

## Emergency Department Treatment Protocol

Name: \_\_\_\_\_ Sex: M F

Street: \_\_\_\_\_ Date of Birth: / /

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### The Patient with Chemical Sensitivity/Hypersensitivity (Multiple Chemical Sensitivity/Chemical Intolerance)

*Below is an example of an Emergency Department Treatment Protocol that can be used as a guide for discussion between patient and physician. This person has been advised to personalize according to his/her medical needs.*

- ◆ **LISTEN** to the patient's concerns. Do not discredit his/her symptoms. Staff unfamiliar with chemical sensitivity (hypersensitivity, multiple chemical sensitivity or multiple chemical intolerance) do not realize the degree of debilitation and complications that can result when a patient is exposed to common substances staff may consider benign. Seizures, stroke-like symptoms or other serious consequences can occur when medical personnel trivialize chemical injury warnings.
- ◆ **TREAT** the patient in an isolation room or a private area with the best ventilation available. Exposure to low-level common volatile organic compounds (VOCs) is likely to cause reactions. Avoid glutaraldehyde. Avoid placing patients in areas of renovation with new carpeting or paint or where cleaning agents are in use. Avoid passive smoke, vehicle idling or exhaust, any combustion source; even trace carbon monoxide triggers symptom exacerbation.
- ◆ **OXYGEN** should be offered immediately via nasal cannula, preferably with DEHP-free tubing or, if available, the patient's own ceramic oxygen mask with stainless steel tubing. Inhaled oxygen often improves symptoms caused by common ambient chemicals, e.g.: cleaning products and disinfectants, fragrance products, computer and equipment fumes, plastic materials, etc.
- ◆ **FRAGRANCE FREE STAFF** should be the only staff to treat the patient if possible. The staff should not be wearing perfume/cologne, scented hair gels, body care products or clothing with scented detergent, fabric softener or dryer sheet residues. Chemical fragrances are respiratory irritants and induce other symptoms.

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- ◆ **SYMPTOMS** of chemical sensitivity present in multiple body systems, e.g. respiratory, skin, gastrointestinal or neurological. They may include symptoms of airway inflammation such as cough, wheeze or chest tightness; headache pain (migraine or sinus), heart palpitations/tachycardia; and/or neurological symptoms such as mental confusion, word finding problems, ataxia, anxiety and changes in behavior.
- ◆ **HISTORY** Have the patient (if possible) describe his/her usual exposure symptoms; assume the patient will experience these symptoms in the chemically dense hospital environment. Obtain a full history of adverse reactions to medications and foods as these patients at times can have acute reactions to common chemicals. Be aware that patients with chemical sensitivity at times have other complicating conditions: latex allergy, mold allergy, CFIDS, FMS, chronic pain, etc.
- ◆ **MEDICATION** Chemically sensitive patients may not readily tolerate standard medications, and may respond to lower dosages. See individualized medication plans below. Ask what medications the patient has tolerated in the past for pain, anesthesia, etc. and use those or similar drugs. Use preservative-free medications and IV medications packaged in DEHP-free bags whenever possible.

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- ◆ **CONTACT** the patient's physician and family as soon as possible for further treatment details. Consider consulting <http://annmccampbell.com> for additional information or [www.beyondpesticides.org](http://www.beyondpesticides.org) for pesticide toxicity information.

**Personal emergency contact names and telephone numbers:**

Name: \_\_\_\_\_ Home Phone # \_\_\_\_\_

Address: \_\_\_\_\_

Relation: \_\_\_\_\_ Cell/Work Phone # \_\_\_\_\_

Name: \_\_\_\_\_ Home Phone # \_\_\_\_\_

Address: \_\_\_\_\_

Relation: \_\_\_\_\_ Cell/Work Phone # \_\_\_\_\_

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