Pepper Spray Protocol

Though frightening, the direct result of Pepper spray exposure is rarely serious or life threatening. However, anxiety, fear, and disorientation, sometimes to the point of panic are normal reactions. Providing reassurance is a valuable part of any immediate intervention.

Youth should be moved away from the area of exposure, and then checked for signs and symptoms of serious distress such as a pounding heart beat and/or gasping for breath.

The decontamination process will begin immediately; the procedure is outlined on the next page (page 2) this decontamination shall begin immediately after exposure to the chemical.

If at all possible decontamination should take place prior to presenting to the clinic.

Eye injury not related to the spray itself can result from eye rubbing following exposure, vigorous irrigation, or from the effects of other spray components. Corneal exposure to an alcohol carrier could result In significant corneal epithelial erosion that might require treatment.

Although unlikely, the spray could result in swelling, rash on the face and eyelids. Bleeding in these areas are a serious complication and should be taken care of immediately.

Protocol for spray exposure:

1. Calm the student
2. Instruct the student NOT to rub the affected area
3. Move the student to fresh air and/or provide adequate ventilation (away from the contaminated area)
4. Check for breathing or heart problems such as a pounding heart beat and/or gasping for breath. If either of these is so bad that it prevents student from standing in the shower call EMS (911).
5. Remove contaminated clothes
6. Allow the student to shower and provide fresh clothes. Skin should be washed with non-oil based soap if available (student should be instructed not to allow soap to touch eye area or the area around the mouth). Instruct student to flush areas of pepper spray contact with water (this can be accomplished by splashing water on the face or allowing the shower spray to contact the area directly.
7. Accompany student to the medical clinic (between the hours of 06:00-23:00) between these times;
8. Watch student closely. Significant improvement should be noted within 15-30 minutes after exposure. If symptoms persist or are severe, the student should be evaluated by appropriate medical personnel. Student should be taken to Emergency Room either by campus transport or ambulance.
7. If student has no complaints (as far as eyes- like eyes are swollen shut or a bleeding rash) The eye evaluation can be provided in the medical clinic.
9. Remember that the student will likely recover even if no first aid is provided, so avoid "heroic" measures that could cause injury. These measures that should not be performed;

    Rubbing the students face or eyes

    Washing the face (student should only be allowed to have water splashed- or the spray from a shower head)