

**MICROMEDEX**

**EXPANDED TOXICOLOGY**

**INFORMATION**



**BENEFITS**

- Saves valuable time by presenting information on a single screen
- Ensures access to current, evidence-based toxicology data
- Reduces errors and enhances patient care

**FEATURES**

- Access to clinical effects and range-of-toxicity data
- At-a-glance product and substance identification
- Current treatment protocols for exposures
- Searchable by thousands of slang drug terms
- Updated weekly with the most up-to-date product data

## POISINDEX System

Part of the Micromedex® Toxicology Management Solution from Truven Health Analytics™, the Micromedex® POISINDEX® System is a trusted, evidence-based resource to help identify, manage, and treat toxicological exposures.

Having instant access to critical information can save lives. Relied upon in most of the world's poison control centres and thousands of hospital emergency departments, POISINDEX identifies ingredient and toxic substance information on 350,000+ commercial products, chemicals, drugs, toxic plants, and animals. This resource includes information on current products as well as products that have been discontinued.

### **In-Depth Information When You Need It**

POISINDEX links the ingredient and substance information directly to details to assist in the management of all toxic exposures, providing data on clinical effects, range of toxicity, and treatment protocols for exposure.

Other toxicology references provide high-level summary information on common exposures, but fall short when it comes to uncommon or more complex situations.

The system also delivers concise, essential toxicology data on a single screen to ensure the fastest access to vital information. Plus, it is the only system to link to additional databases, including:

- **HAZARDTEXT®** for incidents such as spills, leaks, fires, or explosives involving hazardous materials
- **MEDITEXT®** to assist in evaluating and treating acute exposures to industrial chemicals, reporting potential adverse health effects, and treating chemical release exposures

This unique feature makes POISINDEX the first choice for emergency responders.

**A Dependable Source**

Backed by the industry's most trusted and respected editorial processes, POISINDEX provides evidence-based actionable recommendations you can count on. And because the data is updated weekly, you have access to the most up-to-date product information for reliable substance identification.

POISINDEX is the largest and most complete resource for quickly identifying, managing, and treating toxicological exposures. It is part of Micromedex, the most dependable and comprehensive suite of clinical products, providing critical information to hospitals for nearly 40 years.

**Tox & Drug Product Lookup**

Search for drug products (by brand name, generic, or branded generic), commercial/household products and chemicals (by product name or synonym), and other substances including plants and animals (by Latin or common name), and by using terms. Search by a specific active ingredient in the substance, by a specific code (such as NDC, CAS, or EPA code), or a valid 7-digit Product ID.

I want to search for...

- Product or substance names
- Globally distributed drug products in Maritime

I want to search by and receive suggestions for...

- Codes
- Product ID
- Active ingredients

Enter search term: Benzene

Submit

BENZENE  
 Benzene - B-243  
 Benzene - B-245a  
 Benzene - B-411  
 Benzene - B-426  
 Benzene 1,1-(2,2,2-trichloroethylidene)bis(4-R-oro-  
 Benzene 1,3,5-Triol  
 Benzene 14440  
 Benzene Carbonylchloride  
 Benzene Carbonyl  
 BENZENE CARBONYL CHLORIDE  
 Benzene Carbonylchloride

Search for detailed toxicology data from our comprehensive database.

**Tox & Drug Product Results**

Displaying results found for "BENZENE"

