Pediatric Carbon Monoxide/Cyanide

For suspected or known carbon monoxide exposure

History

- · Industrial or closed space fire
- · Facial burns
- Previous CO poisoning
- Propane powered equipment (e.g., power mower, tractor, gas powered equipment)
- Gas home heaters, natural gas stoves, kerosene heaters
- Gas clothes dryer or hot water heater
- Multiple people or pets with similar symptoms

Signs and Symptoms

- AMS
- Malaise/Fatigue
- Flu-like symptoms
- Weakness
- Headache
- Dizziness
- Blurred vision
- Ataxia
- Seizure
- Nausea/vomiting/cramping
- · Chest pain

Differential

- Diabetic emergency
- Infection/sepsis
- Myocardial infarction
- Anaphylaxis
- Renal failure
- · Head injury/trauma
- Ingestion/toxic exposure

Immediately remove from exposure

Airway support

High flow Oxygen regardless of SpO2

Blood glucose analysis

Cardiac monitor

CO-oximetry (SpCO), if available

12-Lead ECG

P Consider, IV

Consider EtCO2 monitoring

Consider, Normal Saline bolus

Use length-based tape; refer to dosing guide

May repeat x2

Notify receiving facility.
Consider Base Hospital for medical direction

Emergency Hyperbaric Chambers
John Muir Medical Center –
Walnut Creek

Pearls

- CO is colorless and odorless.
- Pulse oximetry will likely be normal with CO toxicity.
- Hyperbaric oxygen is recommended for those with AMS, seizure, coma, focal deficits, blindness, CO levels > 25% or
 > 20% if pregnant. John Muir Medical Center Walnut Creek is the only emergency hyperbaric chamber in the Bay Area. Contact the Base Hospital for direction.
- Consider cyanide poisoning in any patient with CO intoxication.
- For suspected cyanide poisoning, contact the receiving hospital early.
- Consider cyanide poisoning in any patient with AMS.



Treatment Protocol PR10