

## Michigan OBSTETRICS AND PEDIATRICS PEDIATRIC ALTERED MENTAL STATUS

Initial Date: 11/2012
Revised Date: 05/24/2023
Section: 4-4

## 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 cards 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
  - S 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
- Start IV/IO if needed per Vascular Access & IV Therapy-Procedure Protocol
  - 8. Altered and able to swallow administer oral glucose if:
    - A. 2 months old or younger and glucose is <40 mg/dL
    - B. 3 months old or older and glucose is <60 mg/dL.
- 9. Not alert administer **dextrose** according to MI-MEDICS CARDS or table below
  - A. 2 months old or younger and glucose is <40 mg/dL
  - B. 3 months old or older and glucose is <60 mg/dL

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



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S 10. Per MCA selection, if unable to start IV, administer glucagon IM/IN (if available per MCA selection) according to MI-MEDIC cards, (may be EMT skill per MCA selection). If MI MEDIC cards are unavailable following dosing as below.

Glucagon administration per MCA Selection						
EMT						
Specialist						
Paramedic						

- 11. 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
- 12. Contact Medical Control for repeat **dextrose**.
- 13. Contact Medical Control for repeat naloxone.

## NOTE:

- 1. Instructions for diluting **dextrose** 
  - a. To obtain **dextrose 10%**, discard 40 ml out of one amp of D50, then draw up 40 ml of **NS** into the D50 ampule
  - b. 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.
  - c. To obtain **dextrose 25%**, discard 25 ml out of one amp of D50, then draw 25 ml of **NS** into the D50 ampule.
  - b. May utilize **dextrose 10%** for all ages 5 ml/kg (0.5 gm/kg) up to 250 ml, according to **Dextrose-Medication Protocol**.
- 2. To avoid extravasation, a patent IV must be available for IV administration of **dextrose**. **Dextrose** should always be pushed slowly (e.g., over 1-2 minutes).

Medication Protocols

Dextrose

Glucagon

Naloxone

MCA Name:

MCA Board Approval Date: MCA Implementation Date: MDHHS Approved: 5/24/23