

# POLICIES AND PROCEDURES

POLICY: 554.51 TITLE: Poisoning

EFFECTIVE: 07/01/2024 REVIEW: 07/2027

SUPERCEDES:

## APPROVAL SIGNATURES ON FILE IN EMS OFFICE

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# **POISONING**

I. <u>AUTHORITY</u>

Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9

II PURPOSE

To serve as a patient treatment standard for EMRs, EMTs, and Paramedics within their scope of practice.

III. PROTOCOL

Includes: Caustics/corrosives (alkalis, acids, oxidizers), petroleum distillates, and organophosphates

In the event of a release of nerve agents or organophosphates, notify dispatch to request the MHOAC order CHEMPACK.

Provider Key: F = First Responder/EMR E = EMT O = EMT Local Optional SOP

P = Paramedic D = Base Hospital Physician Order Required

## **NOTE: DO NOT INDUCE VOMITING**

ALL POISONINGS	F	Е	0	Р	D
PROTECT FROM CONTAMINATION	Χ	Χ	Χ	Χ	
DECONTAMINATION					
Remove contaminated clothing.					
<ul> <li>If agent is dry, brush off. If agent is liquid, flush with copious amounts of water.</li> </ul>	Х	Х	Χ	Χ	i
<ul> <li>If the eyes are contaminated flush with saline for at least 20 minutes.</li> </ul>					
ASSESSMENT	Χ	Χ	Χ	Χ	
<b>BLS AIRWAY:</b> okay if airway patent. Support ventilation as appropriate with appropriate airway adjuncts. Observe for airway burns.	Х	Х	Χ	Χ	
ADVANCED AIRWAY: if GCS is < 8 and not rapidly improving, consider:					
- SGA			Х	Х	
- or ETI			^	X	
PULSE OXIMETRY: apply and monitor.		Χ	Χ	Χ	
CAPNOGRAPHY: apply and monitor.				Χ	
*OXYGEN: if pulse oximetry <94% or signs of respiratory distress or	Х	Х	Х	Χ	
hypoperfusion.	^	^	٨	^	ı
ECG MONITOR: lead placement may be delegated. Treat as indicated.				Χ	
VASCULAR ACCESS: IV/IO, rate as indicated.				Χ	

**ONDANSETRON: 4 mg IM, slow IV, or 4 mg Oral Disintegrating Tablet (ODT) for nausea and/or vomiting. May be repeated twice. Max dose 12 mg.				X
CARBON MONOXIDE				
OXYGEN: 15-LPM via non-rebreather or BVM.	Χ	Χ	Χ	Χ
CPAP: as indicated.		Χ	Χ	Χ
ORGANOPHOSPHATES				
<b>CONSIDER ATROPINE</b> : 2-5 mg increments IV/IO or 2 mg IM. Repeat every 5 minutes as needed to control secretions, bradycardia, bronchorrhea, and dysrhythmia.				X
<ul> <li>MIDAZOLAM for seizures: Do not delay for IV/IO access. Closely monitor respirations/airway and support ventilation as indicated.</li> <li>IM/IN – 10 mg. May repeat x 1 if seizure continues &gt; 5 minutes.</li> <li>IV/IO - 1-2 mg every 2 minutes until seizure stops or max 10 mg.</li> </ul>				X
NASOGASTRIC TUBE: suction gastric contents – only if patient has advanced airway and oral ingestion has occurred within 60 minutes.  CAUSTICS/CORROSIVES/PETROLEUM DISTILLATES				Х
NASOGASTRIC TUBE: suction gastric contents – only if patient has advanced airway and oral ingestion has occurred within 60 minutes.				Х

<sup>\*</sup> Use oxygen with caution near any hazardous materials

## \*\*PRECAUTIONS FOR ONDANSETRON:

- Known Sensitivity to Ondansetron (Zofran) or other 5-HT-3 antagonists.
- Granisetron (Kytril)
- Dolasetron (Anzemet)
- Palonosetron (Aloxi)

#### **CARBON MONOXIDE**

- Carbon monoxide is an odorless, colorless, tasteless toxic gas. Carbon monoxide
  poisoning is easily misdiagnosed as flu-like symptoms, fatigue, or other general
  complaints. Common sources of carbon monoxide include motor vehicles, structure and
  wildland fires, gas-powered machines operating in closed spaces, improperly functioning
  wood-burning stoves, heaters, or furnaces and industrial sites. Untreated carbon
  monoxide may result in short and long-term health consequences.
- Refer to 554.81 BURNS and 554.82 TRAUMA AND TRAUMATIC SHOCK as indicated

#### **CAUSTIC CORROSIVES**

- Alkalis: sodium hydroxide (caustic soda), drain cleaners, potassium hydroxide, ammonium hydroxide (fertilizers), lithium hydroxide (photographic chemicals, alkaline batteries), calcium hydroxide (lime).
- **Acids:** hydrofluoric acid (which may have a delayed onset of symptoms), sulfuric acid (battery acid), hydrochloric acid.
- Oxidizers: bleach, potassium permanganate.
- Refer to 554.81 BURNS and 554.82 TRAUMA AND TRAUMATIC SHOCK as indicated

## **ORGANOPHOSPHATE**

- May cause bronchospasm, an increase in pulmonary and nasal secretions, constricted pupils, vomiting, diarrhea, urinary incontinence, diaphoresis, and cardiac dysrhythmias including both bradycardia and AV blocks.
- Remember the most spectacular signs by the following mnemonic: (Salivation, Lacrimation, Urination, Defecation, Gastric upset, Emesis and Miosis SLUDGEM.)
- Other useful mnemonics are, "MUDDLES:" Miosis, Urination, Defecation, Diaphoresis, Lacrimation, Emesis, Salivation; and "DUMBBELS": Diarrhea, Urination, Miosis/muscle weakness, Bronchorrhea, Bradycardia, Emesis, Lacrimation, Salivation/sweating.