TREATMENT PROTOCOL: RADIOLOGICAL EXPOSURE

1. If radiation is suspected, confirm by using appropriate detection devices

2. If present, identify the cause of the contamination:
   a. **Internal Radiation** (Radiation Therapy)
      • Begin treatment using appropriate treatment protocol based on complaints
      Note: Exposure to internal radiation poses low-to-no risk
   b. **External Radiation**
      • Exposure through a Radiological Dispersal Device (RDD), Radiological Material Release (RMR) or Radiological Exposure Device (RED)
      Note: Exposure to victims from radiological dispersal devices poses low-to-moderate risk

   If External Radiation, proceed with steps 3 through 9:

3. If MCI, begin triage (Ref. No. 519.2, MCI Triage Guidelines)

4. If a RDD is used and in the absence of any other information
   • Evacuate 1,650 feet in all directions from the detonation site then follow the Emergency Response Guidebook for other recommended scene precautions.

5. Notify:
   ① Departmental hazardous materials (HazMat) team, if available
   ② Department of Public Health (DPH) Radiation Management at (213) 974-1234, if departmental HazMat team is not available and prolonged exposures are expected

6. **ESTABLISH BASE CONTACT** or **IF MCI, CONTACT MEDICAL ALERT CENTER (MAC)**

<table>
<thead>
<tr>
<th>LIFE THREATENING CONDITION</th>
<th>NOT LIFE THREATENING CONDITION</th>
<th>ASYMPTOMATIC AND MINIMAL EXPOSURE IS SUSPECTED</th>
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</thead>
<tbody>
<tr>
<td>7. Treat using appropriate treatment protocol based on complaints</td>
<td>7. Decontaminate using departmental protocols; for extremely large incidents, it may not be necessary to contain the water runoff</td>
<td>7. Release and issue procedure for home decontamination. Simple external radiological exposure poses low risk.</td>
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<td>8. Remove the outer clothing and utilize contamination mitigation techniques before transport. Decontaminate at scene only if it does not delay transport.</td>
<td>8. Treat using appropriate treatment protocol based on complaints</td>
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**SPECIAL CONSIDERATIONS**

① Remember the following principles:
   - **Time:** limit time with the victim to a minimum
   - **Distance:** the further away from the source, the smaller the dose received.
   - **Shielding:** “Turnouts” will protect from alpha and beta emitters, wear respiratory protection if particulate matter (i.e., dust or powder) is present

② Continued close exposure of provider for greater than 15 minutes, may require dosimetry and the establishment of dose guidelines.

③ The HazMat team or DPH Radiation Management will be able to redefine boundaries, establish radiation dose guidelines, assist with monitoring and decontamination procedures, and provide support to on-scene responders.