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Executive Director

SIGNATURE ON FILE IN EMS OFFICE  
Medical Director

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**PEDIATRIC RESPIRATORY ARREST**

- I. AUTHORITY: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. PURPOSE: To serve as the treatment standard for EMT-Is and EMT-Ps in treating patients.
- III. PROTOCOL:

**STANDING ORDERS**

**ABCs**

**SECURE AIRWAY**

As appropriate. If BLS airway alone returns spontaneous respirations, oxygenate at high flow rate and assist ventilations as necessary. Confirm tube placement, if intubated, with end-tidal CO<sub>2</sub> detector and esophageal detector device. **Continuous waveform capnography should be used in all intubated patients, if available.**

**MONITOR**

Treat rhythm as appropriate.

**IV/IO ACCESS**

TKO with microdrip tubing and volume control chamber.

**DRAW BLOOD SAMPLE**

Test for glucose. Refer to ALOC Policy 555.31, if blood sugar less than 75 mg/dL.

**CONSIDER**

**AIRWAY OBSTRUCTION**

Refer to Airway Obstruction Policy 555.21.

**NALOXONE**

0.1 mg/kg IV/IO/ET/SQ/IM, if mental status and respiratory effort are depressed and the child is not a newborn and there is a strong suspicion of opiate overdose. Maximum single dose 2 mg. May repeat once in 3 minutes if partial response to treatment.