	COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY	Document #	8029.15
	PROGRAM DOCUMENT:	Initial Date:	05/15/95
	Hazardous Materials	Last Approval Date:	03/26/24
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Signature on File	Signature on File
EMS Medical Director	EMS Administrator

Purpose:

A. To establish the treatment standard for patients exposed to hazardous materials in the prehospital setting.

Authority:

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

Special Note:

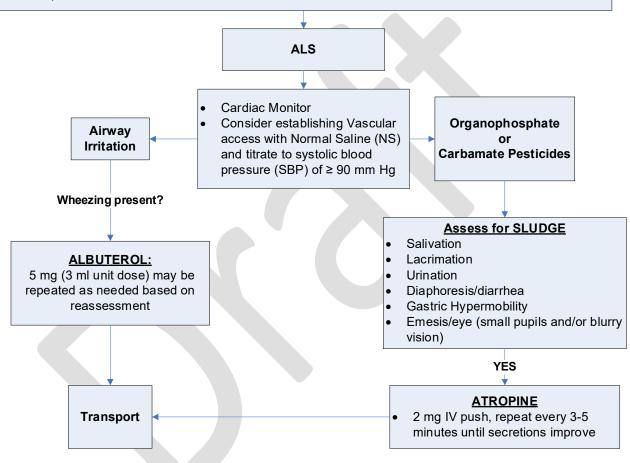
A. EMS providers should not enter any contaminated area if there is any suspected hazardous materials contamination. EMS providers should immediately activate a Fire Hazmat Response by contacting the Sacramento Regional Fire/EMS Communications Center (SRFECC).

Policy:

- A. Avoid contamination of Emergency Medical Service (EMS) providers and EMS transport equipment accept only decontaminated patients for transport.
- B. Do NOT enter the exclusion zone. A paramedic will not use specialized protective equipment/breathing apparatus unless they have been specifically trained in its use prior to the incident.
- C. When possible identify the suspected contaminant and notify the receiving hospital as soon as possible, so they may prepare to receive victims.
- D. In general, helicopter transport of contaminated patients is not appropriate.
- E. ALL patients without radiation will undergo primary decontamination at the scene.
- F. Radiation-contaminated patients with immediate injuries do not require extensive decontamination prior to transport.



- Supplemental O2 as necessary to maintain SpO2 ≥ 94%. Use lowest concentration and flow rate of O2 as possible.
- Airway adjuncts as needed.
- Precautions must be taken to prevent direct contact with secretions of a patient who has ingested organophosphates or carbamate pesticides. After the patient is fully decontaminated, cover patient with blankets or sheets as appropriate.
- Transport



Cross Reference: PD# 8027 – Symptomatic Nerve Agent Exposure – Treatment