ASPCA POISON CONTROL (888) 426-4435

DECONTAMINATION INFORMATION

Bathing

Patient should be bathed with hand dishwashing soap. Bathing may need to be repeated. Afterwards, the animal should be rinsed well with warm water and dried with warm towels.

Dilution

Dilution with milk or water is recommended in cases of corrosive ingestion. A suggested dose is 1-3 ml/lb (2.2-6.6 ml/kg).

Emesis

Emesis is most productive if performed within 30-90 minutes post-ingestion. Feeding the animal a small meal before inducing vomiting can increase recovery with emesis. Emetics generally empty 40-60% of the stomach contents and are shown to be more beneficial than gastric lavage.

Induction of emesis is contraindicated with ingestion of alkalis, acids, corrosive agents, or hydrocarbons. Pre-existing condition of the animal also determines the indication for using an emetic. Emesis should not be attempted if the animal has already vomited or is exhibiting clinical signs.

Dogs: Hydrogen peroxide (3%) is a useful emetic for dogs and potbellied pigs. Administer 1 ml/lb (2.2 ml/kg), up to a maximum of 45 mls. The dose can be repeated once if emesis is not seen within 5-10 minutes. Hydrogen peroxide is contraindicated in cats, due to the potential for severe, necrotizing gastritis.

Apomorphine can be used in dogs to induce vomiting at 0.03 mg/kg IV (preferred), 0.04 mg/kg IM, or 6.25 mg conjunctivally.

Ropinirole (ophthalmic) for dogs over 4.5 months old and 4 lb: administer the appropriate number of eye drops. May be repeated in 20 minutes if the first dose is not effective.

Cats: Dexmedetomidine 20 µg/kg PO, 7 µg/kg IM, or 3.5 µg/kg IV can be used to induce vomiting in cats. Atipamezole should be used to reverse any sedation seen.

Activated Charcoal

Activated charcoal absorbs a toxicant and facilitates its excretion via the feces. Activated charcoal should not be given to animals that have ingested caustic materials. Other chemicals not effectively adsorbed by activated charcoal include alcohols, metals, and petroleum distillates.

The recommended dose of activated charcoal for all species of animals is 1-2 g/kg body weight.

Repeated doses of activated charcoal every 8 hours at half the original dose may be indicated when enterohepatic recirculation is known to occur. Monitor for hypernatremia. Ensuring free access to oral water or providing parenteral fluids may help to limit the risk of this condition.

Activated charcoal is given orally with a large syringe or via a stomach tube. Activated charcoal can be mixed with a small amount of canned food to facilitate patient compliance. In symptomatic or uncooperative animals, anesthesia may be needed. A cuffed endotracheal tube should be used in the sedated or clinically depressed animal to prevent aspiration.

Cathartics

Cathartics enhance elimination of activated charcoal. Without cathartics, the toxicant bound by charcoal can eventually be released and reabsorbed. Cathartics are not to be used if the animal has diarrhea or is dehydrated.

Enemas

Enemas are helpful when elimination of toxicants from the lower gastrointestinal tract is desired.

	DOSE	USE	COMMENTS
Acepromazine	**Dogs and Cats:** Administer in increments of 0.02-0.05 mg/kg, assess response before repeating	Treatment of CNS excitation due to serotoninergic medications, pseudoephedrine, and amphetamines.	
Atipamezole	**Dogs and Cats:** 50 mcg/kg IV or IM	Used as an alpha- 2 antagonist to reverse toxic effects of amitraz, clonidine, dexmedetomidine, and other alpha-2 agonists.	Can use yohimbine 0.1-0.2 mg/kg IV; if atipamezole is not available.
Atropine	**Dogs and Cats:** 0.1-0.2 mg/kg; give ¼ of the initial dose IV and the rest IM or SQ	To control muscarinic signs associated with organophosphate (OP) or carbamate toxicity only.	Consider giving a test dose of 0.01-0.02 mg/kg first. A response to this dose (such as mydriasis or an increased heart rate) is unlikely to be seen with true OP/carbamate toxicity.
Cholestyramine	**Dogs and Cats:** 300-500 mg/kg PO q 8hr	To bind bile acids and stop enterohepatic recirculation.	Used most commonly for cholecalciferol, sago palm, and long acting NSAIDs.
Cyproheptadine	**Dogs:** 1.1 mg/kg PO q 8 hr if needed **Cats:** 2-4 mg PO q 8-12 hr if needed	Serotonin syndrome	
Diazepam	**Dogs:** 0.5-1 mg/kg IV **Cats:** 0.05-2 mg/kg IV	Control of seizures	Always give slowly IV to effect. **Do not give** in cases of ephedra, amphetamine, or pseudoephedrine toxicity
Ethanol	**Dogs and Cats:** Use 7% ethanol loading dose at 600 mg/kg slowly IV (8.6 ml/kg), then maintain at 100 mg/kg/hr (1.43 ml/kg/hr) CRI IV	Ethylene glycol (antifreeze) toxicity	CRI preferred to avoid high blood ethanol levels. **Do not give along with 4-MP**
Flumazenil	**Dogs and Cats:** 0.01 mg/kg IV	Benzodiazepine antagonist	Dose can be repeated if severe depression returns.
Fomepizole (4-MP)	**Dogs:** 20 mg/kg, slow IV infusion over 5-10 minutes, 15 mg/kg slowly IV at 12 hrs and again at 24 hrs, and 5 mg/kg IV at 36 hrs **Cats:** 125 mg/kg IV, then 31.25 mg/kg q 12, 24, and 36 hrs	Ethylene glycol (antifreeze) toxicity	May continue treatment at 5 mg/kg IV every 12 hours if EG is still present in the dog's system (per EG test results). **Effective within 3 hr of exposure in cats. Do not give along with ethanol**.
Intravenous Lipid Emulsion (ILE)	Recommend 20% solution. Initial bolus at 1.5 ml/kg then 0.25 ml/kg/min for 30-60 minutes	Remove lipid soluble agents from body, likely acting as shuttle. May be less effective in ABCB1 deficient animals.	Check for hyperlipidemia before repeating the dose. **Do not** repeat intralipid dose until serum has become clear. **Do not** give more than 3 doses if no significant response is seen.
Methocarbamol	**Dogs and Cats:** 55-220 mg/kg slow IV to effect; **use caution when exceeding 330 mg/kg/day**	Muscle tremors associated with tremorgenic mycotoxin and metaldehyde ingestions, and permethrin toxicosis in cats.	**Monitor for CNS and respiratory depression with doses > 330 mg/kg/d.**
Naloxone	**Dogs and Cats:** 0.002-0.04 mg/kg IV, IM, or SQ	Opioid antagonist	
Propanolol	**Dogs and Cats:** 0.02 -0.06 mg/kg slow IV	Treatment of tachycardias, tachyarrhythmias, and hypertension.	Useful in toxicoses involving caffeine, theobromine, ephedra, pseudoephredrine, cocaine, amphetamine, cardiac glycosides, and thyroid hormones.