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PEDIATRIC ORGANOPHOSPHATE POISONING

- I. AUTHORITY: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. PURPOSE: To serve as the treatment standard for EMT-Is and EMT-Ps in treating patients.
- III. PROTOCOL:

Organophosphate poisonings 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 and Emesis - **SLUDGE**.)

Other useful mnemonics are, "**MUDDLES**:" Miosis, Urination, Defecation, Diaphoresis, Lacrimation, Emesis, Salivation; and "**THE KILLER BEES**": Bronchorrhea and Bradycardia.

STANDING ORDERS

PROTECT YOURSELF FROM CONTAMINATION!

ABCs

REMOVE AGENT If agent is dry, brush off, then flush with copious amounts of water. If agent is liquid, flush with copious amounts of water. Remove and isolate contaminated clothing. All of the patient's secretions are toxic - flush off prior to transport. If possible, save container label.

SECURE AIRWAY As appropriate, confirm tube placement, if intubated, with end-tidal CO₂ detector and esophageal detector device. **Continuous waveform capnography should be used in all intubated patients, if available.**

MONITOR Treat rhythm as appropriate.

IV ACCESS TKO with microdrip tubing and volume control chamber. Myocardial depression and GI fluid losses may cause shock. If low systolic BP, give 20 ml/kg boluses to Broselow Tape systolic BP target. Reassess the patient after each bolus.

ATROPINE 0.05mg/kg IV/IO/ET/IM. Repeat every 3 minutes as needed to control secretions, bronchorrhea and dysrhythmias.

CONSIDER

MIDAZOLAM If seizing 0.1 mg/kg IV/IO to maximum dose of 5.0 mg. If unable to establish IV after 1 attempt, give 0.2 mg/kg IM to maximum dose of 5.0 mg. May repeat once in 10 minutes if seizures continue.

ACTIVATED CHARCOAL 1 gm/kg PO for oral ingestions if the patient is alert, protecting his/her airway, and has not ingested a CNS depressant. Maximum dose 50 gm.