Pediatric Altered Mental Status

The purpose of this protocol is to provide for the assessment and treatment of patients with altered mental status of unknown etiology such as alcohol, trauma, poisonings, seizures, behavioral problems, stroke, environmental causes, infection, etc.

Pre-Medical Control

MFR/EMT/SPECIALIST/PARAMEDIC

1. Follow **Pediatric Assessment and Treatment Protocol**.
2. Restrain patient if necessary, refer to **Physical Patient Restraint Procedure**.
3. If patient is not alert or vital signs are unstable:
    A. Evaluate and maintain airway, provide oxygenation and support ventilations as needed.
    B. If no concern regarding spinal injury, place the patient on either side.

EMT/SPECIALIST/PARAMEDIC

4. **If the patient is alert** but demonstrating signs of hypoglycemia, measure blood glucose level, if available.
    A. If less than 60 mg/dl administer oral high caloric fluid.

PARAMEDIC

5. If glucose is less than 60 mg/dl, administer Dextrose 50 %, 2 ml/kg IV.
    A. Dextrose 12.5% for children under 1 yr.
    B. Dextrose 25% for children between 1 and 12 years old.
6. Administer naloxone at 0.1 mg/kg IV/IM (maximum dose 2 mg), repeat as indicated.

Post-Medical Control

1. Repeat Dextrose as indicated.
2. Repeat Naloxone as indicated.

NOTE: To obtain Dextrose 12.5%, discard 37.5 ml out of one amp of D50, then draw 37.5 ml of NS into the D50 amp; administer as indicated above.

To obtain Dextrose 25%, discard 25 ml out of one amp of D50, then draw 25 ml of NS into the D50 amp; administer as indicated above.