toxin	Antidote
Acetaminophen Poisoning.	acetylcysteine (NAC
-Chloroform Poisoning.	
-Carbon Tetrachloride Poisoning.	
-Other Hepatotoxins	
Paracetamol poisoning	Methionine
Organophosphate / Carbamates.	Atropine
-insecticide poisoning & other cholinesterase inhibitors e.g., warfare	
agent.	
-Bradycardia Induced by a variety of drugs.	
-Digoxin poisoning; other cardiac glycosides (eg, oleander, foxglove)	Digoxin Immune FAB Digibind or Di giFa b®
Methanol toxicity	Ethanol IV 10 % with 5%
Ethylene glycol toxicity	Dextrose and Ethanol (oral)
- Methanol toxicity	Fomepizole
-Ethylene glycol toxicity	
Benzodiazepine poisoning:	Flumazenil
Reversal of iatrogenic over-sedation with benzodiazepines.	
Formaldehyde/ Formic acid	Leucovorin (Folinic Acid) and
Methanol Toxicity	Folic Acid
Folic acid antagonist (e.g. Methotrexate, trimethoprim, trimetrexate	
And Pyrimethamine)	
Methotrexate toxic levels	Glucarpidase/ Voraxaze®
-Beta blocker over Dose	Glucagon HCL
-CCB overdose	
-Hypoglycemic agents overdose	
Carbon monoxide	100% O2 and Hyperbaric oxygen
Cyanide poisoning	(НВО)
Hydrogen sulfide	
Carbon tetrachloride: High met Hg level unresponsive to	
methylene blue	High does insulin sughreemis
-Severe calcium channel blocker poisoning ,	High dose insulin euglycemic therapy
severe beta blocker poisoning  Dabigatran etavilate everdese	
Dabigatran etexilate overdose Idarucizumab is licensed for use in adults when rapid reversal of	Idarucizumab (Praxibind)
anticoagulant effect of dabigatran etexilate is required as in	
emergency surgery or urgent procedures or life threatening or	
uncontrolled bleeding	
oral direct Xa inhibitor Apixaban and Rivaroxaban	4-factor PCC Four-
oral unect na illilibitor Apixabali allu Kivaroxabali	Factor Prothrombin Complex
	Concentrate
	coagulation factor Xa
	(recombinant), inactivated-zhzo
	(formally known as "andexanet
	alfa")
Methemoglobin inducing agents like: Aniline dyes, Dapsone, Nitrates	Methylene Blue
and nitrites, Nitrobenzene Phenazopyridine	
- Opioids (eg, codeine, diphenoxylate, fentanyl, heroin, meperidine,	Naloxone/ Narcan
morphine, and propoxyphene)	
-Alpha2 agonists (eg, clonidine and guanfacine).	
-Unknown poisoning with mental status depression.	

Hypoglycaemia induced by sulphonylureas and quinine.	Octreotide acetate
Anticholinergic poisoning, especially antimuscarinic delirium.	Physostigmine
Cholinesterase Inhibitor: As poisoning by (organophosphate or "nerve gas") And possibly: Antimyasthenic agents (eg, pyridostigmine)	Oximes Pralidoxime (2 PAM Protopam Obidoxime
Anticoagulant effects of unfractionated heparin (UFH) and for some	Protamine Sulphate
of the effects of low molecular weight heparin (LMWH)	D. M. L. (NEL M. D.C.)
Isoniazid (INH) poisoning	Pyridoxine (Vitamin B6)
hydrazine, and derivatives,	
and ethylene glycol overdoses	
-Cardiotoxicity of xenobiotics that block Na channels.	Sodium Bicarbonate
- Correct life threatening acidosis generated from toxic alcohols	
- Rhabdomyolysis Chlorine gas Hyperkalemia	
-(TCA) Elimination Enhance of weak acids (salicylate,	
Phenobarbiturate, Methotrexate)	
lodine	Starch
Warfarin, and super- warfarin rodenticide	Vitamin K1 (phytonadione, phylloquinone)
-Cyanide poisoning (eg, HCN, KCN, and NaCN).	Cyanide Antidote Kit (Convention
-Cyanogen chloride Cyanogenic glycoside natural sources (eg,	al)
apricot pits and peach pits).	- NITRATE
-Hydrogen sulfide (nitrites only).	-Sodium thiosulfate
-Acetonitrile Acrylonitrile Laetrile Bromates (thiosulfate only)	
Chlorates (thiosulfate only).	
