



DUODOTE AUTO-INJECTOR



Escambia County, Florida - ALS/BLS Medical Protocol



Hazardous Material (WMD) use only

Indications

The DuoDote may be administered by the EMT or Paramedic who have had adequate training in the on-site recognition and treatment of nerve agent exposure.

Chemical nerve agents and organophosphorus insecticides can harm people through contact with the skin or eyes and by ingestion or inhalation. A person's clothing can also absorb and re-release toxic vapors from these compounds for about 30 minutes after contact, which can expose more people to the nerve agent. Because vapors from some nerve agents and insecticides are heavier than air, they can sink to low-lying areas and create a greater exposure hazard there.

Within minutes of exposure, people can begin to experience symptoms of chemical nerve agent or insecticide poisoning. Mild symptoms will be observed before severe symptoms. Severe symptoms will appear within 5 minutes after significant inhalation exposure. Death can occur within 5 minutes after the onset of seizures and respiratory arrest.

MILD SYMPTOMS:


- Blurred vision, miosis (excessive constriction of the pupils)
- Excessive, unexplained teary eyes



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- Excessive, unexplained runny nose
- Increased salivation, such as sudden drooling
- Chest tightness or difficulty breathing
- Tremors throughout the body or muscular twitching
- Nausea and/or vomiting
- Unexplained wheezing, coughing, or increased airway secretions
- Acute onset of stomach cramps
- Tachycardia or bradycardia (abnormally fast or slow heartbeat)

A quick-reference mnemonic for use in the field is OBSERVE:

Others affected suddenly
Body tremors/twitching
Salivation
Eye tearing
Restricted breathing
Vomiting
Excessive sweating

SEVERE SYMPTOMS:

- Strange or confused behavior
- Severe difficulty breathing or copious secretions from lungs/airway
- Severe muscular twitching and general weakness
- Involuntary urination and defecation
- Convulsions
- Loss of consciousness
- Respiratory arrest (possibly leading to death)


As soon as symptoms of organophosphorus poisoning are identified, treatment should be administered immediately. DuoDote Auto-Injectors are indicated for the treatment of poisoning by organophosphorus nerve agents as well as organophosphorus insecticides.



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Contraindications

DuoDote Auto injector should not be used for pediatric patients less than 8 years of age.

Dosage

Each DuoDote Auto-Injector Dose Contains:

- Atropine, 2.1 mg/0.7 mL
- Pralidoxime chloride, 600 mg/2 mL

For Patients Exhibiting Mild Symptoms:

First Dose: In the situation of known or suspected organophosphorus poisoning, administer 1 DuoDote injection into the mid-lateral thigh if the patient experiences 2 or more MILD symptoms of nerve gas or insecticide exposure.

Emergency medical services personnel with mild symptoms may self-administer a single dose of DuoDote.

Wait 10 to 15 minutes for DuoDote to take effect.

If, after 10 to 15 minutes, the patient does not develop any SEVERE symptoms, no additional DuoDote injections are recommended, but definitive medical care should ordinarily be sought immediately. For emergency medical services personnel who have self-administered DuoDote, an individual decision will need to be made to determine their capacity to continue to provide emergency care.


Additional doses: If, at any time after the first dose, the patient develops any SEVERE symptoms, administer 2 additional DuoDote injections in rapid succession, and immediately seek definitive medical care.



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For Patients Exhibiting Severe Symptoms

If a patient has any **SEVERE** symptoms, immediately administer **3** DuoDote injections into the patient's mid-lateral thigh in rapid succession, and immediately seek definitive medical care.*

No more than 3 doses of DuoDote should be administered unless definitive medical care (eg, hospitalization, respiratory support) is available.

Emergency care of the severely poisoned individual should include removal of oral and bronchial secretions, maintenance of a patent airway, supplemental oxygen, and, if necessary, artificial ventilation.

An anticonvulsant such as diazepam may be administered to treat convulsions if suspected in the unconscious individual.[†] The effects of nerve agents and some insecticides can mask the motor signs of a seizure.

Close supervision of all severely poisoned patients is indicated for at least 48 to 72 hours.

* Limit of 3 doses is specific to the pralidoxime component of DuoDote. If necessary, additional doses of AtroPen (atropine) Auto-Injector can be administered if the 3 doses of DuoDote do not produce an adequate response.

[†]Diazepam is recommended in addition to DuoDote if symptoms include convulsions.

Procedure

Before Injecting

Important: Do not remove Gray Safety Release until ready to use.

CAUTION: Never touch the Green Tip (Needle End).


1. Tear open the plastic pouch at any of the notches. Remove the DuoDote Auto-Injector from the pouch.



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2. Place the DuoDote Auto-Injector in your dominant hand. (If you are right-handed, your right hand is dominant.) Firmly grasp the center of the DuoDote Auto-Injector with the Green Tip (Needle End) pointing down.
3. With your other hand, pull off the Gray Safety Release. The DuoDote Auto-Injector is now ready to be administered.



Select Site and Inject

4. The injection site is the mid-outer thigh area. The DuoDote Auto-Injector can inject through clothing. **However, make sure pockets at the injection site are empty.**
5. Swing and firmly push the Green Tip straight down (a 90° angle) against the mid-outer thigh. Continue to firmly push until you feel the DuoDote Auto-Injector trigger.


IMPORTANT: After the auto-injector triggers, hold the DuoDote Auto-Injector in place against the injection site for approximately 10 seconds.



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After Injecting

6. Remove the DuoDote Auto-Injector from the thigh and look at the Green Tip. If the needle is visible, the drug has been administered. If the needle is not visible, check to be sure the Gray Safety Release has been removed and repeat the previous steps beginning with Step 4, but push harder in Step 5.
7. After the drug has been administered, push the needle against a hard surface to bend the needle back against the DuoDote Auto-Injector.
8. Put the used DuoDote Auto-Injector back into the plastic pouch, if available. Leave used DuoDote Auto-Injector(s) with the patient to allow other medical personnel to see the number of DuoDote Auto-Injectors administered.
9. Immediately move yourself and the patient away from the contaminated area and seek definitive medical care for the patient.




Meridian Medical Technologies, <http://www.meridianmeds.com/how.html>



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