Protocols are written instructions for caregivers to follow when individuals have specific or frequent problems from a health concern that usually has a predictable outcome. Protocols are problem oriented. They explain what to do about a health problem. They contain a description of the problem, when and how to intervene, when to call 911 and who to notify. Protocols give guidance to caregivers on what signs and symptoms to look for. Protocols need to be specific to the setting and the individual. For instance, if three individuals living in the same home have seizure protocols, they should all read differently. There will be some similarities, such as basic safety guidelines and documentation requirements.

Procedures are task oriented. Procedures provide step-by-step instructions on how to do a task. For example: “how to administer a gastrostomy feeding” or “how to empty a Foley catheter bag.”
WHAT IS PICA?

- Pica is an eating disorder that involves the consumption of non-food substances. The term pica originates from the Latin word for "magpie", a bird known to have an appetite for a diversity of objects, including inedible objects. Some common examples of pica include ingestion of dirt, dust, paper, paper clips, plaster, string, pencils, staples, clothes, plastic, and cigarette butts.

PICA TYPES

- Acuphagia - sharp objects
- Amylophagia - laundry starch
- Coprophagia - feces
- Cautopyreophagia - burnt matches
- Foliophagia - leaves, grass
- Geophagia - sand, clay, dirt
- Lignophagia - wood, bark, twigs
- Lithophagia - stones and pebbles
- Pagophagia - ice, freezer frost
- Plumbophagia - lead items
- Tobaccophagia - cigarettes butts
- Trichophagia - hair
CONSUMER NAME
Tailor to the needs of the consumer
IDENTIFY PERSON

EMERGENCY!!
Call 911 and start emergency procedures as trained for the following situations:
● Blocked Airway
● Difficulty Breathing/Talking
● Difficulty Swallowing
● Sudden Sleepiness
● Non-Responsiveness
● Stops Breathing
● Burns, Blisters, Redness Around or in the Mouth
● Moderate to Severe Vomiting
● Vomiting Blood
POISON

- Call poison control @ # 1-800-222-1222 if it is known or suspected that consumer has ingested toxic substances (See attached list of common harmful household chemicals). Concurrently call 911 and have consumer taken to the hospital/ER.

EMERGENCY FOLLOW-UP

- After resolution of the EMERGENCY SITUATION proceed with the facility's incident reporting policy and procedures.

BRIEF DESCRIPTION OF THE PROBLEM

- Reason why consumer is at risk.
- Example: Mickey M. since October 1998 has had a history of consuming non-food items such as (note consumer’s preferred non-food items). Mickey has demonstrated the following pica behaviors at/during…..etc (Describe environments, situations, activities where pica has occurred and is most likely to re-occur).
PREVENTIVE MEASURES

Prevention Is The Best Intervention

◆ TRAIN: Provide pica training to all staff/family (people who come in contact with consumer), in all locations where the consumer spends time. Make sure all caregivers understand the consumer’s risk for engaging in pica.

PREVENTIVE MEASURES

◆ SUPERVISE: Ensure close supervision of the individual. Perform routine surveillance sweeps for targeted ingestible items of the areas frequented by the consumer

PREVENTIVE MEASURES

◆ LIMIT ACCESS: To unsafe environments that are not rigorously monitored for small ingestible items and/or consumer’s preferred non-food items
PREVENTIVE MEASURES

◆ AVOID UNSAFE ITEMS: Avoid clothing with buttons, bows, tags, that can be pulled off or torn. Avoid items such as toys or gifts with small pieces that can be broken/torn or chewed. Avoid unsupervised access to soaps, gels, creams, shampoos, etc.

SAFE REPLACEMENTS:


ENGAGE:

◆ ENGAGE: Increasing the number of structured activities and levels of engagement with other people has also been shown to reduce pica behavior. It is important to look at how many structured daily activities the individual takes part in and consider whether this should be increased to reduce boredom.
INTERVENTIONS

◆ If consumer ingests a small non-toxic item such as a button, coin, bead without incident of choking monitor bowel movements for passage of object for four days, notify physician if object has not passed in feces during that time period
◆ If ingestion is suspected, monitor, bowel movements, assess the consumer for signs and symptoms of bowel obstruction, infection, poisoning or other adverse effects

WHEN TO NOTIFY THE PHYSICIAN

◆ Refusal of food or fluid
◆ Decreased food or fluid intake
◆ Lack of bowel movements or small watery stools
◆ Complaints of abdominal pain or discomfort
◆ Vomiting
◆ Fever
◆ Hard abdomen
◆ Extended, protruding abdomen
◆ Stooped or hunched over walk (if not typical for consumer)
◆ Complaints of feeling ill, refusing to get out of bed, work, or participate in favorite activities

POST PHYSICIAN FOLLOW-UP

◆ After PHYSICIAN FOLLOW-UP proceed with the facility’s incident reporting policy and procedures.
INITIAL PICA BEHAVIOR

It is important to notify physician and include the following:

- Clear description of behavior, noting pica is a new behavior
- Data collection, if any, i.e. frequency, environments, preferred items

COMMUNICATING WITH HEALTH CARE PROVIDER

- Information provided to the Health Care Provider will help in obtaining appropriate medical management for the consumer. Further referrals might be warranted to rule out medical reasons such as depression, and or dietary abnormalities such as low iron, zinc, magnesium, and elevated copper levels.

- Persons with pica are also at a higher risk for lead poisoning and parasitic infections due to the ingestion of items such as feces, lead paint, paper, clay and soil
SIGN OFF

- All protocols should include name of person(s) completing the protocol, date and also review dates
- The protocol should be reviewed periodically and updated as needed
TEMPLATE

- All protocols should be individualized. The protocol should be developed by the person(s) who is most familiar with the consumer along with the treating physician and in conjunction with the behavioral analyst.

QUESTIONS AND ANSWERS