

**REGION I EMERGENCY MEDICAL SERVICES
STANDING MEDICAL ORDERS
BLS**

SMO: Methyl Bromide

Revised Date:

Overview: Methyl bromide, a colorless gas at room temperature, is used primarily as a pesticide to fumigate soil, structures and commodities. It usually is shipped as a liquefied, compressed gas. It is odorless and nonirritating at low concentrations and has a musty or fruity odor at high concentrations. Because methyl bromide lacks adequate physiologic warning properties, a lacrimator often is added to prevent significant exposure. Methyl bromide is three times heavier than air and can accumulate in poorly ventilated or low-lying areas. Methyl bromide is primarily a neurotoxic gas causing disruption at the cellular level. All suspected or confirmed cases of methyl bromide intoxication must be reported to the local department of public health and the Illinois Department of Public Health.

INFORMATION NEEDED

- History of present illness
- Liquid or gas exposure
- Length of exposure
- How many patients
- What decontamination procedures have already or are being done

OBJECTIVE FINDINGS

- **Skin:** High concentrations may cause skin redness, pain and blisters. Because of their relatively larger surface area and body-weight ratio, children are more vulnerable to toxicants absorbed through the skin
- **HEENT:** Mucosal irritation and burns of eyes, mouth and nose may occur
- **GI:** Nausea, vomiting and diarrhea may occur after exposure
- **Renal:** Transient renal insufficiency may occur
- **Pulmonary:** Upper respiratory tract irritation, cough and chest tightness may be seen. Prolonged increased exposure may cause pulmonary edema and may be delayed up to 4 to 5 days. Children may be more vulnerable because of relatively increased minute ventilation per kilogram and failure to evacuate an area promptly when exposed
- **Cardiovascular:** High concentrations may cause tachycardia and hypotension
- **CNS:** The most common signs/symptoms of acute intoxication are neurologic and may include dizziness, headache, confusion, lethargy, seizures and coma

BLS

- Patients exposed only to methyl bromide gas pose no risk of secondary contamination and need only removal of clothing

- ___ Patients whose skin or clothing is contaminated with liquid methyl bromide can secondarily contaminate others by direct or through off-gassing of vapors. These patients must have clothing removed and be decontaminated with soap and water
- ___ Gloves and masks should be used by all EMS personnel
- ___ Assess the patient for any medical or trauma issues
- ___ Provide supplemental oxygenation by nasal cannula at 2-6 LPM or by non-rebreather mask at 10-15 LPM
- ___ Assist ventilations as needed
- ___ Assess the patient's airway and provide a manual or mechanical airway as required
- ___ Vital signs
- ___ Pulse oximetry
- ___ Call for ILS or ALS support if there are any respiratory problems with the patient
- ___ If pulmonary edema, wheezing or bronchospasm are present, an Albuterol nebulizer treatment may be given to the patient

Documentation of adherence to protocol:

- ___ History of present illness
- ___ Oxygen provided
- ___ Airway provided

Medical Control Contact Criteria

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| <ul style="list-style-type: none">___ • Contact Medical Control as soon as possible and prior to giving any medications___ • Contact Medical Control and ask for ILS or ALS support if there are any respiratory problems with the patient or patients |
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**REGION I EMERGENCY MEDICAL SERVICES
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ALS**

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ALS

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- ___ Gloves and masks should be used by all EMS personnel
- ___ Assess the patient for any medical or trauma issues
- ___ Provide supplemental oxygenation by nasal cannula at 2-6 LPM or by non-rebreather mask at 10-15 LPM
- ___ Assist ventilations as needed
- ___ Assess the patient's airway and provide a manual or mechanical airway as required
- ___ Vital signs
- ___ IV of N.S. for patients with fluid loss from vomiting
- ___ If the patient is displaying pulmonary problems, wheezing/bronchospasm, Albuterol nebulizer treatment may be given
- ___ Cardiac monitor
- ___ Pulse oximeter
- ___ If seizures are occurring, provide an IVP of Diazepam

Documentation of adherence to protocol:

- ___ History of present illness
- ___ Oxygen provided
- ___ Airway provided
- ___ Medications provided
- ___ ECG rhythm strip

Medical Control Contact Criteria

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|--|
| <ul style="list-style-type: none">___ • Contact Medical Control as soon as possible___ • Contact Medical Control prior to providing any medications |
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