

Pediatric Altered Mental Status

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

- For pediatrics less than < 24 hours old – refer to **Newborn/Neonatal Assessment and Resuscitation-Treatment Protocol**
- For critically ill patients refer to **Pediatric Crashing Patient/Impending Arrest-Treatment Protocol**
- 1. Follow **General Pre-hospital Care-Treatment Protocol**.
- 2. Pediatric patients (≤ 14 years) utilize **MI MEDIC** for appropriate medication dosage. When unavailable utilize pediatric dosing listed within protocol.
- 3. Restrain patient, if necessary, refer to **Patient Restraint-Procedure Protocol**.
- 4. Ensure adequate oxygenation, ventilation, and work of breathing.
 - ⚙ A. Monitor SpO₂
 - Ⓢ B. Consider use of capnography
- ⚙ 5. Check blood glucose (may be MFR skill, see **Blood Glucose Testing-Procedure Protocol**
- 6. Check temperature if febrile go to **Pediatric Fever-Treatment Protocol**
- Ⓢ 7. Start IV/IO if needed per **Vascular Access & IV Therapy-Procedure Protocol**
- 8. If blood glucose < 60 mg/dl:
 - A. Altered, able to swallow AND 3 months old or older– administer **oral glucose**.
 - Ⓢ B. Not alert – administer **dextrose** according to **MI MEDIC** or table below

Color	Age	Weight	Dose	Concentration	Volume		Concentration	Volume
Grey	0-2 months	3-5 kg (6-11 lbs.)	2.5g	Dextrose 12.5%	20 mL	OR	Dextrose 10%	25 mL
Pink	3-6 months	6-7 kg (13-16 lbs.)	3.25g	Dextrose 25%	13 mL	OR	Dextrose 10%	33 mL
Red	7-10 months	8-9 kg (17-20 lbs.)	4.25g	Dextrose 25%	17 mL	OR	Dextrose 10%	43 mL
Purple	11-18 months	10-11 kg (21-25 lbs.)	5g	Dextrose 25%	20 mL	OR	Dextrose 10%	50 mL
Yellow	19-35 months	12-14 kg (26-31 lbs.)	6.25g	Dextrose 25%	25 mL	OR	Dextrose 10%	63 mL
White	3-4 years	15-18 kg (32-40 lbs.)	8g	Dextrose 25%	32 mL	OR	Dextrose 10%	80 mL
Blue	5-6 years	19-23 kg (41-50 lbs.)	10g	Dextrose 25%	40 mL	OR	Dextrose 10%	100 mL
Orange	7-9 years	24-29 kg (52-64 lbs.)	12.5g	Dextrose 50%	25 mL	OR	Dextrose 10%	125 mL
Green	10-14 Years	30-36 kg (65-79 lbs.)	15g	Dextrose 50%	40 mL	OR	Dextrose 10%	150 mL

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9. Per MCA selection, if unable to start IV, administer **glucagon** IM/IN (if available per MCA selection) according to MI-MEDIC, (may be EMT skill per MCA selection). If **MI MEDIC** is unavailable follow dosing as below.

Glucagon administration per MCA Selection

☐ Not included

	Glucagon IM *Injectable formulation ONLY*	Glucagon IN *Intranasal formulation ONLY*
	A. Patients < 5 years of age administer glucagon 0.5 mg IM B. Patients ≥ 5 years of age administer glucagon 1 mg IM	A. Patients < 5 years of age Do NOT Administer B. Patients ≥ 5 years of age administer glucagon 3 mg IN
EMT	☐	☐
Specialist	☐	☐
Paramedic	☐	☐

*INTRANASAL GLUCAGON ADMINISTRATION: Only glucagon that is FDA-approved for nasal administration (e.g., Baqsimi(R)) may be given by IN route. Injectable glucagon is not to be administered via IN route. EMS clinicians may assist family/patient care givers in administering glucagon that is FDA-approved for IN use, if prescribed for the patient (regardless of age).

10. If patient respiratory depression persists and/or patient has not regained consciousness despite adequate oxygenation and ventilatory support administer **naloxone** per **Opioid Overdose Treatment and Prevention-Treatment Protocol**



11. Contact Medical Control for repeat **dextrose**.

12. Contact Medical Control for repeat **naloxone**.

NOTE:

- Instructions for diluting **dextrose**
 - To obtain **dextrose 10%**, discard 40 ml out of one amp of D50, then draw up 40 ml of **NS** into the D50 ampule
 - 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 ampule.
 - To obtain **dextrose 25%**, discard 25 ml out of one amp of D50, then draw 25 ml of **NS** into the D50 ampule.
 - May utilize **dextrose 10%** for all ages 5 ml/kg (0.5 gm/kg) up to 250 ml, according to **Dextrose-Medication Protocol**.
- To avoid extravasation, a patent IV must be available for IV administration of

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dextrose. **Dextrose** should always be pushed slowly (e.g., over 1-2 minutes).

Medication Protocols

Dextrose

Glucagon

Naloxone