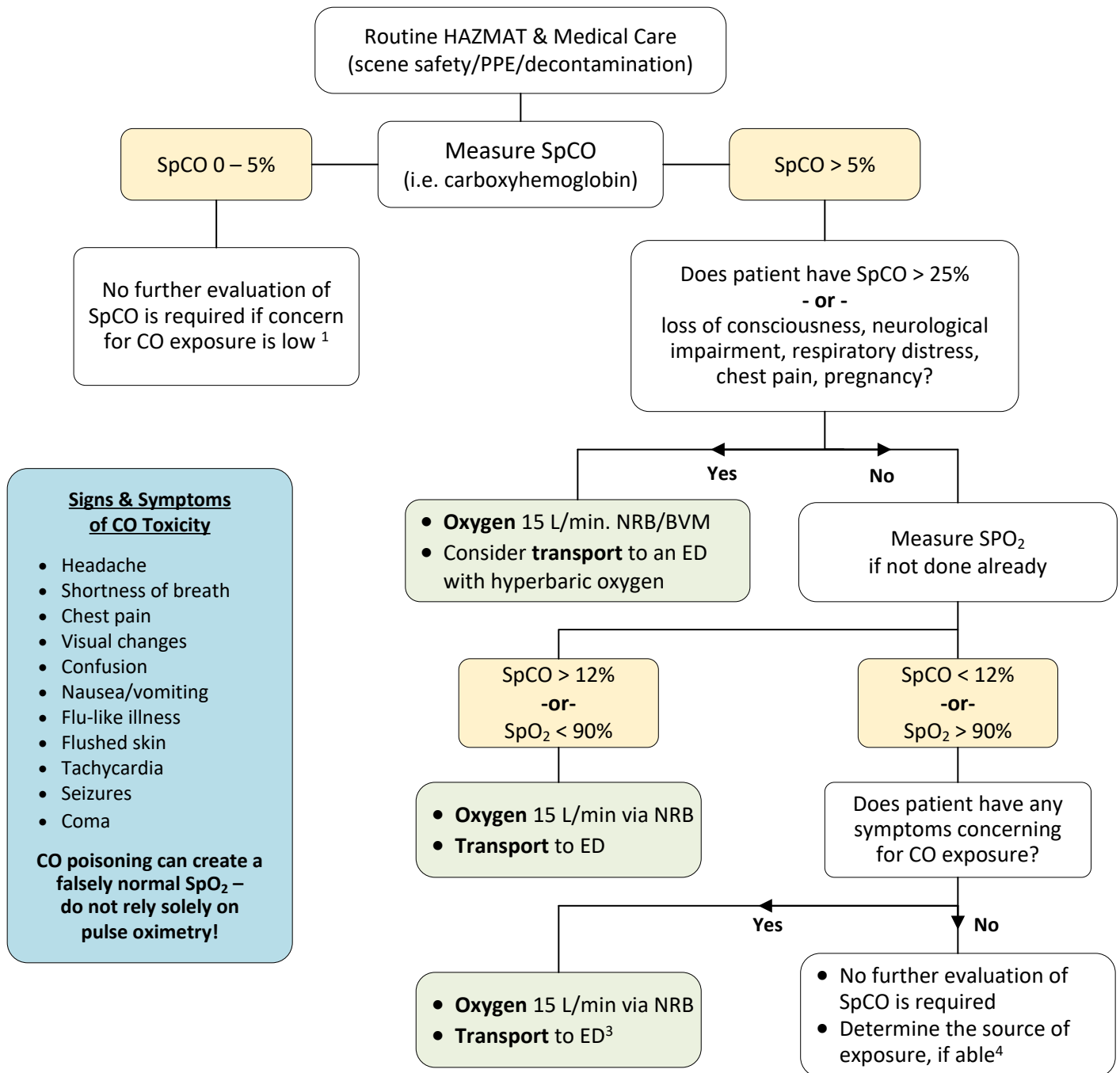


Carbon Monoxide (CO) Exposure



- Chronic CO exposure is just as significant as acute poisoning but may have a gradual onset. Tobacco smokers have a higher baseline concentrations of carboxyhemoglobin and will reach toxic concentration earlier in any exposure. Recommend smoking cessation treatment for smokers.
- ¹ Absent or lower levels of COHb are not reliable, especially when your clinical suspicion for CO poisoning is high (e.g. firefighters, obvious inhalation of fire byproducts). Treat CO poisoning while also considering/treating other diagnoses.
 - ² Fetal hemoglobin has a much higher affinity for CO than maternal hemoglobin. All females with known or suspected pregnancy should be advised that EMS-measured SpCO levels only detect adult COHb and their fetal COHb could be much higher. Recommend ED evaluation for any CO-exposed pregnant female.
 - ³ Subtle neurological findings may rapidly improve on Oxygen 15 L/min via NRB. The patient still requires an ED evaluation.
 - ⁴ CO poisoning is caused by inhaling combustion fumes. Common sources includes fire, gasoline, heating appliances in the home, and cigarettes. Always consider this diagnosis when multiple persons in the home present with the same suspicious symptoms.