MOUNTAIN-VALLEY EMS AGENCY POLICIES AND PROCEDURES

POLICY: 554.53 TITLE: Nerve Agent Exposure

SIGNATURE ON FILE IN EMS OFFICE APPROVED: EFFECTIVE DATE 4/15/2016 **Executive Director** SUPERCEDES:

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PAGE: $\overline{1 \text{ OF } 1}$ Medical Director

NERVE AGENT EXPOSURE

AUTHORITY: 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 EMTs and Paramedics within their scope of practice.

III. PROTOCOL: "Nerve Agent" means an extremely toxic organophosphate-type chemical, including GA (Tabun), GB (Sarin), GD (Soman), GF (Cyclosarin) and VX which attack the nervous system and interfere with chemicals that control nerves, muscles and glands. They are odorless, invisible and can be inhaled, absorbed through the skin or swallowed. This protocol applies to large-scale organophosphate poisonings. General treatment centers on terminating the exposure, patient decontamination, Chempack deployment,

STANDING ORDERS

DECONTAMINATE Decontaminate prior to patient contact

airway support and pharmacological treatment.

ASSESS CAB

SECURE AIRWAY Using the simplest effective method. A BLS airway with objective evidence of good ventilation and

oxygenation is adequate and acceptable. Consider intubation/perilaryngeal airway. Refer to General

Procedures Protocol 554.00

POSITIONING Position patient left lateral/recovery position

OXYGEN Oxygen delivery as appropriate.

MONITOR Treat rhythm as appropriate.

Rate as indicated. If systolic BP is <90mmHg, give 250cc boluses until systolic BP is 90-IV/IO ACCESS

100mmHg. Reassess patient after each bolus.

DETERMINE LEVEL OF

EXPOSURE

Mild: Rhinorrhea, Chest Tightness, Dyspnea, Bronchospasm

Moderate: SLUDGEM

Severe: SLUDGEM, Severe Dyspnea, Seizures, Agitation, Drowsiness, Coma, Staggering

Exposure/Symptoms	Treatment		
	Atropine	Pralidoxime (2-Pam)	
Asymptomatic	None (monitor patient)	None (monitor patient)	
Mild	Adult: 1 Auto Injector (2mg) IM.	Adult: One (1) Auto-injector (600 mg) IM IF	
	Pedi: DO NOT Administer	Signs and Symptoms do not resolve 5 minutes	
		after Atropine administration.	
		Pedi: DO NOT Administer	
Moderate	Adult: 2 Auto-injectors (4mg) IM.	Adult: 1 Auto-injector (600 mg) IM, may repeat	
	Pedi: DO NOT Administer	1x in 5-10 min. as needed.	
		Peds: DO NOT Administer	
Severe	Adult: 3 Auto-injectors (6 mg) IM.	Adult: 3 Auto-injectors (1.8 Gms) IM. <i>Do NOT</i>	
	Peds: 0.02mg/kg IV/IO/IM, minimum dose	repeat.	
	0.1mg, repeat as needed	Peds: 20-40mg/kg IV/IO/IM, max 1 gram IM,	
		repeat as needed	
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VALIUM (For Seizures) Adult: 2.5-10mg slow IV/IO push to control seizures, may repeat once for recurrent seizures. Max

dose 20mg.

Pedi: 0.1-0.3 mg/kg slow IV/IO, may repeat at 0.05-0.1mg/kg IV/IO. Max dose 10mg.