

HEADQUARTERS  
LEXINGTON-BLUE GRASS ARMY DEPOT  
LEXINGTON, KENTUCKY 40511-5106

LBAD-REGULATION  
NO. 40-6

20 July 1987

Medical Services  
MEDICAL PROCEDURES FOR RADIATION CASUALTIES

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1. Purpose. To prescribe procedures and direction in providing medical care for radiation casualties.

2. Scope. This regulation is applicable to the LBAD Medical Staff, the Radiological Protection Officer, and all supervisors responsible for storage and handling of radioactive materials.

3. General. The types of radiation injuries considered applicable to this depot include:

a. Accidents with penetration of the skin or burns from radioactive material, i.e., radioactive material from broken vacuum tubes, meters with radioactive dials, and burns incurred during explosion.

b. Acute exposures due to inhalation of radioactive dusts, mists, fumes, organic vapors and gases, and ingestion of radioactive material.

c. Acute overexposure due to failure of employees to follow procedures, or failure of safety devices, i.e., interlocks of warning devices associated with x-ray equipment or sealed sources.

d. All radiation injuries will be considered as possible overexposure until proven otherwise.

\*This Regulation supersedes PIM 40-6 dated 17 March 1981, including all changes.

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4. Responsibilities.a. Post Surgeon and/or Medical Officer will:

(1) Establish policy, procedures, and provide medical referral for radiation casualties.

(2) Provide emergency care and arrange for evacuation of injured personnel.

(3) Maintain liaison with the Radiological Protection Officer and higher command.

b. Radiological Protection Officer will:

(1) Obtain a reasonable estimate of exposure and the type of exposure, and will notify the Medical Officer as expediently as possible.

(2) Provide monitoring service as required.

(3) Direct decontamination procedures at the site of the radiation accident and advises on other decontamination procedures.

(4) Provide the Post Surgeon and the Medical Officer a current inventory of radiation sources and radiation producing devices used or stored at Lexington-Blue Grass Army Depot.

c. Supervisors will:

(1) Immediately report all radiation accidents (over-exposures, wounds, ingestion, inhalation, burns) to the Post Surgeon or Medical Officer, and to the Radiation Protection Officer, Mr. M. David Scott, or the Alternate Radiation Protection Officer, Ms. Deborah Poynter, Ext. 3544.

(2) Evacuate personnel upwind from the area where the radiation accident occurred.

(3) Permit no person involved in radiation injury to return to work without the approval of the Post Surgeon.

5. Local Medical Facilities Available.

a. USA Health Clinic, Lexington-Blue Grass Army Depot, Lexington, Kentucky.

Emergency Phone: 293-3219

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b. USA Health Clinic, Lexington-Blue Grass Army Depot, Richmond, Kentucky.

Emergency Phone: 623-7559

c. Consultant: Dr. Yost Maruyama, Professor and Chairman, Radiation Medicine, University of Kentucky Medical Center, Lexington, Kentucky, will serve as a consultant in the event of radiation accident and/or injuries.

Emergency Phone: 233-6489 (Dept of Radiation Medicine)  
Home Phone: 266-7707

d. Hospitals. The local Lexington hospitals will admit and provide care under the direction of Dr. Yost Maruyama. Arrangements can be made later for transfer to a Government medical facility, if indicated.

6. Notification of the Medical Officer during Non-duty Hours.

a. Contact the following as soon as possible upon the determination of a radiological accident:

(1) James L. Howse, M.D., Lexington, Kentucky. Phone: 278-3771

or

(2) James W. Templin, M.D., Lexington, Kentucky. Phone: 277-5186

b. If unable to locate either the Post Surgeon or the Medical Officer, call:

(1) Ms. Roma M. Gray, R.N., Lexington, Kentucky. Phone: 252-8084

or

(2) Ms. Julia Ramey, R.N., Richmond, Kentucky. Phone: 623-9201

c. In the event the Radiological Protection Officer has not been contacted, request the Duty Officer to notify:

(1) Mr. M. David Scott, RPO, Lexington, Kentucky. Phone: 278-0152

or

(2) Ms. Deborah Poynter, Alternate RPO, Lexington, Kentucky. Phone: 278-4379

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d. The Health Clinic clerk will notify the Duty Officer as soon as possible upon receipt of a report of radiological accident during duty hours.

7. Medical Treatment for Radiological Emergencies by Medical Staff.

a. Puncture Wounds and Burns.

(1) Give emergency treatment, i.e., control bleeding, irrigate wounds, bandage, and initiate any desired laboratory tests such as CBC, blood typing, etc.

(2) Consult Dr. Yost Maruyama, giving him the reasonable estimate of type and amount of exposure, as available.

(3) Post Surgeon, Medical Officer, or nurse in charge will refer the patient to a local hospital, as advised by Dr. Yost Maruyama, for surgical and/or medical treatment.

b. Acute Exposure Due to Inhalation or Ingestion.

(1) Consult Dr. Maruyama and give him the estimate of radiation exposures as provided by the RPO or his alternate.

(2) An emetic and/or a cathartic may be required acutely for ingested isotopes.

(3) Aluminum hydroxide gel (Amphojel, Gelusil and Maalox) may be effective in decreasing  $\text{Sr}^{90}$  absorption after ingestion.

(4) Evacuate to a local hospital for observation and treatment.

c. Acute Overexposure.

(1) Consult Dr. Maruyama and give him any available information on type and amount of exposure.

(2) Evacuate to a local Lexington hospital for observation and treatment after decontamination and initiation of desired laboratory tests.

d. Decontamination.

(1) Radiation Protection Officer or his alternate will assure that personnel with minor wounds will be monitored and decontaminated, if necessary, before evacuation from the area. If the wounds are serious in nature, the injured individual will be wrapped in blanket to prevent further spread

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of contamination, and will be immediately removed to the health clinic. Persons accompanying the individual will warn medical personnel that there is a possibility that the injured person is contaminated.

(2) General Decontamination Procedures for Medical Staff.

(a) Remove contaminated clothing, scrub the exposed or injured area thoroughly using non-abrasive soap and lukewarm water. Do not use organic solvents.

(b) Use precautions and protective equipment, i.e., gowns, gloves, and masks.

(c) Obtain results of monitoring as expediently as possible.

(d) Evacuate to local Lexington hospital for observation and treatment.

8. References. a. TB MED 232, AMCR 385-25, AR 40-14, AR 700-64.

(HSXM-PCM-L)

FOR THE COMMANDER:

*Wanda K. Johnstone*  
WANDA K. JOHNSTONE  
Acting Chief, Administrative  
and Support Division

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