

POLICIES AND PROCEDURES

POLICY: 555.51

TITLE: Pediatric Poisoning

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

SUPERCEDES:

APPROVAL SIGNATURES ON FILE IN EMS OFFICE

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PEDIATRIC POISONING

I. 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 EMRs, EMTs, and Paramedics within their scope of practice.

III. PROTOCOL

Includes: Caustic 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.

NOTE: DO NOT INDUCE VOMITING

Provider Key: F = First Responder/EMR E = EMT O = EMT Local Optional SOP P = Paramedic D = Base Hospital Physician Order Required

ALL POISONINGS	F	Е	0	Р	D
PROTECT FROM CONTAMINATION	Х	Χ	Χ	Χ	
DECONTAMINATION:					
Remove contaminated clothing.	X	Х	Х	Х	
 If agent is dry, brush off. If agent is liquid, flush copiously with water. 	^		^	^	ı
 If the eyes are contaminated flush with saline for at least 20 minutes. 					
ASSESSMENT	Χ	Χ	Χ	Χ	
BLS AIRWAY: okay if airway patent. Support ventilation with appropriate	X	Х	Х	Х	1
airway adjuncts. Observe for airway burns.	^	^	^	^	
SUPRAGLOTTIC AIRWAY: if GCS is < 8 and not rapidly improving, consider				Х	
SGA.					
PULSE OXIMETRY: apply and monitor.		Χ	Χ	Χ	
CAPNOGRAPHY: apply and monitor if SGA has been placed.				Χ	
*OXYGEN: if pulse oximetry < 94% or signs of respiratory distress or	Х	Х	Х	Х	
hypoperfusion.	^	^	^	^	
ECG MONITOR: lead placement may be delegated. Treat as indicated.				Χ	
VASCULAR ACCESS: IV/IO, rate as indicated.				Χ	
ONDANSETRON: 0.15 mg/kg up to a maximum of 4 mg IM/IO/IV for a child					
over 6 months of age, or 4 mg Oral Disintegrating Tablet (ODT) for a child				Χ	
over 26 kg.					

	F	Е	0	Р	D			
CARBON MONOXIDE								
OXYGEN: 15 – LPM via non-rebreather or BVM.	Χ	Χ	Χ	Χ				
ORGANOPHOSPHATES								
ATROPINE: 0.05 mg/kg increments slow IV/IO/IM. Repeat every 5 minutes				х				
as needed to control secretions, bradycardia, bronchorrhea, and dysrhythmia.				^				
MIDAZOLAM: Do not delay for IV/IO access.								
 IM/IN: 0.2 mg/kg up to 10 mg every 5 minutes until seizure stops, max 								
total dose 20 mg.				Χ				
IV/IO: 0.1 mg/kg up to 5 mg every 2 minutes until seizure stops or max								
total dose 10 mg.								
NASOGASTRIC TUBE: suction gastric contents – only if patient has SGA				Х				
and oral ingestion has occurred within 60 minutes.				^				
PETROLEUM DISTILLATES								
NASOGASTRIC TUBE: suction gastric contents – only if patient has SGA					V			
and oral ingestion has occurred within 60 minutes. For PO Ingestion Only.					^			

^{*} Use oxygen with caution near any hazardous materials

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, gaspowered 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 BURNS P80 and TRAUMA and TRAUMATIC SHOCK A82 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 555.81 PEDIATRIC BURNS and 555.82 PEDIATRIC 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.