Oregon Poison Center Fast Facts

1-800-222-1222

This information is current as of the date faxed and for the patient specified ONLY. Do not use this information for other patients without contacting the Poison Center at 1-800-222-1222.

Heated Metal Mercury Exposure Recommendations for HCFs

- 1. If not already decontaminated, remove clothes and isolate the clothes in a sealed bag, and have the patient shower off.
- 2. Assess patient for respiratory symptoms, pulse oximetry, and neurologic symptoms, especially headache or resting tremor. If asymptomatic after 6 hours, they may be discharged. If pulmonary symptoms occur, obtain a CXR and advise admission for chelation.
- 3. Obtain a spot urine in an acid-washed, metal free container to be sent for urine mercury level, via the treating facility's hospital lab, to ARUP Laboratories in Salt Lake City (1-800-522-2787), for mercury level. Also have the patient collect their urine for 24 hours in a sterile, lab-supplied, acid-washed, metal-free jug for urine mercury determination.
- 4. Obtain a whole blood mercury level if exposure was acute (i.e, it happened same day as presentation to hospital)—also to be sent to ARUP.
- 5. Chelation with DMSA (Succimer) should be considered in all symptomatic cases with heated metal mercury exposure while awaiting lab results.

Succimer: 10 mg/kg PO TID for 5 days pending return of initial labs.

Thresholds to continue to treat:

- 1. Acute exposure whole blood levels greater than 35 mcg/L (Normal levels in non-occupationally exposed individuals should be less than 2 mcg/dl)
- 2. Spot urine > 10 mcg/L
- 3. 24-hour urine collection greater than 50 mcg/L (NOTE: Sometimes different units for blood and urine are reported—please confirm directly with lab the results and the units for all cases.)

Chelation protocol:

- 1. **Succimer:** 10 mg/kg PO TID for 5 days, then 10 mg/kg PO BID for 14 days (total initial treatment course is 19 days).
- 2. After completing this course the patient may have multi-vitamin supplements with calcium, and we recommend they have a repeat 24-hour urine determination done 10 to 14 days after the chelation is completed. Please insure that the patient is not receiving alternative medicine chelation with DMPS or EDTA infusions when having this collection done, nor having their teeth filled with amalgam, or having fillings removed.

Revised: April 18, 2008 Page 1 of 1