

Altered Level of Consciousness

CRITERIA

1. Any alteration in level of consciousness. Determine the appropriate arm of the protocol from patient findings.
2. Common causes of altered level of consciousness include:
 - A. Alcohol
 - E. Epilepsy (seizure disorder)
 - I. Infection
 - O. Overdose (narcotics or poisoning)
 - U. Uremia (kidney impairment)
 - T. Trauma (see *Trauma*, page Pediatric-20)
 - I. Insulin (hypoglycemia) or increased intracranial pressure
 - P. Psychiatric
 - S. Shock, Stroke, Sickle cell anemia

PROTOCOL

B E I P 1. Provide spinal immobilization if trauma cannot be ruled out.

B E I P 2. Ensure patent airway and oxygenation with BVM or non-rebreather mask of appropriate size.



Consider intubation if airway and ventilation cannot be maintained.

B E I P 3. Assess circulation.

B E I P 4. Obtain vital signs.

I P 5. Monitor cardiac status.

E I P 6. Establish IV/IO access (IO is an **I P** skill in full arrest and **[I] P** for all other cases) and obtain blood sample per agency OMD.

B E I P 7. Check blood glucose (WITH OR WITHOUT IV access).

Suspected Hypoglycemia

Criterion

Glucometer reading < 60 mg/dl.

Protocol

- [B] E I P** 1. Administer oral glucose if able to maintain own airway:
- * Squeeze small portions from dispenser or use small portions on tongue depressor to place glucose between cheek and gum
 - * Lightly massage area between cheek and gum to hasten uptake
 - * DO NOT use large portions (airway hazard).
 - * If level of consciousness begins to fall, discontinue administration

OR

Altered Level of Consciousness

E I P * *Patient < 8 years old*: Administer **Dextrose 25% IV 2 mL/kg**.



Dilute **Dextrose 50%** 1:1 with saline to make **D₂₅**

E I P * *Patient 8 years or older*: Administer **Dextrose 50% IV 2 mL/kg**

OR

[E] [I] P * Consider **Glucagon** if no IV access **OR** if unable to administer oral glucose

* < 20 kg 0.5 mg

* > 20 kg 1 mg

[E] I P 2. Check blood glucose 5 minutes after medication administration. Treat appropriately.

Suspected Hypovolemia

Criterion

1. Signs & symptoms of shock.
2. Blood pressure lower than normal (see vital signs table on page Pediatric-ii).

Protocol

[E] I P 20 mL/kg 0.9% Saline up to 1000 mL bolus, continuously reassessing need for further fluid administration.

Suspected Narcotic Overdose

Criteria

Patient exhibits one or more of the following signs:

- * Pinpoint pupils
- * Bradypnea
- * Recent history of drug administration
- * Evidence of drug use by parent/caretaker or drug
- * Paraphernalia evident

Protocol

[E] I P Administer **Naloxone (Narcan) 0.1 mg/kg IV, IM, IO**

OR

0.2 mg/kg ET titrated to respiratory effect.