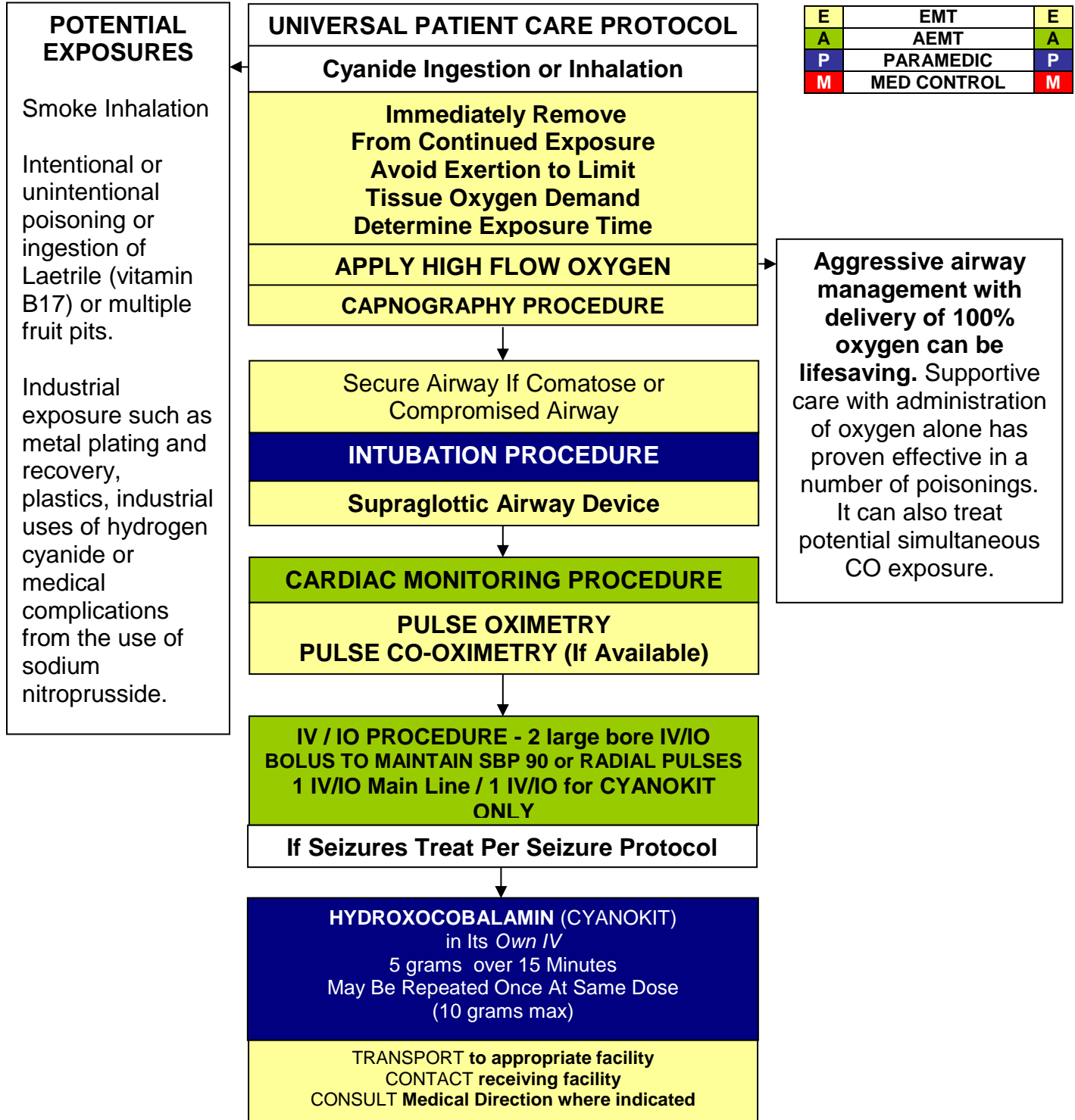




# Section 5: Adult Medical Emergencies Protocol

## ADULT MEDICAL EMERGENCIES: TOXIC INHALATION / INGESTION / CYANIDE





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### ADULT MEDICAL EMERGENCIES: TOXIC INHALATION / INGESTION / CYANIDE-Cont.

#### PEARLS and KEY POINTS

HISTORY	SIGNS AND SYMPTOMS	DIFFERENTIAL DIAGNOSIS
<ul style="list-style-type: none"><li>Inhalation or ingestion of cyanides</li><li>Duration of exposure</li><li>Reason (suicidal, accidental, criminal)</li><li>Past medical history, medications</li></ul>	<ul style="list-style-type: none"><li>Malaise, fatigue, drowsiness</li><li>Reddened skin</li><li>Dyspnea</li><li>Chest pain</li><li>Nausea / vomiting</li><li>Abdominal pain</li><li>Dizziness / vertigo</li><li>Memory disturbances</li><li>Syncope</li><li>Seizures</li><li>Coma</li></ul>	<ul style="list-style-type: none"><li>Flu / severe cold</li><li>Chronic fatigue</li><li>Migraine</li><li>Myocardial infarction / ACS</li><li>Encephalitis</li><li>Anaphylaxis</li><li>Other ingested toxins</li><li>Pulmonary embolism</li></ul>

**GREATER CLEVELAND POISON CONTROL 1-800-222-1222**

- Exam: Mental Status, Skin, HEENT, Heart, Lungs, Abdomen, Extremities, Neuro
- Cyanide is generally considered to be a rare source of poisoning.
- Cyanide exposure occurs relatively frequently in patients with smoke inhalation from fires.
- Numerous forms of cyanide exist, including gaseous hydrogen cyanide (HCN), water-soluble potassium and sodium cyanide salts, and poorly water-soluble mercury, copper, gold, and silver cyanide salts.
- A number of synthesized (polyacrylonitrile, polyurethane, polyamide, urea-formaldehyde, melamine) and natural (wool, silk) compounds produce HCN when burned.
- Industry widely uses nitriles as solvents and in the manufacturing of plastics. Nitriles may release HCN during burning or when metabolized following absorption by the skin or gastrointestinal tract.
- Cyanide poisoning also may occur in other industries, particularly in the metal trades, mining, electroplating, jewelry manufacturing, and x-ray film recovery.
- Depending on its form, cyanide may cause toxicity through parenteral administration, inhalation, ingestion, or dermal absorption.
- Rapid aggressive therapy, consisting of supportive care and antidote administration, is lifesaving.
- The delay between exposure and onset of symptoms depends on type of cyanide involved, route of entry, and dose. Rapidity of symptom onset, depending on the type of cyanide exposure, occurs in the following order (most rapid to least rapid): gas, soluble salt, insoluble salt, and cyanogens.
- Important to draw blood sample before Cyanokit is given