

Protecting and improving the nation's health

Public health messaging has not changed, the risk remains low, but is being kept under constant review

Diagnosis and early management in organophosphate chemical incidents

If concerned seek advice early call 999.

Recognising the release of a chemical

Visual indicators of a chemical event may include all or some of the following:

- step 1, 2, 3 plus triggers
- dead or distressed people and animals
- individuals showing unexplained signs of skin, eye or airway irritation, breathing difficulties, nausea, vomiting, sweating, blurred painful vision, disorientation, fitting, or unconsciousness
- the obvious presence of hazardous materials (smell, taste or appearance) or unusual materials/equipment
- unexplained vapour, mist clouds, oily droplets or films on surfaces or water

Clinical Symptoms that may be associated with Nerve agent (organophosphate poisons)

- Nausea & vomiting
- Headache
- Disordered mental state
- Blurred/painful vision
- Involuntary faecal incontinence

Clinical response if you know, or strongly suspect, that your patient has been involved in a chemical incident

- Ensure that you are wearing appropriate personal protective equipment (PPE)
- Decontaminate patient if needed and if this has not already been done (at scene, or outside accident and emergency department in designated NHS decontamination facilities/decontamination area)
- Stabilise using standard guidelines (e.g. ABCDEs):
 - airway (stabilise using standard guidelines (ABCs)) supraglottic airways such as iGel preferred to intubation
 - breathing (high flow rate oxygen by mask; ventilate if needed)
 - control any haemorrhage, set up IV access and provide fluid resuscitation if needed
- Use the Initial Operational Response (IOR) method to coordinate emergency service actions https://www.england.nhs.uk/ourwork/eprr/hm/#ior

SEEK ADVICE: Call 999