

Appendix K - Riot Control Agents

Objectives:

- Early recognition and appropriate intervention of patients poisoned with nerve agents
- Protect responders from secondary exposure to nerve agents during patient care

General Information:

- Remove patient from contaminated area
- If Law Enforcement dispensed, request product identification
- In most instances, the best method of decontamination is moving air across the contaminated area, allowing the agent to blow away. In cases of visible gross contamination, water is useful for removing large amounts of agent, but ultimately the remaining agent will not be removed until the water dries and the agent can blow away
- Make sure the water flows away from the face. Hair is the next most effect reservoir, after clothes, for contamination
- Use particular care that water does not run the hair to the eyes and dry the hair after use of water for decontamination
- Use of water on clothing does NOT remove the contaminant; it merely holds it to the clothes until the water dries, and then the agent is released into the air again
- Chloroacetophenone (CN) and Chlorobenzalmalononitrile CS in crystal form tend to cling to clothing, skin, and hair, and are often visible on the patient. Removing as much clothing as practical is the single most effective decontamination action one can take. For CN or CS in smoke form, remove clothing and allow residual agent to off-gas
- Use only plain water to irrigate eyes exposed to Oleoresin Capsicum (OC). Saline will cause an increase in pain
- Several aftermarket decontamination solutions are available for OC agent decontamination. Milk (of any type) is also an effective solution because of the antagonistic relationship between lactic acid and the active enzyme in the OC
- The use of commercially available decontamination wipes for OC and most CS/CN exposures can provide a means of neutralization. These wipes, similar to the wet wipes found in restaurants, are a cloth-type paper wipe 7 1/2 X 11 1/2 inches containing a non-tearing liquid solution



Warnings/Alerts:

- Agents have a high safety ratio and have not been found to cause permanent lung damage or exacerbate chronic pulmonary diseases. Nevertheless, airway problems should be anticipated in individuals with lung disease, particularly after higher than average exposure concentrations
- Use copious amounts of plain water for removing **gross** contamination only. Bleach solutions should not be used. They may react with Chlorobenzalmalononitrile (CS) to form a combination that is more irritating to the skin than CS alone.

OMD Notes:

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References:

- Currance, Clements, & Bronstein (2005) *Emergency Care for Hazardous Materials Exposure* 3rd edition, Elsevier Mosby, St Louis, p. 602-605
- Currance, P. L. (2005) *Medical Response to Weapons of Mass Destruction*, Elsevier Mosby, St Louis, p. 78-79
 - **Performance Indicators:**
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 - Signs and Symptoms indicating exposure Vital Signs Treatment and Response to Treatment

CBRNE – Riot Control Agents