-Mustard agents (thiosulfate only) Nitroprusside (thiosulfate only)	
Smoke inhalation (combustion of synthetic materials; thiosulfate	
only)	
-Iron poisoning	Deferoxamine
Cyanide toxicity The antidote of choice in severe cases when there is a high clinical suspicion of cyanide poisoning e.g. after cyanide salt exposure.	Dicobaltedetate
Lipophilic cardiotoxic agents	Intravenous lipid emulsion
- (Local anesthetics	(Intralipid)
-and possibly other cardiac toxins e.g., CCB, bupropion, and cocaine)	
-Heavy metals poisoning In lead Encephalopathy: It is used only with conjunction of calcium EDTA therapy.	B A L (Dimercaprol)
Heavy metal poisoning (Arsenic, Lead, Lewisite, Mercury).	DM S A (Succimer)
Heavy metal poisoning (Lead, copper and arsenic)	Penicillamine
Heavy metal poisoning (Lead toxicity, Zinc salts)	EDTA-Calcium
-Botulinum antitoxin, heptavalent for botulism in child >1 Y & adults.	Botulism antitoxin & Bab y Botu-
-Botulism immune globulin, human (BabyBIG) for infant botulism < 1	lism IG (BIG)
Υ.	,
Scorpion envenomation	Antiscorpion
Snake envenomation Any local or systemic signs are an indication	Antivenom (Polyvalent an d
for antivenin administration. –	bivalent) for Snake bite
- Polyvalent snake antivenin for heamatotoxic snakes.	
-Bivalent snake antivenin for neuro- toxic snakes	
-Most poisons. Up to one hr. following ingestion.	Activated charcoal
-It may also be considered more than one hr after ingestion in some	

-Neuroleptic malignant syndrome (NMS) caused by neuroleptic drugs.	Bromoriptine
-Calcium channel blocker Hypercalcemia induced by (Fluoride,	Calcium Gluconate
oxalate or the IV anticoagulant citrate)	Carciam Graconate
-Hydrofluoric acid toxicity Severe hyperkalemia with cardiac	
manifestations (not digoxin induced).	
-Black widow spider. Hypomagnesaemia.	
-Hydrofluoric acid skin exposure burns < 5% of body surface or	Calcium Gluconate Gel
exposures to concentrations of <20%.	Cardiani Craddinase Co.
-Used as Adjunctive Agent in: Hyperammonemia from valproic acid	Carnitine (L-Carnitine)
toxicity.	- Carring (2 Carring)
-Chlorinated hydrocarbons.	Cholestyramine
-Digitoxin	
- Amiodarone	
- Oral anticoagulants	
-NSAIDs	
- b- blockers	
- Thiazide diuretics	
- Oral hypoglycemic.	
- Used as Adjunctive Agent in: Chloroquine and related antimalarial	BDZ
drugs	
Nerve agents	
Neuroleptic Malignant Syndrome (NMS)	
Serotonin syndrome	
Severe agitation from any toxic exposure/overdose (eg, cocaine,	
PCP, methamphetamine)	
hypnotics withdrawal	
Used as Adjunctive Agent in: Acute dystonic reactions associated	Benztropine
with neuroleptics or metoclopramide	
-Used as Adjunctive Agent in: Serotonin syndrome caused by:	Cyproheptadine
Monoamine oxidase inhibitors and Selective serotonin reuptake	
inhibitors	
- Used as Adjunctive Agent in: Hyperthermia from (malignant	Dantrolene
hyperthermia, neuroleptic malignant syndrome, serotonin	
syndrome, cocaine and amphetamines).	
Used as Adjunctive Agent in: Organophosphate Insecticides (OPIs)	Glycopyrrolate Bromide
Nerve agents.	(Robinul)
Reduction of urothelial toxicity in antineoplastic therapy	Mesna
(Cyclophosphamide)	
Used as Adjunctive Agent in: Catecholamine extravasation	Phentolamine mesylate
Intradigital epinephrine injection.	(Regitine)
Phentolamine also offers an additional option in the management of	
drug-induced hypertension.	
Used as Adjunctive Agent in: Dirty bomb agents: radioactive cesium	Prussian Blue/ Radiogardase
and thallium and non-radioactive thallium.	
Used as Adjunctive Agent in: Every potential alcoholic prevent and	Thiamine Hydrochloride
treat Wernicke encephalopathy	
Whole bowel irrigation for agents not bound by activated charcoal	Polyethylene glycol (Macrogol
e.g. iron, lithium, also for body packers and for slow release	'3350') Klean-Prep
preparations.	