1. Assess scene for potential hazards and number of patients

2. Remove patient from the source of carbon monoxide

3. Assess airway and initiate basic and/or advanced airway maneuvers prn *(MCG 1302)*

4. Administer high-flow Oxygen 15 L/min *(MCG 1302)*

5. Initiate cardiac monitoring prn *(MCG 1308)*

6. If carbon monoxide monitor available, consider measuring CO level Report and document results

7. Establish vascular access prn *(MCG 1375)*

8. For altered level of consciousness, treat in conjunction with TP 1229-P, ALOC

9. Assess for signs of trauma
   For traumatic injury, treat in conjunction with TP 1244-P, Traumatic Injury

10. For poor perfusion:
    Normal Saline 20mL/kg IV rapid infusion per *(MCG 1309)*
    For persistent poor perfusion, treat in conjunction with TP 1207-P, Shock/Hypotension

11. For suspected exposure to hazardous materials, treat in conjunction with TP 1240-P, HAZMAT
SPECIAL CONSIDERATIONS

1. Symptoms of carbon monoxide poisoning include headache, altered level of consciousness, malaise, nausea, dizziness and unresponsiveness. Consider carbon monoxide when multiple persons in same location present with any of these symptoms.

2. The measured carbon monoxide level should not impact the transport decision. It will be helpful for hospital treatment of the exposure.

3. Exposures to certain chemicals can be associated with carbon monoxide poisoning. For example, methylene chloride (dichloromethane) is an industrial solvent and a component of paint remover. It is metabolized to carbon monoxide by the liver and may cause carbon monoxide toxicity if inhaled or ingested.