

Hydrazine Exposure Worksheet

This form requires the collection and maintenance of information protected by the Privacy Act of 1974. The authority to collect and maintain the prescribed information in this instruction is Section 552a, Title 5, United States Code and Executive Order 9397. Maintain and dispose of records created as a result of prescribed processes in accordance with AFMAN 33-363, *Management of Records*.

Full Name:	SSAN/DODI:	Phone:
Workplace ID:	Supervisor Name/Rank:	Body Location of Exposure:
Description of How Exposure Occurred:		
Symptoms:		
CAUTION: Exposure to EPU exhaust should be treated as an exposure to ammonia		
EVALUATION		
Initial	24 Hours Post Exposure	7 Days Post Exposure
Date/Time:	Date/Time:	Date/Time:
Pulmonary Function Test	Pulmonary Function Test	Pulmonary Function Test
FEV ₁ = FVC = FEV ₁ /FVC= * If no PFT's available (i.e. deployed/TDY) perform peak expiratory flow and calculate % of calculated best peak flow	FEV ₁ = FVC = FEV ₁ /FVC=	FEV ₁ = FVC = FEV ₁ /FVC=
Laboratory Findings	Laboratory Findings	Laboratory Findings
CMP ALT: AST: BUN/Cr: Glucose: Other:	CMP ALT: AST: BUN/Cr: Glucose: Other:	CMP ALT: AST: BUN/Cr: Glucose: Other:
CBC:	CBC:	CBC:
UA:	UA:	UA:
INITIAL EXAMINATION		
Blood Pressure:	Pulse:	Resp Rate:
Pupillary Reflex:	HEENT:	Lungs:

PA/Lateral CXR:		
Abdomen:	Cardiovascular:	
Neurological Examination: 1. Gross Sensory= CNII-XII, Vibratory, Pin Prick 2. Cerebellar= Finger-Nose, DTRs, Rhomberg, Rapid Alternating Movement 3. Gait= Heel to Toe		
Skin:		
Exposure Assessment: * Reference ncbi.nlm.nih.gov/books/NBK22003 or Bioenvrionmental Engineer team		
Other Notes/Comments:		
Other Considerations		
* On-scene docontamination, if warranted, completed prior (flushed w/water for 15 minutes) * All contaminated clothing, including boots, have been removed (environmental management to take possession of decontaminated clothing at scene and will NOT be transported with member) * Convulsions: Consider Diazepam and pyridoxine (Vitamin B6) * Consider hospitalization for 24-hour observation due to pulmonary edema concern		
Disposition		
<input type="checkbox"/> 72 hr Quarters placed (if needed) <input type="checkbox"/> PRP/FLY/AUoF reporting needed (document if notification was complete) <input type="checkbox"/> Date, Time and Location where patient is to report for 24Hr Follow-Up:		
24 Hour Post Exposure EXAMINATION		
Blood Pressure:	Pulse:	Respiration: (BE ALERT FOR RALES)
Pupillary Reflex:	HEENT:	Lungs:
PA/Lateral CXR:		
Abdomen:	Cardiovascular:	
Neurological Examination: 1. Gross Sensory= CNII-XII, Vibratory, Pin Prick 2. Cerebellar= Finger-Nose, DTRs, Rhomberg, Rapid Alternating Movement		

3. Gait= Heel to Toe		
Skin:		
Other Notes/Comments		
7 Days Post Exposure EXAMINATION		
Blood Pressure:	Pulse: BPM	Resp Rate: Breaths Per Minute
Pupillary Reflex:	Cardiovascular:	Lungs:
CXR:		
Abdomen:		
Neurological Examination: 1. Gross Sensory= CNII-XII, Vibratory, Pin Prick 2. Cerebellar= Finger-Nose, DTRs, Rhomberg, Rapid Alternating Movement 3. Gait= Heel to Toe		
Skin:		
Other Notes/Comments:		
HAS PUBLIC HEALTH AND/OR BIOENVIRONMENTAL ENGINEERING BEEN INFORMED FOR OSHA DOCUMENTATION AND NOTIFICATION OF EXPOSURE? YES NO		
Final Disposition or Recommended Follow-Up: * Scan into EMR		