

**CHEMPACK**

Policy Number: **XXX**

Effective Date: **DRAFT**

Revision Date: **DRAFT**

ASSESS FOR SEVERITY OF EXPOSURE

**MILD EXPOSURE:**  
MIOSIS, RHINORRHEA,  
INCREASED SALIVATION

**ADULT: DUODOTE OR MARK I**  
KIT X1 IM (MAY REPEAT FOR  
TOTAL OF 3 IF SYMPTOMS  
PROGRESS)

**PED: DUODOTE OR MARK 1**  
KIT  
IM  
UP TO 25KG: 1 KIT  
26-50KG: 1 KIT MAY REPEAT X1

OR IF UNAVAILABLE

**ATROPEN** IM, MAY REPEAT  
EVERY 5 MIN TO MAX OF 6MG  
4KG: 0.5MG REPEAT 0.5MG  
4- 10.5 KG: 0.5MG REPEAT 1MG  
10.5-13KG: 1MG REPEAT 1MG  
13-20.5KG: 1MG REPEAT 2MG  
20.5-33KG: 1.5MG REPEAT 4 MG

**2PAM CHLORIDE** 25MG/KG  
IM/IV X1. MAX OF 1650MG IM OR  
1000MG IV

**MODERATE EXPOSURE:**  
MILD SYMPTOMS PLUS  
SHORTNESS OF BREATH,  
VOMITING, DIARRHEA

**ADULT: DUODOTE OR MARK I**  
KIT X2 IM (MAY REPEAT FOR  
TOTAL OF 3 IF SYMPTOMS  
PROGRESS)

**PED: DUODOTE OR MARK 1**  
KIT IM  
UP TO 25KG: 1 KIT  
26-50KG: 2 KITS

OR IF UNAVAILABLE

**ATROPEN** IM, MAY REPEAT  
EVERY 5 MIN TO MAX OF 6MG  
4KG: 0.5MG REPEAT 0.5MG  
4- 10.5 KG: 0.5MG REPEAT 1MG  
10.5-13KG: 1MG REPEAT 1MG  
13-20.5KG: 1MG REPEAT 2MG  
20.5-33KG: 1.5MG REPEAT 4 MG

**2PAM CHLORIDE** 25-50MG/KG  
IM/IV X1. MAX OF 1650MG IM OR  
1000MG IV

**SEVERE EXPOSURE:**  
MODERATE SYMPTOMS PLUS  
RESPIRATORY DISTRESS OR ARREST,  
CYANOSIS, EXTREME SLUDGE,  
SEIZURES, UNCONSCIOUSNESS

**ADULT: DUODOTE OR MARK I**  
KIT  
X3 IM

**PED: DUODOTE OR MARK 1**  
KIT IM  
UP TO 25KG: 1 KIT  
26-50KG: 2 KITS

**ADULT: VALIUM:** 10MG IM OR 5-  
10MG IV

OR **VERSED:** 2-5MG IV TITRATE  
TO SZ CONTROL; 5MG IN OR IM IF  
NO IV; REPEAT X1 IN 5 MIN TO  
MAX OF 10MG

**PED: VALIUM** 0.05-0.3 MG/KG IVP/  
IM; MAY REPEAT IN 5 MIN TO  
MAX OF 10MG

OR **VERSED** 0.1-0.2 MG/KG IVP/  
IM/IN. MAY REPEAT IN 5 MIN TO  
MAX OF 10MG

**60 MIN AFTER DUODOTE OR MARK I**  
**PED: ATROPEN** IM OR 0.1MG/KG IM/IV

FROM MULTI-DOSE VIAL  
4KG: 0.5MG OR 0.4MG  
4-6.5KG: 1MG OR 0.7MG  
6.5-8.5KG: 1MG OR 0.9MG  
8.5-10.5KG: 1MG  
10.5-13KG: 1.5MG OR 1.3MG  
13-16.5KG: 2MG OR 1.6MG  
16.5-20.5KG: 2MG  
20.5-26KG: 4MG OR 2.6MG  
26-33KG: 4MG OR 3.3MG

**2PAM CHLORIDE** 50MG/KG IM/IV X1.  
MAX OF 1650MG IM OR 1000MG IV

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1. Contact HazMat resources if not already done.
2. Don protective equipment/gear appropriate for the exposure according to agency protocol.
3. **SLUDGE**: salivation, lacrimation, urination, defecation, gastrointestinal distress and emesis.
4. Once resources allow, perform supportive treatment as appropriate according to protocol.
5. Administer additional DuoDote or Mark I kits for a total of 3, if symptoms progress in **MILD** or **MODERATE** exposures.
6. **PEDIATRICS**: 1 DuoDote or Mark I kit can be given to any child, regardless of age or weight, as the initial antidote therapy when no other atropine or pralidoxime source is available.
7. **PEDIATRICS**: Atropine auto-injectors (AtroPen) come in 0.5mg, 1 mg, and 2mg devices. Initial does based off 0.05mg/kg, repeat dosage based off 0.1mg/kg. May repeat every 5 minutes until secretions begin to dry or maximum 6mg IM.