Results 1-20

Name	Strength/Form	Manufacturer	Country	Product ID	AAPCC Code	Related Documents
1. BENZENE				319146	160000	BENZENE - POISINDEX BENZENE - HAZARTEXTB BENZENE - MEDTEXTB
2. Benzene		Clig Petroleum	United States	506257	160000	BENZENE - POISINDEX BENZENE - HAZARTEXTB BENZENE - MEDTEXTB
3. Benzene		Fisher Chemical	United States	114756	160000	BENZENE - POISINDEX BENZENE - HAZARTEXTB BENZENE - MEDTEXTB
4. Benzene		Chromat	United States	471641	160000	BENZENE - POISINDEX BENZENE - HAZARTEXTB BENZENE - MEDTEXTB
5. Benzene		Talco	United States	370253	160000	BENZENE - POISINDEX BENZENE - HAZARTEXTB BENZENE - MEDTEXTB
6. BENZENE 1,2,4,5-TETRAFLORO-				417423	077261	GENERAL OR UNKNOWN CHEMICAL - POISINDEX SYNTHETIC CHEMICAL INGESTION - POISINDEX SYNTHETIC CHEMICAL DERMAL EXPOSURE - POISINDEX GENERAL OR UNKNOWN CHEMICAL - MEDTEXTB
7. Benzene 14440	Liquid	Hach	United States	364066	160000	BENZENE - POISINDEX BENZENE - HAZARTEXTB BENZENE - MEDTEXTB
8. BENZENESULFONIC ACID				363367	077261	BENZENESULFONIC ACID - POISINDEX BENZENESULFONIC ACID - HAZARTEXTB BENZENESULFONIC ACID - MEDTEXTB
9. Benzenesulfonic Acid (112)	Crystalline Powder	Hach	United States	530358	077261	BENZENESULFONIC ACID - POISINDEX BENZENESULFONIC ACID - HAZARTEXTB BENZENESULFONIC ACID - MEDTEXTB
10. Benzene - B-243		Fisher Chemical	United States	319178	160000	BENZENE - POISINDEX BENZENE - HAZARTEXTB BENZENE - MEDTEXTB
11. Benzene - B-245a		Fisher Chemical	United States	319182	160000	BENZENE - POISINDEX BENZENE - HAZARTEXTB BENZENE - MEDTEXTB
12. Benzene - B-411		Fisher Chemical	United States	319181	160000	BENZENE - POISINDEX BENZENE - HAZARTEXTB BENZENE - MEDTEXTB
13. Benzene - B-426		Fisher Chemical	United States	319183	160000	BENZENE - POISINDEX BENZENE - HAZARTEXTB BENZENE - MEDTEXTB
14. Benzene Carbonylchloride				406986	077261	GENERAL OR UNKNOWN CHEMICAL - POISINDEX SYNTHETIC CHEMICAL INGESTION - POISINDEX SYNTHETIC CHEMICAL DERMAL EXPOSURE - POISINDEX GENERAL OR UNKNOWN CHEMICAL - MEDTEXTB
15. Benzene Carbonylchloride				418247	080000	GENERAL OR UNKNOWN CHEMICAL - POISINDEX SYNTHETIC CHEMICAL INGESTION - POISINDEX SYNTHETIC CHEMICAL DERMAL EXPOSURE - POISINDEX GENERAL OR UNKNOWN CHEMICAL - MEDTEXTB
16. Benzene				727124	160000	BENZENE - POISINDEX BENZENE - HAZARTEXTB BENZENE - MEDTEXTB
17. Benzene Carbonylchloride	Liquid	Film Scientific	United States	438330	077261	BENZENE - POISINDEX ALPHA-ADRENERGIC BLOCKERS - POISINDEX ALPHA-ADRENERGIC BLOCKERS - MEDTEXTB

**Micromedex 2.0** #mobileMicromedex

Drug: Benzene

SEARCH

OVERVIEW

LIFE SUPPORT  
 CLINICAL EFFECTS  
 LABORATORY MONITORING  
 TREATMENT OVERVIEW  
 RANGE OF TOXICITY

SUBSTANCES INCLUDED (SYNONYMS)  
 "THERAPEUTIC CLASS"  
 SPECIFIC SUBSTANCES  
 AVAILABLE CROSS-REFERENCES

CLINICAL EFFECTS  
 SUMMARY OF EXPOSURE  
 HEENT  
 CARDIOVASCULAR  
 RESPIRATORY  
 NEUROLOGIC  
 GASTROINTESTINAL  
 GENITOURINARY  
 HEMATOLOGIC  
 DERMATOLOGIC  
 ENDOCRINE  
 RENOTOXICITY  
 CARCINOGENICITY  
 GENOTOXICITY

LABORATORY MONITORING  
 TREATMENT MONITORING LEVELS  
 METHODS

TREATMENT  
 LIFE SUPPORT  
 PATIENT DISPOSITION  
 TRIAL EXPOSURE  
 DECONTAMINATION  
 EYE EXPOSURE  
 DERMAL EXPOSURE

RANGE OF TOXICITY  
 SUMMARY  
 THERAPEUTIC DOSE  
 MINIMAL LETHAL EXPOSURE  
 MAXIMUM TOLERATED EXPOSURE  
 ANTIDOTE  
 TOXICITY INFORMATION  
 KINETICS  
 ABSORPTION  
 DISTRIBUTION  
 METABOLISM  
 EXCRETION  
 ELIMINATION HALF-LIFE  
 PHARMACOKINETICS/TOXICOLOGY  
 TOXICOLOGIC MEDICATIONS  
 PHYSICO-CHEMICAL  
 PHYSICAL CHARACTERISTICS  
 MOLECULAR WEIGHT  
 OTHER

