



CO & Cyanide Poisoning

Adult Medical

Austin County
EMS Protocol & Guideline

Version: **1.0**

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Overview: Overdoses can be accidental or intentional, the management of these patients should first be focused on provider safety, then what substances were used and how did it affect the patient. It is impossible to place every type of overdose in this guideline; utilization of outside resources like Poison Control can lead you to a better understanding of the situation and how to treat accordingly

EMT

- Airway/Oxygen appropriate for condition
- Acquire 12 lead
- Confirm and document CO reading if RAD 57 is available. Continuously monitor.
- Immediate CPAP for all suspected CO poisoning. Do not withhold CPAP for CO reading or arrival of RAD 57.
- CO >3%: Assess for Loss of consciousness and/or neurologic impairment. If either present, transport to a Medical Center with hyperbaric chamber by Helicopter if available.
- CO > 25% regardless of symptoms, transport to a Medical Center with a hyperbaric chamber by Helicopter if available.
- If Helicopter is not available, transport by ground to a Medical Center with hyperbaric chamber available.

****Memorial Hermann Medical Center****

AEMT

- Establish IV of Normal Saline

Paramedic

- **Hydroxocobalamin (Cyanokit)** -5 Grams over 15 minutes (For 5 grams administer 2 vials. Each vial to be reconstituted with 100 ml normal saline containing 2.5 grams. Administer over 7.5 minutes each)
- **RSI if indicated**

PEARLS

- Headache, Dizziness, Irritability, Confusion, Disorientation, Nausea/Vomiting, Chest pain, Seizures, Coma, Altered Mental Status, Dyspnea, Tachypnea, Bradypnea, Hypertension/Hypotension, Unconsciousness, Dilated Pupils, Cardiac Arrest