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 Executive Director

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NERVE AGENT EXPOSURE

- 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 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, airway support and pharmacological treatment.*

STANDING ORDERS	
DECONTAMINATE	Decontaminate prior to patient contact
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.
IV/IO ACCESS	Rate as indicated. If systolic BP is <90mmHg, give 250cc boluses until systolic BP is 90-100mmHg. 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. Pedi: DO NOT Administer	Adult: One (1) Auto-injector (600 mg) IM IF Signs and Symptoms do not resolve 5 minutes after Atropine administration. Pedi: DO NOT Administer
Moderate	Adult: 2 Auto-injectors (4mg) IM. Pedi: DO NOT Administer	Adult: 1 Auto-injector (600 mg) IM, may repeat 1x in 5-10 min. as needed. Peds: DO NOT Administer
Severe	Adult: 3 Auto-injectors (6 mg) IM. Peds: 0.02mg/kg IV/IO/IM, minimum dose 0.1mg, repeat as needed	Adult: 3 Auto-injectors (1.8 Gms) IM. <i>Do NOT repeat.</i> Peds: 20-40mg/kg IV/IO/IM, max 1 gram IM, repeat as needed

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.

