



**\*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/epr/hm/#ior>

**SEEK ADVICE: Call 999**