

## How To Manage A Poisoning

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## What Is a Poisoning?

A poison is any substance whose chemical action can damage body structures or impair body function.



## Scene Size-Up

Why does this matter?

- Body substance isolation (BSI) precautions
- Evaluating scene safety
- Determining the severity
- Determining the total number of patients
- Determining the need for additional resources

## Primary Assessment Determine Life Threats

General Impression

L.O.C.

Airway

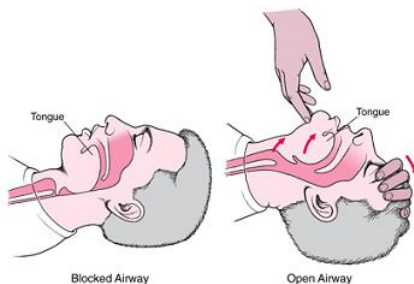
Breathing

Circulation

Remove from the source

## Airway

Maintain an open airway



## Breathing

Position of comfort

Assist as needed (comfort level)



## Circulation

Stop any obvious bleed (direct pressure)  
 Position patient  
 Compressions if needed

### Guide to Poisoning

Pyrethins - pyrethroids	Information
<b>Toxicity</b>	Rarely toxic
<b>Exposure</b>	Common exposure; rare poisoning; Inhalation
<b>Patho-physiology</b>	Allergic type reactions; Rapid metabolism leads to limited toxicity
<b>Sign and symptoms</b>	Upper airway irritation: runny nose – stuffy nose – sore throat; skin burning – irritation; nausea – vomiting - diarrhea
<b>Decontamination</b>	Remove from the source
<b>Treatment</b>	Supportive care
<b>Antidote</b>	No specific antidote

### Guide to Poisoning

Organophosphates	Information
<b>Toxicity</b>	Toxicity will vary by potency
<b>Exposure</b>	Absorbed by ingestion; inhalation; skin penetration
<b>Patho-physiology</b>	Inhibits the chemical that allows the parasympathetic nervous system to function correctly; after hours the toxicity is irreversible
<b>Sign and symptoms</b>	<b>D</b> – defecation; <b>U</b> – urination; <b>M</b> – Miosis; <b>B</b> –bradycardia / Bronchorrhea / Bronchospasm; <b>E</b> – emesis; <b>L</b> – lacrimation; <b>S</b> – salivation / seizures
<b>Decontamination</b>	Use body substance isolation; rinse with soap and water if possible
<b>Treatment</b>	Focus on decontamination; manage the airway; use the antidote
<b>Antidote</b>	Atropine, 2 - PAM

### Guide to Poisoning

NEONICOTINOID	Information
<b>Toxicity</b>	Case of fatality after exposure have been identified
<b>Exposure</b>	Ingestion; skin exposure; inhalation
<b>Patho-physiology</b>	Binds with receptor in parasympathetic system to produce effect
<b>Sign and symptoms</b>	N / V / D – Abdominal pain – bradycardia – salivation – deep breathing – bronchorrhea –muscle spasms –confusion - seizures
<b>Decontamination</b>	Rinse as needed
<b>Treatment</b>	Manage the airway;
<b>Antidote</b>	Atropine

### Guide to Poisoning

Carbamate Pesticides	Information
<b>Toxicity</b>	Toxicity will vary by potency; exposure is common; death is rare
<b>Exposure</b>	Inhalation; skin penetration
<b>Patho-physiology</b>	Inhibits the chemical that allows the parasympathetic nervous system to function correctly; the big difference from organophosphates is it is reversible
<b>Sign and symptoms</b>	<b>D</b> – defecation; <b>U</b> – urination; <b>M</b> – Miosis; <b>B</b> –bradycardia / Bronchorrhea / Bronchospasm; <b>E</b> – emesis; <b>L</b> – lacrimation; <b>S</b> – salivation / seizures
<b>Decontamination</b>	Use body substance isolation; rinse with soap and water if possible
<b>Treatment</b>	Focus on decontamination; manage the airway; use the antidote
<b>Antidote</b>	Atropine, 2 - PAM

