

ALTERED MENTAL STATUS	
ADULT	PEDIATRIC (≤34KG)
BLS	
<ul style="list-style-type: none"> • Universal Protocol #601 • Pulse Oximetry <ul style="list-style-type: none"> ○ O₂ administration per Airway Management Protocol #602 • Evaluate and treat for possible cause, see notes <p style="text-align: center;">Suspected, or confirmed (BG <60 mg/dL) Diabetic Emergency:</p> <ul style="list-style-type: none"> • Oral Glucose 15 Gm assist with self-administration in patient meeting criteria below, repeat as needed <ul style="list-style-type: none"> ○ Awake patient able to follow commands • Able to swallow without difficulty, and able to control secretions 	<p>Same as Adult</p>
BLS Elective Skills	
<p>All patients with Altered Mental Status Obtain Blood Sugar Level</p>	
ALS Standing Orders	
<p style="text-align: center;">With Blood Glucose (BG) <60 mg/dL</p> <p>Stable</p> <ul style="list-style-type: none"> • Oral Glucose 15 Gm assist with self-administration, repeat as needed <p>Unstable</p> <ul style="list-style-type: none"> • Dextrose 10% (250mL bag) 150 mL IV <ul style="list-style-type: none"> ○ Recheck BG level after 5 min ○ If BG < 60mg/dL – repeat 100 mL IV bolus <p style="text-align: center;">Or</p> • Dextrose 50% 25 Gm (50 mL) slow IV <p style="text-align: center;">Or</p> • Glucagon 1 mg IM if unable to establish IV after 2 attempts 	<p style="text-align: center;">With Blood Glucose (BG) <60 mg/dL (Newborn <40 mg/dL)</p> <p>Stable – Same as adult</p> <p>Unstable</p> <ul style="list-style-type: none"> • Dextrose 10% (250 mL bag) 0.5 Gm/kg (5 mL/kg) IV not to exceed 150 mL <ul style="list-style-type: none"> ○ A syringe may be utilized for administering small volumes < 50 mL ○ Recheck BG level after 5 min ○ If BG < 60mg/dL – repeat 0.5 Gm/kg (5 mL/kg) IV, not to exceed 100 mL <p style="text-align: center;">Or</p> • Dextrose 25% 0.5 Gm/kg (2 mL/kg) slow IV (see dilution preparation below) <p style="text-align: center;">Or</p> • Glucagon 0.1 mg/kg IM not to exceed 1 mg if unable to establish IV after 2 attempts
Base Hospital Orders Only	
<ul style="list-style-type: none"> • As needed 	<ul style="list-style-type: none"> • As needed

Notes

- Assisting a patient with Oral Glucose requires they be awake, able to swallow, and follow commands
- Dextrose 10% may be administered via IV drip tubing at an open (rapid) rate
- Pediatric dilution of Dextrose 50% when 25% pre-package is unavailable
 - Use a 250 mL bag NS and remove/discard 200 mL of NS
 - Add 50 mL of Dextrose 50%
 - Verify total bag volume = 100 mL
 - This concentration is now approximately 0.25 Gm/mL or 25% Dextrose
- Evaluate for possible causes and refer to appropriate treatment protocol:
 - A – alcohol
 - E – epilepsy
 - I – insulin
 - O – overdose/low oxygen (hypoxia)
 - U – uremia

 - T – trauma
 - I – infection
 - P – psychiatric
 - S - stroke