

Pediatric Ingestion Dose Thresholds for Referral to ED

American Academy of Clinical Toxicology: <http://www.clintox.org/guidelines.cfm>

| Drug or Toxin | Toxic Dose | | Reference |
|---|--|--|---------------------------------------|
| Acetaminophen | Age < 6 years <ul style="list-style-type: none"> • Acute • RSTI | ≥200 mg/kg ≥200 mg/kg over 24 hrs, or ≥150 mg/kg per 24 hrs X 2 days, or ≥100 mg/kg per 24 hours X 3 days | Dart et al. 2006. |
| | Age ≥ 6 years <ul style="list-style-type: none"> • Acute • RSTI | ≥10 g or ≥200 mg/kg ≥10 g or ≥200 mg/kg over 24 hours, or ≥6 g or ≥150 mg/kg per 24 hrs X 2 days | |
| Atypical Antipsychotics (naïve patients) | Age < 12 years Aripiprazole Clozapine Olanzapine Quetiapine Risperidone Ziprasidone | >15 mg >50 mg >10 mg >100 mg >1 mg >80 mg | Cobaugh et al. 2007. |
| | Age ≥ 12 years Aripiprazole Clozapine Olanzapine Quetiapine Risperidone Ziprasidone | >50 mg >62.5 mg >25 mg >125 mg >5 mg >100 mg | |
| Anticoagulant Rodenticides | ≥1 mg | | Caravati et al. 2007. |
| Beta Blockers* <i>Ingestion of any excess beta blocker in combination with a calcium channel blocker warrants referral to an ED.</i> | Acebutolol Atenolol Carvedilol Labetalol Metoprolol IR Metoprolol SR Nadolol Propranolol IR Propranolol SR Sotalol Timolol | >12 mg/kg >2 mg/kg >0.5 mg/kg >20 mg/kg >2.5 mg/kg >5 mg/kg >2.5 mg/kg >4 mg/kg >5 mg/kg >4 mg/kg No safe dose | Wax et al. 2005. |



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| Calcium Channel Blockers <i>Ingestion of any excess beta blocker in combination with a calcium channel blocker warrants referral to an ED.</i> | Amlodipine Diltiazem Felodipine Isradipine Nifedipine IR Verapamil IR | ≥0.3 mg/kg or ≥30 mg ≥1 mg/kg ≥0.3 mg/kg ≥0.1 mg/kg ≥1 mg/kg ≥2.5 mg/kg | Olson et al. 2005. |
| Camphor | >30 mg/kg | Manoquerra et al. 2006. | |
| Dextromethorphan | >7.5 mg/kg | Chyka et al. 2007. | |
| Diphenhydramine & Dimenhydrinate | Age < 6 years: >7.5 mg/kg Age ≥ 6 years: >7.5 mg/kg or 300 mg | Scharman et al. 2006. | |
| Ethylene Glycol | More than witnessed taste/lick or unknown amount | Caravati et al. 2005. | |
| Iron (Elemental) | ≥40 mg/kg of adult ferrous sulfate formulation | Manoquerra et al. 2005. | |
| Mercury (Elemental) | > 1 household fever thermometer | Caravati et al. 2008. | |
| Methylphenidate | IR (or chewed MR): >2 mg/kg or 60 mg MR (intact): >4 mg/kg or 120 mg | Scharman et al. 2007. | |
| Salicylate | Aspirin equivalent: >150 mg/kg or 6.5 g Oil of Wintergreen: Age < 6 years: More than a taste/lick Age ≥ 6 years: More than 4 mL | Chyka et al. 2007. | |
| Selective Serotonin Reuptake Inhibitors | Citalopram: >100 mg Escitalopram: >50 mg Fluoxetine: >100 mg Fluvoxamine: >250 mg Paroxetine: >100 mg Sertraline: >250 mg | Nelson et al. 2007. | |
| Tricyclic Antidepressants (TCA) | Desipramine: >2.5 mg/kg Nortriptyline: >2.5 mg/kg Trimipramine: >2.5 mg/kg Protriptyline: >1 mg/kg All other TCAs: >5 mg/kg | Woolf et al. 2007. | |
| Valproic Acid | ≥50 mg/kg | Manoquerra et al. 2008. | |

NOTE: Whenever two values are noted, the lesser one should be utilized.

NOTE: Symptomatic patients always warrant ED evaluation.

RSTI – repeated supratherapeutic ingestion

IR – immediate release

SR – sustained release

MR – modified release