

TITLE: MARK I KIT ADMINISTRATION

APPROVED: \_\_\_\_\_  
Executive Director  
  
\_\_\_\_\_  
Medical Director

CREATION DATE: 2/05  
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SUPERSEDES: \_\_\_\_\_  
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## MARK I KIT ADMINISTRATION FOR EMERGENCY RESPONDERS

### I. AUTHORITY

Health & Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9.  
California Code of Regulations, Title 19, Division 2, Articles 1-8, Sections 2400et seq.,  
Standardized Emergency Management System (SEMS) Regulations.

### II. DEFINITIONS

- “Emergency Responder” means a fire fighter, law enforcement officer, or emergency medical services personnel, including first responders, EMT-Is, and paramedics.
- “Mark I Kit” means a Nerve Agent Antidote Kit containing autoinjectors of 2 mg Atropine and 600 mg Pralidoxime Chloride (2-PAM).

### III. PURPOSE

The purpose of this policy to establish standards for Emergency Responders in the administration of Mark I Kit Auto-injectors in treating Emergency Responders with nerve agent exposures.

### IV. POLICY

- A. Mark I Kits shall only be utilized by individuals who are current employees or volunteers of an approved Mark I Provider Agency.
- B. Mark I Kits will be used only by approved Mark I Provider Agency personnel that have been trained in their use and have them available. Atropine may be administered IM/IV only by EMT-Ps in situations where MARK I Kits are not available.
- C. **Mark I Kits may only be administered to emergency responders. They are not to be utilized for the general public.**
- D. Nerve agent antidote medications are only given if an emergency responder is showing signs and symptoms of nerve agent poisoning. **THEY ARE NOT TO BE GIVEN**

**PROPHYLACTICALLY.**

This policy is to be used in conjunction with policy # 570.40 (Haz/Mat).Procedure

V. PROCEDURE

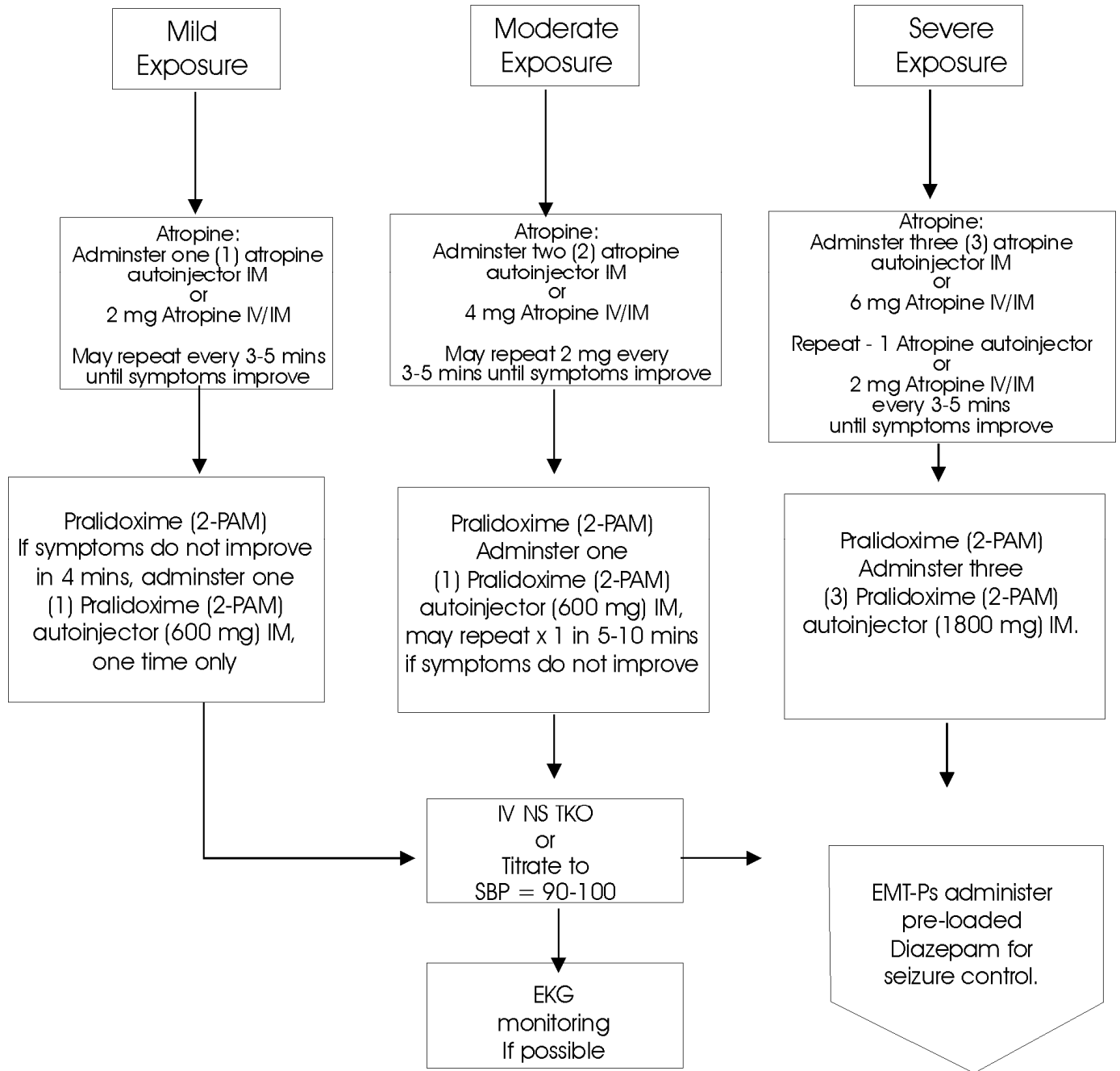
A. If exposure to nerve agents is suspected, evaluate emergency responders for signs and symptoms to determine severity of exposure using the following chart:

**Signs and Symptoms of Nerve Agent Exposure**

<u>EXPOSURE</u>	<u>SIGNS &amp; SYMPTOMS</u>
<b>Mild</b>	<ul style="list-style-type: none"><li>• Unexplained runny nose</li><li>• Tightness in the chest</li><li>• Difficulty breathing</li></ul>
<b>Moderate</b>	<ul style="list-style-type: none"><li>• Bronchospasm</li><li>• Pinpoint pupils resulting in blurred vision</li><li>• Drooling</li><li>• Excessive sweating</li><li>• Nausea and/or vomiting</li><li>• Abdominal cramps</li></ul>
<b>Severe</b>	<ul style="list-style-type: none"><li>• Involuntary urination and/or defecation</li><li>• Jerking, twitching and staggering</li><li>• Headache</li><li>• Drowsiness</li><li>• Coma</li><li>• Convulsions</li><li>• Apnea</li></ul>

**Mnemonic for Nerve Agent  
Exposure**  
**S**alivation  
**L**acrimation  
**U**rination  
**D**efecation  
**G**astrointestinal pain & gas  
**E**mesis

B. Administer the Mark I Kits using the following guide.



C. Submit an Unusual Occurrence report within 24 hours to Mountain-Valley EMS Agency.