REFERENCES  
 GENERAL BIBLIOGRAPHY

8.4.2) ORAL/PARENTERAL EXPOSURE  
 A) MANAGEMENT OF MILD TO MODERATE TOXICITY  
 1) Treatment is symptomatic and supportive. Correct any significant fluid and/or electrolyte abnormalities in patients with severe vomiting.  
 2) MANAGEMENT OF SEVERE TOXICITY  
 1) Treatment is symptomatic and supportive. Treat seizures with IV benzodiazepines, barbiturates or propofol may be needed if seizures persist or recur. Treat ventricular dysrhythmias using ACLS protocols. Endotracheal intubation and mechanical ventilation are likely to be necessary.  
 2) DECONTAMINATION  
 1) PRECIPITANT: Precipitant GI decontamination is not recommended because of the risk of CNS depression or seizures and subsequent aspiration.  
 2) INGESTION: Consider insertion of a nasogastric tube to aspirate gastric contents if it can be performed soon (within an hour) after a very large ingestion. Protection of the airway should be ensured as there is a high risk of CNS depression and aspiration.  
 3) AIRWAY MANAGEMENT  
 1) Monitor for inadequate oxygenation and ventilation due to significant CNS depression and inadequate airway protection. Intubation and assisted ventilation may be necessary.  
 2) ANTIEMETIC  
 1) There is no specific antidote for benzene exposure. The majority of therapy is aggressive supportive care.  
 3) REQUIRE  
 1) VENTRICULAR ARRHYTHMIA  
 1) Initiate continuous cardiac monitoring, obtain an ECG, and administer oxygen. Evaluate for hypoxia, acidosis, and electrolyte disorders. Lidocaine and amiodarone are generally first line agents for stable monomorphic ventricular tachycardia, particularly in patients with underlying impaired cardiac function. Unstable rhythms require immediate cardioversion.  
 4) OBSERVATION CRITERIA: All patients with symptoms or a history of more than a slip ingestion should be admitted to a healthcare facility.  
 5) DISCHARGE CRITERIA: All symptomatic patients and all those with significant exposures should be evaluated for monitoring and laboratory or high exposure.  
 6) TOXICOGENETICS  
 1) Benzene is absorbed after ingestion, inhalation, and by dermal exposure. Undergoes extensive hepatic metabolism, with subsequent urinary excretion of metabolites.  
 4) DIFFERENTIAL DIAGNOSIS  
 1) Exposures to many of the heavy metals which exhibit multisystem effects, such as arsenic, thallium, and potassium.  
 8.4.3) INHALATION EXPOSURE  
 All first, move the patient to fresh air. Administer supplemental oxygen and assist ventilation as required. Monitor closely for respiratory distress or cough which may be secondary to respiratory tract irritation, bronchitis, or pneumonitis. Treat bronchospasm with inhaled beta-2 agonist and oral or inhaled corticosteroids.  
 8.4.4) EYE EXPOSURE  
 All single exposed eyes with copious amounts of room temperature water or normal saline for at least 15 minutes. If irritation, pain, swelling, lacrimation, or photophobia persist, the patient should be seen by an ophthalmologist.  
 8.4.5) DERMAL EXPOSURE  
 A) OVERVIEW  
 1) Remove contaminated clothing and wash exposed area thoroughly with soap and water.

Drill down to specific information, including clinical effects, treatment, abstracts, and more.

**FOR MORE INFORMATION**

Send us an email at [globalhealthcare@truvenhealth.com](mailto:globalhealthcare@truvenhealth.com) or visit [truvenhealth.com/global](http://truvenhealth.com/global)

**ABOUT TRUVEN HEALTH ANALYTICS**

Truven Health Analytics delivers unbiased information, analytic tools, benchmarks, and services to the healthcare industry. Hospitals, government agencies, employers, health plans, clinicians, pharmaceutical, and medical device companies have relied on us for almost 40 years in 5,500 hospitals. We combine our deep clinical, financial, and healthcare management expertise with innovative technology platforms and information assets to make healthcare better by collaborating with our customers to uncover and realize opportunities for improving quality, efficiency, and outcomes. With more than 2,000 employees globally, we have major offices in Ann Arbor, Mich.; Chicago; and Denver. Advantage Suite, Micromedex, ActionOI, MarketScan, and 100 Top Hospitals are registered trademarks or trademarks of Truven Health Analytics.