

APPROVED: SIGNATURE ON FILE IN EMS OFFICE
Executive Director

SIGNATURE ON FILE IN EMS OFFICE
Medical Director

EFFECTIVE DATE 01/2004
SUPERSEDES: _____
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PEDIATRIC ALTERED LEVEL OF CONSCIOUSNESS

- 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: Characterize by a Glasgow Coma Score less than 15, mental confusion, unconsciousness.
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STANDING ORDERS

ABC

OXYGEN:

MONITOR:

Treat rhythm as appropriate.

DRAW BLOOD:

Test for glucose.

IV/IO ACCESS

TKO with microdrip tubing and volume control chamber

DEXTRROSE:

If blood glucose less than 75mg/dl: D50W 1 ml/kg IV for patient over 2 years or D25W 2 ml/kg IV for patients under 2 years. May repeat once. Give oral glucose to patients who are awake and have an intact gag reflex. Recheck blood glucose in 5 minutes.

GLUCAGON:

[KEMM1]
0.05 mg/kg IM if blood glucose less than 75 mg/dl and ~~no~~ IV/IO access is not immediately available. May repeat once. Recheck blood glucose in 5 minutes.

CONSIDER CAUSE:

- Shock - refer to Non-Traumatic Shock Policy 555.41
- Toxic Exposure - refer to Policies 555.51-555.56
- Head Trauma - refer to Head-Neck-Facial Trauma Policy 555.84

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.