SAQ

A 22 yr old male is brought to your Emergency Department following a 4g quetiapine overdose taken 2 hours ago.

Vital signs:

Pulse 130

BP 145/78

RR 12

Temp 36.8 oC

GCS 6 (E=1, V=1, M=4)

BSL 6.7 mmol/L

**c. The patient is successfully intubated and accepted for admission to the Intensive Care Unit. The ICU bed will not be available for another 90mins. What supportive / on-going care should be considered whilst the patient remains in the Emergency Department. (4 Marks)**

*On-going sedation e.g. propofol or morphine/midazolam infusion - 1/2 mark*

*Adequate ventilation / oxygenation - 1/2 mark*

*1/2 Mark for any below up to 3 marks:*

*Maintain circulation e.g. fluid replacement, inotropes, control hypertension*

*Fluid replacement / electrolyte correction*

*Paralysis e.g. vecuronium - repeated suxamthonium not appropriate*

*Bladder Care / Catheter Insertion*

*Pressure area care*

*Thromboembolism prophylaxis*

*NGT - gastric decompression*

*Charcoal via NGT*

*Respiratory toilet*

*Ensure normoglycaemia*

*Adapted from Murray et al Toxicology Handbook 2nd Edition Section 1.4 Pg 14*