



Title	Date April 29, 2026
Discipline/Version EMD / 14.0.406	CDE Credit Hours 0.5 Hours

I verify that I read and am familiar with the contents of this document.

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X _____
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WHERE TO GO WHEN...



Rules to Remember

It is essential to understand exactly what has happened when a caller is reporting a suicidal person or a person who has attempted to self-harm. The method of self-harm is critical when selecting the appropriate chief complaint.

The call is processed on Protocol 25 Psychiatric/ Suicide Attempt when a person is threatening self-harm, has intentionally cut themselves, is threatening to jump, or has already jumped. Protocol 25 focuses on the type of medical assistance the patient needs in the event of a suicide attempt; however, different methods of an intended suicide attempt may be better handled on a more appropriate Protocol.

If the actual type of suicide attempt is determined to be overdose, carbon monoxide, stab, or gunshot wound, go to and dispatch from the more specific protocol.

If the complaint description involves hazardous materials that pose a threat to bystanders or responders, go to Protocol 8.

Recreational inhalations of a potentially harmful substance should be handled on Protocol 23.



If a person has attempted suicide by taking a substance, regardless of the amount or type, the call is processed on Protocol 23 Overdose/ Poisoning (Ingestion). Protocol 23 will address both the unique scene safety concerns of an overdose or poisoning incident and the health concerns of these types of situations.

Callers often use the word overdose to refer to any ingestion of a potentially dangerous amount of a substance. In a dispatch environment, overdose refers to the intentional intake of a potentially harmful substance.

The intent of KQ 1 on Protocol 23, “Was this accidental or intentional?”, is to determine whether the patient may be suicidal or poses a potential threat to responders. This question helps classify the exposure into specific categories such as accidental (recreational intent), accidental (medication error), accidental poisoning (other), intentional self-harm, poison control request, or unknown.

We are trying to identify whether the patient accidentally took a substance –such as a medication error, an unintended exposure, or taking too much of something (poisoning)–versus intentionally ingesting something with the purpose of self-harm (overdose). For example, when a recreational drug user takes an unsafe amount or more than intended while seeking a high, this is classified as accidental (recreational intent) rather than intentional self-harm. Correctly distinguishing between these categories ensures the appropriate response, safety considerations, and level of care are provided.

KNOWLEDGE CHECK

Match the classification:

- A. Took too much medication by mistake.
- B. Took drugs to get high, but used too much.
- C. Took pills to intentionally harm themselves.
- D. Exposed to or ingested a harmful substance unintentionally.
- E. Seeking advice or guidance about a substance exposure, but no emergency yet.

- _____ Accidental (recreational intent)
- _____ Intent to harm self (Intentional)
- _____ Accidental (medication error)
- _____ Accidental poisoning
- _____ Poison Control Request

For each scenario, choose the correct answer to KQ 1 from the list above.

1. My husband took a double dose of his blood pressure meds because he forgot he already took them this morning. Now he feels dizzy.
2. My roommate was trying to get high and took way more than usual. Now he is barely responding.
3. My sister left a note and swallowed a bunch of pills. She said she didn't want to be here anymore.
4. My toddler got into a bottle of cleaning solution and drank some before I could stop them.
5. He says he just wanted to sleep and took extra pills, but now he won't wake up.
6. My friend has been feeling suicidal and just sent me a message saying he took a bunch of unknown pills.