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 **General Pre-hospital Care Protocol**.
2. Restrain patient if necessary, refer to **Patient Restraint Procedure**.

MFR/EMT/SPECIALIST

3. For a known diabetic, consider small amounts of oral glucose paste, buccal or sublingual.

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.
5. **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 suspected spinal injury, place the patient on either side.

SPECIALIST/PARAMEDIC

6. If glucose is less than 60 mg/dl, and patient is demonstrating signs of hypoglycemia:
   A. Administer Dextrose 50%, 25 grams (50 ml) IV or small amounts of oral glucose paste, buccal or sublingual.
   B. Per MCA selection, if unable to start IV, when Dextrose 50% is indicated, administer glucagon.

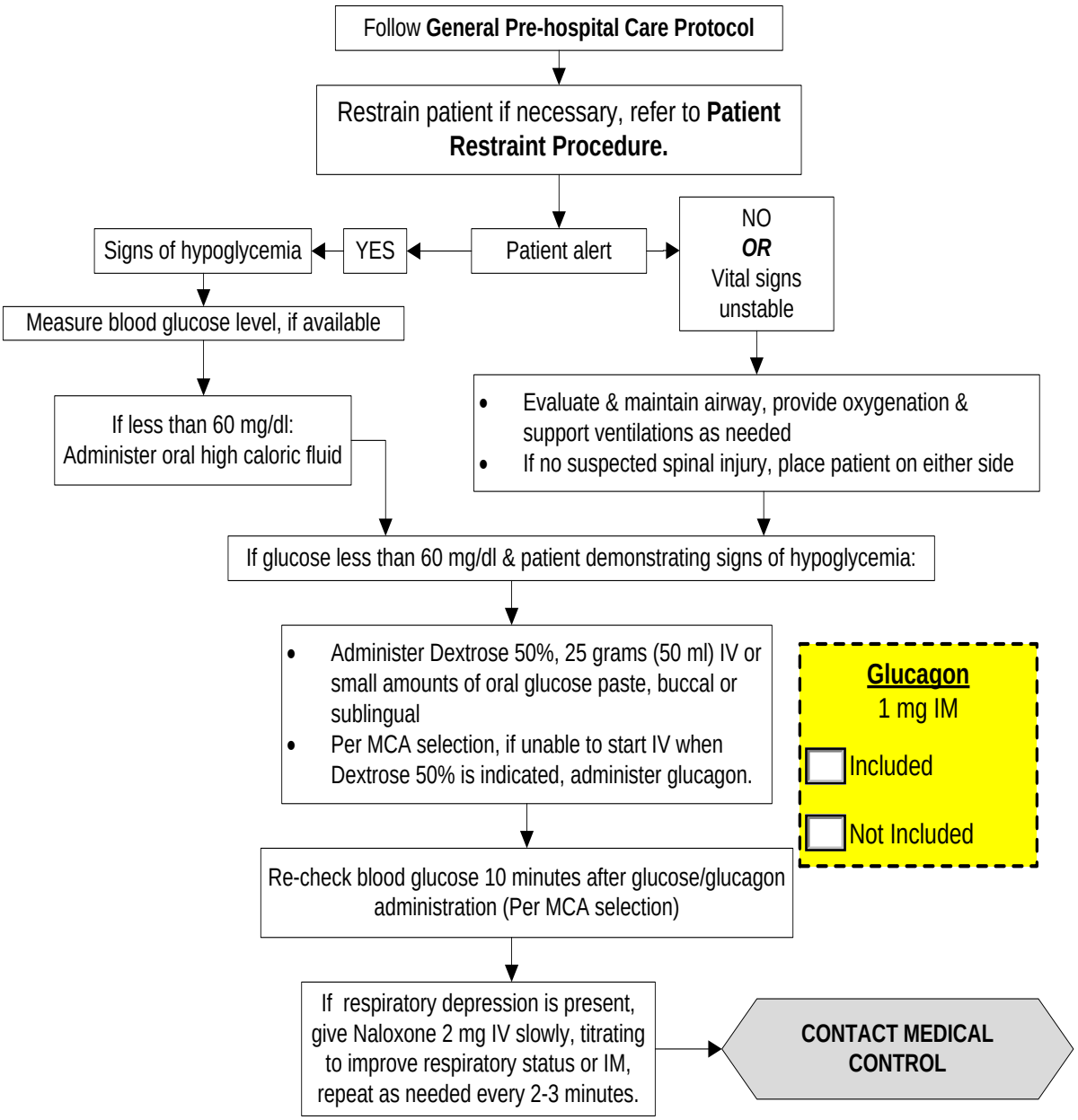
Glucagon
1 mg IM

☐ Included

☐ Not Included

7. Recheck the blood glucose 10 minutes after glucose/glucagon administration (Per MCA selection).

8. If respiratory depression is present, administer Naloxone up to 2 mg IV slowly, titrating to improve respiratory status or IM , repeat as needed every 2-3 minutes.

9. Contact Medical Control.

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