NORTH COAST EMERGENCY MEDICAL SERVICES

POLICIES AND PROCEDURES

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Subject: Treatment Guideline - ALS Provider

Nerve Agent Antidote Dosages

Associated Policies:

A. Authority and reference (incorporated herein by reference)

- A. Division 2.5 of the Health and Safety Code
- B. California Code of Regulations, Title 22
- C. North Coast Emergency Medical Services (NCEMS) Policies and **Procedures**

B. Procedure

- 1. Ensure personal safety.
- 2. Separate patient from causative agent.
 - a. Victim's clothing should be removed and isolated by personnel wearing proper personal protective equipment.

3. NOTES:

- a. For severely affected patients, do rapid decontamination and provide
- treatment.

 b. Victims should be decontaminated prior to transport whenever possible; patients with life threatening symptoms should receive rapid decontamination and transport.
- 4. ABCs/monitor cardiac rhythm.
- 5. Check pupil size.
- 6. Spinal immobilization if indicated.
- 7. IV access, rate titrated to perfusion as needed.

C. Nerve Agent Dosages

NORTH COAST EMERGENCY MEDICAL SERVICES

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Subject: Treatment Guideline - ALS Provider **Nerve Agent Antidote Dosages**

Associated Policies:

Suspected Nerve Agent Exposure:

•Mild/Moderate Symptoms:

- Mark I kits (Atropine 2 mg auto-injector and Pralidoxime 600 mg auto-injector).
- 1-2 Mark I kits, 1M at 10 minute intervals. Maximum 3 Mark I kits.
- If Mark I kits not available:
- Atropine: 2-4 mg IM/IV at 10 minute intervals as needed.

•Severe Symptoms:

- Mark I kits (Atropine 2 mg auto-injector and Pralidoxime 600 mg auto-injector):
- 3 Mark I kits, 1M in rapid succession.
- If Mark I kits not available:
- Atropine: 6 mg 1M/IV repeat as needed.

Elderly Patients (> 65 years of age) or those with underlying cardiovascular or renal disease:

- 1.0 mg 1M. Repeat doses may be given at base direction; IM or IV.
- Pralidoxime (2-PAM): 7.5 mg/kg 1M, maximum of 600 mg (one auto-injector) per dose. NOTE: Elderly patients must weigh at least 80 kg to receive 1 auto-injector of Pralidoxime.

Pediatric Patients (< 12 years):

• Atropine - 0-2 years: 0.5 mg IM $- \ge 2-12$ years 1.mg IM

- 0.02 mg/kg IVP, minimum of 0.1 IVP

• Pralidoxime (2-PAM) – 20 mg/kg IP or IVP

NOTE: Pediatric patients must weigh at least 30 kg to receive 1 auto-injector IM.

NOTES:

• If Pralidoxime (2-PAM) powder 1 Gm for reconstitution is available:

Reconstitute as directed by Base Hospital or use 20 ml sterile water without preservative to produce a concentration of 50 mg/mL.

Adult dose 1 Gm over 30 minutes IV of 600 mg-1Gm IM in divided injections if necessary. >65 yrs 7.5 mg/kg IM or IV. Max IV dose 1 Gm over 30 minutes. May repeat once in 1 hr. 20 mg/kg IM or IV. Max IV dose 1 Gm over 30 minutes. May repeat once in 1 hr. <12 yrs

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Just Caupell Approved as to Form: