

Omaha Metro Medical Response System©



For Information or References call the Nebraska Regional Poison Center: (402) 955-5555 or 1-800-222-1222

NBC = Nuclear: Biological: Chemical

NBC* Agents Overview©

	- 1	Name of Agent	Method of Exposure	Rate of Action & Odor	Symptoms	Treatment Plan
	Į.		metriod or Exposure			
gents		Sulfur Mustard	Skin contact or Inhalation	Delayed (2-24 hours) -almond, garlic, mustard	No immediate symptoms. Eye pain, gritty eyes, reddened skin, large fluid- filled blisters	Provider Protection +Level B PPE +Decon with water
Blistering Agents		Lewisite	Skin contact or Inhalation	Rapid - <i>garlic</i>	Immediate pain, eye and lung burning, bee-sting blisters, grayish skin	+Prevent infections with antibiotics +Apply lotions/ointments
Blisi		Nitrogen Mustard	Skin contact or Inhalation	Rapid - <i>almond, garlic, mustard</i>	Eye pain, gritty eyes, reddened skin, large fluid-filled blisters, respiratory damage; smells like almonds	to soothe blisters
Irritant Gases		Phosgene Ammonia Chlorine	Skin contact or Inhalation	Rapid and Delayed -Pungent odor	Extremely irritating to eyes, skin, and upper respiratory system. Can cause delayed onset of pulmonary edema	Administer oxygen, IV fluids, & bronchodilators
		Tabun Soman	Skin contact or Inhalation	Very rapid for inhalation Delayed up to 18 hours	Mild: miosis, rhinorrhea, shortness of breath, chest tightness, sweating &	Provider Protection +Level B PPE
Agents		Sarin VX	Skin contact or Inhalation	with dermal	fasciculations at site of liquid contact Moderate : wheezing, profuse airway secretions, respiratory distress,	+Decontaminate +Ventilation +Antidotes
Nerve		Organophosphates (Pesticides)	Skin contact, Inhalation, or Ingestion	-Soman: camphor, fruity -Sarin,VX: odorless -Pesticides: garlic	muscle weakness, vomiting, diarrhea Severe : unconsciousness, seizures, flaccid paralysis, cyanosis, apnea	+Supportive Therapy +Med treatment on back
Cyanide		Cyanide	Ingestion Inhalation	Rate of RXN=Rapid -almonds -Smoke inhalation	Flushing, headache, tachycardia, resp. depression, obtundation, coma, lethargy, death can occur in <5 min.	+Maintain airway; Admin oxygen immediately +Med treatment on back
ses		Smallpox Variola virus	Inhalation Person contact	Incubation 12 -17 days Pox lesions form 2-3 days Pox are deep, firm/hard, round	HIGHLY INFECTIOUS! Febrile prodrome (fever >102, headache, backache, chills, vomiting, abdominal pain), first lesions appear in oral mucosa, face, forearms	Protect ALL & Vaccinate +Do NOT Vaccinate pregnant +PPE = N95 mask +Completely protect skin & mucous membranes
Viruses		Ebola, Marburg Viral Hemorrhagic Fevers	Inhalation Person contact	Rate of reaction= variable	HIGHLY INFECTIOUS! Fever, myalgias, flushing, petechiae, bleeding, hypotension, shock	Provider Protection +PPE=N-95 mask +Completely protect skin & mucous membranes +Intensive supportive care
ins		Botulism Botulinum toxin	Ingestion Inhalation Open Wounds	*Rapid (24-36 hours) *Illness length may be prolonged	Weakness, dizziness, dry mouth, blurred vision, progressive weakness of muscles - to paralysis and abrupt respiratory failure	+Aggressive Resp. Support +Rapid use of antitoxin +Med treatment on back
Toxins		Ricin Castor Bean Toxin	Inhalation, Ingestion, Injection	18 –24 hours	Inhalation-coughing, chest tightness, weakness, fever Ingestion-Nausea, vomiting, diarrhea, abdominal pain, fever	+Supportive care +For Ingestion - charcoal
		Tularemia Francisella tularensis	Inhalation Open Wounds	Incubation 1-10 days	No person-to-person transmission Fever, headache, malaise, general discomfort, irritating cough, weight loss. 30% mortality rate	+Med treatment on back
eria		Anthrax Bacillus anthracis	Inhalation Ingestion Cutaneous	Incubation is 1-6 days Toxic shock and death within 2-3 days	No person-to-person transmission Contact with spores may cause illness Inhalation: Fever & fatigue, then a slight improvement then an abrupt onset of resp problems (cough, mediastinitis, dyspnea)	Provider Protection from spores +PPE = N95 mask +Completely protect skin & mucous membranes +Med treatment on back
Bacteria				Reactivation of spores up to 60 days	Ingestion: Abdominal distress with/out bloody vomiting or diarrhea Cutaneous: Presents with a painless black, necrotic. eschar with redness and edema	+Aggressive treatment for suspected inhalation.
		Plague Yersinia pestis	Inhalation	Incubation is 2-10 day	HIGHLY INFECTIOUS! Malaise, high fever, tender lymph nodes, skin lesions, chills, headaches, bloody sputum, pneumonia, circulatory failure and death	Provider Protection +PPE = N95 mask +Completely protect skin & mucous membranes +Med treatment on back
Radiation		Radiation	Amount of time exposed, internal versus external, and distance from the irradiation	Slow progression -Thallium: garlic	Nausea, vomiting, severe burns, fatigue, reduced white blood cells ID of radiation type is crucial for treatment: <i>Iodine, Cesium, Thallium, Plutonium, Americium, Curium</i>	Provider Protection +External decon with water +Med treatment on back

*NBC Quick Reference Guide

Treatment for Mass Casualties & Post-Exposure Prophylaxis®

Site

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Therapeutic Disclaimer

Questions regarding treatment, alternative drugs or dosing recommendations for infants, pediatrics or other specialized populations should be referred to the Nebraska Regional Poison Center 402-955-5555 or 800-222-1222 for the most current guidelines.

Cyanokit® (Hydroxocobalamin)

Adult 5 grams IV over 15 min. Repeat 5 grams if no improvement **Child** 70 mg/kg IV (pediatric dosing not FDA approved)

Reconstitute each vial with 200 ml of NS. Administer through separate IV Causes red skin and urine

Sodium Thiosulfate IV can be used as adjunctive

OO NOT administer through same IV line as Cyanokit

Adult 50 mL 25% solution IV; Child 1.65 mL/kg 25% solution IV, over 10-20 min.

Atropine Sulfate*

Cyanide

Nerve Agents

Radiation

Adult 2 mg IV or IM q 2-5 min. until resolution of

muscarinic signs (bronchospasms & XS secretions)

0.02 mg/kg (minimum of 0.1 mg) IV/IM until resolution of muscarinic signs (bronchospasms & XS secretions)

AtroPEN (atropine) 0.5 mg IM Auto-Injector 6-18 kg (13-40 lbs) 1 Pen (0.5 mg) 19-28 kg (41-62 lbs) 2 Pens (1 mg)

29-38 kg (63-84 lbs) 3 Pens (1.5 mg) >38 kg (>84 lbs) 4 Pens (2 mg)

*Repeat entire dose every 5 minutes for muscarinic signs

Pralidoxime Chloride (2-PAM or Protopam)

Adult 30 mg/kg (up to 2 gm) IV; follow with infusion: 8 to 10 mg/kg/hr **Child** 30 mg/kg (up to 2 gm) IV; follow with infusion: 10 to 20 mg/kg/hr Administration over 30 minutes may minimize side effects

(hypertension, headache, nausea/vomiting, blurred vision)***

Mark I Kit/DuoDote (Auto-Injectors)

Mark I Kit consists of 2 auto-injectors; DuoDote is a single auto-injector Both Contain: Atropine 2 mg & Pralidoxime 600 mg

Adult Dosages ONLY: Mild exposure 1 Kit or DuoDote Moderate exposure 2 Kits or DuoDotes

Severe exposure 3 Kits or DuoDotes Diazepam (Valium) Lorazepam is better absorbed for IM route **Adult** 5 to 10 mg IV/IM May repeat q 5-10 min as needed for seizures

Child 0.2 to 0.5 mg/kg IV/IM May repeat q 5 to 10 min

Lorazepam (Ativan) Alternative to Diazepam

Adult 2 to 4 mg IV/IM May repeat q 5 to 10 min as needed for seizures Child 0.05 to 0.1 mg/kg IV/IM May repeat q 5 to 10 min

Ouration of treatment is until no evidence of radiation exist

Exposure to **Iodine radiation**

Oral Potassium Iodide (KI or SSKI)

Adult or adult sized adolescents 130 mg PO or 0.13 mL of SSKI PO

0-1 month: 16 mg; > 1 month - 3 years: 32 mg 3 years to 18 years: 65 mg

Immediate dosing before or after exposure can block up to 90% 3-4 hours post-exposure dosing can provide only a 50% block CAUTIOUS USE with SHELLFISH ALLERGY or PREGNANCY

Exposure to Cesium or Thallium radiation

Oral Prussian Blue (ferric hexacyanoferrate II)

om **REAC/TS** (865) 576-1005 or Heyltex 281-395-7040

Adult Initially start 3 gm PO 3 times a day; reduce dose to 1 gm orally 3 times a day once Cesium counts <1Gy or Thallium counts <1 mg/24hr Child (2 to 12 years) – Initially start 1 gm orally 3 times a day *capsules may be opened and sprinkled on food for ease of administration

