COUNTY OF SAN DIEGO EMERGENCY MEDICAL SERVICES
POLICY/PROCEDURE/PROTOCOL

No. S-161
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SUBJECT: PEDIATRIC TREATMENT PROTOCOL -
ALTERED NEUROLOGIC FUNCTION (NON-TRAUMATIC)

Date: 07/01/2018

BLS	ALS

• Ensure patent airway, O_2 and/or ventilate prn
• O_2 Saturation
• Spinal stabilization when indicated
• Secretion problems; position on affected side
• Do not allow patient to walk
• Restrain prn
• Monitor blood glucose prn
 	
Hypoglycemia (suspected) or patient's glucometer results, if available, read <60 mg/dL (Neonate <45 mg/dL):
 o If patient is awake and has gag reflex, give oral glucose paste or 3 tablets (15 g). Patient may eat or drink if able.
 o If patient is unconscious, NPO.
 	
Seizures:
 o Protect airway, and protect from injury.
 o Treat associated injuries.
 o If febrile, remove excess clothing/covering.
 	
Behavioral Emergencies:
 o Restrain only if necessary to prevent injury.
 o Avoid unnecessary sirens.
 o Consider law enforcement support.
	• IV <u>SO</u> adjust prn
	• Monitor EKG /blood glucose prn
	• Capnography <u>SO</u> prn
	
	Symptomatic ?opioid OD (*excluding opioid dependent pain management patients*):
	 o Naloxone per drug chart IN/IV/IM <u>SO</u>. MR <u>SO</u>
	
	Symptomatic ?opioids OD in opioid dependent pain management patients:
	 o Naloxone titrate per drug chart IV (dilute IV dose per drug chart) or IN/IM per drug chart <u>SO</u>. MR **BHO**
	
	Hypoglycemia:
	Symptomatic patient unresponsive to oral glucose agents:
	 o D_{10} per drug chart IV <u>SO</u> if BS <60 mg/dL (Neonate <45 mg/dL)
	 o If patient remains symptomatic and BS remains <60 mg/dL (Neonate <45 mg/dL) MR <u>SO</u>
	 o **If no IV**: Glucagon per drug chart IM <u>SO</u> if BS <60 mg/dL (Neonate <45 mg/dL)
	
	Seizures:
	For:
	   A. Ongoing generalized seizure lasting $\geq$5 minutes (includes seizure time prior to arrival of prehospital provider) <u>SO</u>
	   B. Partial seizure with respiratory compromise <u>SO</u>
	   C. Recurrent tonic-clonic seizures without lucid interval <u>SO</u>
	GIVE:
	 o Versed per drug chart slow IV, (d/c if seizure stops) <u>SO</u>. MR x1 in 10 minutes <u>SO</u>
	If no IV:
	 o Versed per drug chart IN/IM <u>SO</u>. MR x1 in 10 minutes <u>SO</u>