



Just the Facts...

Pest Strips - Medical

GENERAL INFORMATION	<p>A No-Pest Strip is a pesticide product used to kill flying and crawling insects. The solid strip formula kills flies, moths, mosquitoes, gnats, cockroaches, silverfish, spiders, beetles and earwigs. This product is used as a small space insect killer in closets, wardrobes, storage spaces, garbage cans, dumpsters, and utility rooms. This product is not used in hospitals or clinic rooms, including patient rooms, wards, nurseries, operating and emergency rooms. It is also not used in kitchens or areas where food is prepared or processed</p>
ROUTINE USES IN THE DEPLOYED SETTING	<p>The only legal and acceptable use for this product in a deployed setting is inside garbage cans and dumpsters. Only personnel properly trained in the use of pesticides should handle these products. This product must be used in accordance with label directions.</p>
PERSONAL PROTECTIVE EQUIPMENT (PPE) and COUNTERMEASURES AVAILABLE FOR DEPLOYED PERSONNEL	<p>Educate personnel on how to identify various products and instruct personnel to never tamper with them. A small amount of liquid may form after prolonged storage. Do not get this liquid in the eyes or mouth. Wash hands thoroughly with soap and water after handling the strip. If on skin, remove the contaminated clothing and wash the affected area with soap and water. If in eyes, flush with plenty of water.</p>
QUESTIONS TO ASK REGARDING EXPOSURE	<ul style="list-style-type: none">• How frequently did individual come into direct contact with the strips or inhaled pesticide vapors? Where was the product used and what were they trying to control?• Did individual have any acute effects from pesticide exposure: pupil dilation, irritation of skin or eyes, runny nose, excessive sweating, blurred vision, slurred speech, muscle twitching, tightness in chest; cough or difficulty breathing; or loss of consciousness?• Does individual have chronic symptoms that are possibly related to pesticide exposure? What is this relationship?
EXPOSURE LEVELS HISTORICALLY ENCOUNTERED	<p>Pesticide exposures can occur from a very wide range of sources. Not all exposures may be related to applications conducted by US forces. Historical records concerning applications may provide valuable information. These data are important in assessing potential exposure. When used in the proper manner and with adequate ventilation the amount of active chemical in the air should not be sufficient to cause symptoms. If ventilation is not adequate, the level may exceed exposure standards.</p>
AVAILABLE EXPOSURE DATA	<p>Check with the theater surgeon's office to determine what Preventive Medicine Units are operating in your area of operations and determine if they have submitted any application records.</p>

<p>SIGNS & SYMPTOMS OF ACUTE AND CHRONIC EXPOSURE</p>	<p>Early symptoms of organophosphate poisoning - As a result of local exposure to the vapors, the following signs and symptoms may occur: dilated pupils, frontal headache, runny nose, tightness in chest, cough. Following systemic (inhalation or swallowing) absorption, early symptoms of poisoning may include excessive sweating, headache, weakness, giddiness, nausea, vomiting, stomach pains, blurred vision, slurred speech, and muscle twitching. Later there may be convulsions, coma, loss of reflexes, and loss of sphincter control. All signs and symptoms are cholinergic in nature.</p> <p>If poisoning is probable, treat the patient immediately. Treatment before person is seen by a physician - if these symptoms appear following exposure, the person should stop work immediately, remove contaminated clothing and wash the affected skin with soap and water if available, and flush the area with large quantities of water. If swallowed, vomiting should be induced if the person is conscious. Begin CPR if person stops breathing.</p>
<p>REVERSIBILITY OF ACUTE AND CHRONIC HEALTH EFFECTS</p>	<p>After stopping skin contact or inhalation exposure, the effects of the strip generally disappear, but exposure needs to be stopped. Generally, you will feel much better soon after inhalation exposure is stopped and you breathe fresh air. The effects of inhalation may take several hours to completely disappear based upon the concentration and the length of time that it was inhaled.</p> <p>In rare instances of short-term exposures to very high levels, or long term, repeated exposure to moderate or high levels, permanent nerve damage can occur.</p>
<p>TREATMENT REQUIRED/AVAILABLE FOR EXPOSURE</p>	<p>The immediate treatment for exposure is to stop the exposure when effects occur. Prevention of the exposure in the first place is even more desirable!</p> <p>Eye contact: immediately rinse the affected eye(s) with water for 15 minutes. The individual should seek medical evaluation immediately after rinsing the affected eye.</p> <p>Skin contact: rashes can be treated by simply stopping or avoiding skin contact. Medication may be applied to the skin, taken orally, or injected if needed, to treat the acute rash depending upon the severity.</p> <p>Inhalation exposure: Immediate treatment is to stop continued exposure. Simply moving to fresh air accomplishes this. Oxygen may be needed in more severe exposures, such as exposures resulting in breathing difficulties or loss of consciousness.</p> <p>OP Insecticides: Several antidotal therapies are available for OP poisoning. Atropine, Glycopyrolate, and Pralidoxime are potential choices to antagonize the effects of excessive concentrations of acetylcholine.</p> <p>Generally, there is no medical treatment required for past exposure. In rare instances where the exposure was high enough to injure nerves, the damage may be permanent and require rehabilitation with physical and occupational therapy.</p>
<p>LONG TERM MEDICAL SURVEILLANCE REQUIREMENTS OF HEALTH EFFECTS MONITORING</p>	<p>Depending on the degree of exposure long-term medical monitoring may be indicated.</p>
<p>SPECIAL RISK COMMUNICATION INFORMATION</p>	<p>When individual is no longer exposed to the active ingredient, the chemical is eliminated from your body.</p> <p>In rare cases, where acute exposure resulted in significant respiratory problems or a loss of consciousness, there may be lasting effects associated with breathing or mental tasks. If an individual feels that they have had that type of an exposure, they should bring this to the attention of their healthcare provider.</p>