Exposure to Plutonium, Americium, or Curium radiation

Ca-DTPA (pentetate calcium trisodium) injection - FIRST

Adult 1 gm IV over 3-5 minutes x 1

Child (<12 years) 14 mg/kg IV over 3 to 5 min not to exceed 1 gm Zn-DTPA (pentetate zinc trisodium) injection - Maintenance

Adult 1 gm IV over 3 to 5 minutes, refer to PI for duration ●

Child (<12 years) 14 mg/kg IV over 3 to 5 min not to exceed 1gm ● •Refer to package insert for suggested supplements & duration of treatmen

Hemopoietic Syndrome

filgrastim (Neupogen®) – 5 mcg/kg SQ daily up to 2 weeks

BAL-in-Oil (Dimercaprol)

Available from Akorn Inc. 800-932-5676 ext. 7

Adult & Child 2 to 4 mg/kg/dose IM every 4 to 12 hours The dose & frequency dependent upon symptom severity Contraindicated in patients with a PEANUT ALLERGY

Succimer (Chemet)

Adult & Child 10 mg/kg PO every 8 hours for 5 days, then every 12 hours for the next 14 days

Live Smallpox Vaccine

Available from the CDC (770) 488-7100 or Obtain through local County or State Health Departments

Vaccine used prophylactically or for post-exposure up to 96 hours

Contraindications—allergies: latex, polymyxin-B, dihydrostreptomycin, chlortetracyline; or the following: heart disease, eczema, use of systemic corticosteroids (>2 mg/kg or >20 mg/day prednisone for >2 weeks), use of immunosuppresive drugs, radiation therapy, HIV+, immunosuppresive diseases, pregnancy or household contacts of mentioned disease states

Vaccine Reaction Treatment

Vaccinia IG 0.6 mL/kg IM, may increase to 1-10 mL/kg IM divided doses depending on symptoms Available from CDC (770) 488-7100

Heptavalent Botulinum Antitoxin (HBAT)

Available from the CDC (770) 488-7100

Prior to dose draw diagnostic lab for toxin sub type ABE and test for equine serum reaction

Dose: Administer 1 vial slowly IV in a 1:10 dilution with 0.9% normal saline (may also give a dose of 1 vial IM),

Adverse effects include anaphylaxis and serum sickness

Treatable if Antibiotics started within 24 hours Doxycycline (Vibramycin®)

Adult 100 mg IV or PO every 12 hours Use IV for Life-threatening illness

Child If < 45 kg: 2.2 mg/kg PO or IV every 12 hours If \geq 45 kg: 100 mg PO or IV every 12 hours

Ciprofloxacin (Cipro®)

Adult 400 mg IV every 12 hours for life-threatening illness 500 mg PO every 12 hours

Child 15 mg/kg PO **or** IV every 12 hours

Not to exceed 1 gm/day

Levofloxacin (Levaquin®) Adult 750 mg PO or IV q 24 h

Child <50 kg 8 mg/kg up to 250 mg PO or IV q 12 h

Amoxicillin (Amoxil®) (If strain susceptible)

Adult 1 gram PO every 8 hours

Child If \leq 20 kg: 25 mg/kg PO or >20 kg: 1 gram every 8 hours

Anthrax Immune Globulin (Anthrasil™): adjunctive for inhal anthrax

Plague Duration of treatment is 10 days Tularemia Duration of treatment is 14 days

Contained Treatment ONLY

Gentamicin PREFERRED

Adult Gentamicin, 5 mg/kg IM or IV every 24 hours

Alternative Choices

Doxycycline, 100 mg IV every 12 hours

Chloramphenicol, 25 mg/kg IV every 6 hours

Ciprofloxacin, 400 mg IV every 12 hours

Child Gentamicin, 2.5 mg/kg IM or IV every 8 hours

Alternative Choices

Doxycycline: If weight >= 45 kg, 100 mg IV; every 12 hours If weight < 45 kg, 2.2 mg/kg IV every 12 hours

Chloramphenicol, 25 mg/kg IV every 6 hours

Ciprofloxacin, 15 mg/kg IV every 12 hours Mass Casualty Setting and Postexposure Prophylaxis

Doxycycline (Vibramycin®)

Adult 100 mg PO or IV every 12 hours

Child If <45 kg: 2.2 mg/kg, If ≥45 kg: 100 mg PO **or** IV every 12 hours

Ciprofloxacin (Cipro®)

Adult 500 mg PO every 12 hours or 400 mg IV every 12 hours

Child 15 mg/kg PO or IV every 12 hours *Not to exceed 1gm/day**

Levofloxacin (Levaquin®)

Adult 500 mg to 750 mg PO or IV q 24 h

Child <50 kg 8 mg/kg up to 250 mg PO or IV every 12 hours

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Plague

Fularemia

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