overdose patients presenting simultaneously.

APPENDIX E - Prescription Labelling Requirements

Proper labelling is an important aspect of dispensing a prescription. The label must comply with rules and regulations and should correctly and clearly convey all necessary information regarding dosage, mode of administration, and special storage of the product. The quality of the labelling is extremely important to the patient's perception of the quality of the product and may have profound implications for his or her safe use of the medication and adherence with the prescribed regimen.

The label shall include:

- · client's name;
- generic drug name and strength and name of manufacturer;
- · directions for use;
- · quantity dispensed;
- · expiration date when applicable;
- · date that drug is dispensed;
- name of prescriber;
- name, address, telephone number of location from which drug is dispensed;
- prescription number for filing prescriptions where applicable; and
- auxiliary labels (e.g., shake well) are affixed in addition to the label when necessary.

The label shall be of sufficient size to allow all necessary information to be included, in a clear type size large enough for all information to be easily read.

Presented below is an example of a proper prescription label.

