Staff Safety Alert: Emerging Drug Threats in Clinical Settings

Please review this information carefully. Several dangerous substances are increasingly present in prehospital and emergency department settings. These include **BTMPS**, **medetomidine**, **xylazine**, and **carfentanil**. Each poses unique risks to patients and providers, especially through handling or close contact.

BTMPS

- **Type:** Novel psychoactive substance; often a contaminant in street drugs.
- **Presentation:** May not respond to naloxone; may be sedated, agitated, or show unpredictable signs.
- **Management:** Supportive care. Maintain airway and circulation. Call the poison center for guidance.

Safety Tip: Use gloves; avoid direct contact with unknown powders or residues

Medetomidine

- **Type:** Potent veterinary sedative; similar to dexmedetomidine.
- **Presentation:** Deep sedation, bradycardia, hypotension. May appear unresponsive but still breathe.
- **Management:** Naloxone will not reverse it; administer if opioids are suspected. Treat bradycardia/hypotension supportively. ICU care may be needed.

Safety Tip: Full PPE recommended for suspected exposures

Xylazine ("Tranq")

- **Type:** Veterinary sedative; often mixed with opioids like fentanyl.
- **Presentation:** Sedation, bradycardia, hypotension, and necrotic skin ulcers in chronic users.
- **Management:** Supportive care. Naloxone if opioids are suspected. Monitor airway and blood pressure.

Safety Tip: Use gloves, mask, and eye protection—especially with open wounds or drug paraphernalia

Carfentanil

- **Type:** Extremely potent synthetic opioid; used in large animal sedation.
- **Presentation:** Respiratory arrest, deep unconsciousness, no response to standard naloxone dose.
- **Management:** High-dose naloxone/continuous infusion. Secure airway, immediate respiratory support.

Safety Tip: Use gloves, N95 mask, and eye protection. Never handle powder directly.

Final Reminders

- Always use **appropriate PPE** when handling patients with suspected drug exposures.
- If **naloxone is ineffective**, consider **xylazine or medetomidine** as possible agents.
- Assume **polydrug use** unless proven otherwise.
- If **provider exposure** occurs:
  - Wash area with **soap and water** immediately.
  - **Do not** use alcohol-based hand rubs.
  - Seek **medical evaluation**.

Protect yourself first—then care for the patient.

POISON HELP 1-800-222-1222 | KENTUCKY POISON CENTER