Hazardous Materials Preambles

This introduction provides a framework for providers responding to an incident involving hazardous material (HAZMAT) release and chemical, biological, radiological, nuclear, and explosives (CBRNE) agents. All EMS providers are expected to have regular HAZMAT training at the awareness level – providers should be able to recognize a HAZMAT situation and not become part of the problem. Providers should begin their response with the following assumptions:

- There will not be advanced notification for most of these incidents.
- Information regarding the hazardous agent(s) may not be available immediately.
- There are a limited number of on-duty medical first responders and transport units available.
- Many patients will not necessarily have been decontaminated prior to departing from the scene of the incident and will self-refer to nearby healthcare facilities.

I. DEFINITIONS

- **"Hazardous Materials":** substances, such as chemicals, that endanger a person's health or life when ingested, inhaled, absorbed (through the skin or mucous membranes), or injected under skin (ex. by abrasion, cut, or shot), or absorbed. These substances shall be considered a threat to the health and life of EMS personnel. A hazardous material can be identified by its location, its use, and labels, placards, and signs attached to it.

- **"Weapons of Mass Destruction (WMD)":** includes any chemical, nuclear or biological agent used in terrorist activities to threaten or inflict intentional harm or death to a given population.

- **"Nerve agents":** extremely toxic organophosphate-type chemicals, including GA (tabun), GB (sarin), GD (soman), GF (cyclosarin), and VX, which attack the nervous system and interfere with chemicals that control nerves, muscles, and glands. G-series nerve agents are odorless and invisible and can be inhaled, absorbed through the skin, or swallowed. Traditionally classified as WMDs.

- **"Decontamination":** the process by which hazardous materials are removed from an exposed person. This process may involve removal of the patient's clothing, rinsing the patient with a high- volume water bath, washing the patient's body with a neutralizing agent, and/or irrigation of the eyes. Persons who have been decontaminated shall be considered safe for evaluation and treatment by responding personnel.

II. ROLES/RESPONSIBILITIES

The HAZMAT Team or Hazardous Materials Unit (HMU), under direction of the Incident Commander, assumes responsibility for control of a HAZMAT incident. EMS personnel should coordinate treatment/transport efforts with the HAZMAT Team so as not to jeopardize scene integrity or cause unnecessary spread of contamination to the ambulance, hospital personnel, or bystanders.