

## Michigan OBSTETRICS AND PEDIATRICS PEDIATRIC ALTERED MENTAL STATUS

Initial Date: 11/2012

Revised Date: 05/24/2023 03/17/2025 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.
- 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**
- 5 7. Start IV/IO if needed per Vascular Access & IV Therapy-Procedure Protocol
  - 8. If blood glucose < 60 mg/dl:
    - 8. A. Altered and, able to swallow AND 3 months old or older administer oral glucose-if:
    - A. 2 months old or younger and glucose is <10 mg/dL
    - B. 3 months old or older and glucose is <60 mg/dL.
- 9. S \_\_\_\_\_B. Not alert administer **dextrose** according to <u>MI-MEDICS CARDS</u>

  MEDIC or table below
  - A. 2 months old or younger and glucose is <10 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.)						

MCA Name:

MCA Board Approval Date: MCA Implementation Date:

MDHHS Approved: 5/24/233/17/25

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MDHHS Reviewed 2023-2025



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Green	10-14	30-36 kg	15g	Dextrose 50%	40 mL	OR	Dextrose 10%	150 mL		
	Years	(65-79 lbs.)								
							on IM/IN (if ava			
							kill per MCA so elow.	election). If		Formatted: Font: Bold
	MI MEDIC <u>cards are is</u> unavailable <u>followingfollow</u> dosing as below.  Glucagon administration per MCA Selection									
				□ Not include	<del>led</del>					
	Glucagon IM				Glucagon IN					
		tients less th minister <b>gluc</b>					less than 5 years			
										Formatted: Indent: Left: 0.75"
		tients aged 5 minister <b>gluc</b>					aged 5 or gre er glucagon			
EMT		⊕		<u> </u>						
Specialist		<del></del>					<del></del>			
Paramedic	;	<del></del>					<del></del>			
<u>Fai</u>	ameuic						Ш	4		Formatted: No Spacing, Widow/Orphan control
<u>*INT</u>	RANASAL (	<u>GLUCAGON</u>	ADMI	NISTRATION:	Only glud	agon	that is FDA-ap	proved for n	<u>asal</u>	To spacing, vison, or prior control
adm	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									
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				·						
	<del>11.</del> 10. If p	oatient respir	atory d	epression per	sists and/	or pat	ient has not re	gained		
							tory support a tion-Treatme			
	Protoco		Over	uose meanne	ill allu P	reven	uon-meaume	iit.		
				rol for repeat						
		maci wedica	ai COIIL	rol for repeat <b>ı</b>	iaiuxuile	•				
NOTE 1		for diluting <b>de</b>	vtrose	<b>.</b>						
	1. Instructions for diluting dextrose  a. A. To obtain dextrose 10%, discard 40 ml out of one amp of D50, then draw up   Formatted: Indent: Left: 0.81", Hanging: 0.25", No									
1	40 ml of <b>NS</b> into the D50 ampule  B. To obtain <b>dextrose 12.5%</b> , discard 37.5 ml out of one amp of D50, then draw									
	b 37.5 ml of NS into the D50 ampule									Formatted: Indent: Left: 0.81", Hanging: 0.19", No bullets or numbering, Tab stops: 1.38", Left + Not at 1"
MCA Name: MCA Board	Approval Date:							Page <b>2</b> of <b>3</b>		
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- e. <u>C.</u> To obtain **dextrose 25%,** discard 25 ml out of one amp of D50, then draw 25 ml of **NS** into the D50 ampule.
- b. D. 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