



- mg IV, IM or SQ initially and repeat as needed. If symptoms are unrelieved, follow written hospice orders or contact medical direction for additional doses to administer
- d. Anxiolytic if needed for anxiety, lorazepam 1 mg SL (pediatric 0.1 mg/kg) If not avail, consider the administration of [diazepam](#) or [midazolam](#).
7. If the patient has nausea [See [Nausea-Vomiting Guideline](#)]
8. If the patient has excessive secretions or aspiration, provide suctioning
9. If the patient is anxious or has delirium, in addition to nonpharmacologic interventions such as creating a quiet environment, frequent reassurance, touch and verbal orientation, consider:
- a. Benzodiazepines ([diazepam](#), [lorazepam](#), [midazolam](#))
- OR**
- b. Haloperidol 5 mg PO/IM/IV (pediatric: 0.5-1 mg)
- OR**
- c. Ziprasidone 20 mg IM (pediatric 5 years old or older 0.2 mg/kg IM)
10. If the patient appears dehydrated
- a. Encourage PO fluid intake if patient can swallow
- b. If available, offer ice chips and swabs soaked in ice water
- c. Consider administration of normal saline at 10–20 mL/kg IV
11. In collaboration with hospice or end-of-life care clinician, coordinate with guardian, power of attorney, or other accepted healthcare proxy if non-transport is considered

Patient Safety Considerations

1. Careful and thorough assessments should be performed to identify complaints not related to the illness for which the patient is receiving hospice or end-of-life care
2. Care should be delivered with the utmost patience and compassion

Notes/Educational Pearls

Key Considerations

1. Social interactions with family may affect end-of-life care
2. Scene safety should be considered when deciding on management

Pertinent Assessment Findings

1. Vital signs
2. Pain score
3. Neurologic exam
4. Lung sounds

Quality Improvement

Associated NEMSIS Protocol(s) (eProtocol.01) (for additional information, go to www.nemsis.org)

- 9914169 – Cardiac Arrest - Do Not Resuscitate
- 9914171 – Cardiac Arrest - Special Resuscitation Orders
- 9914177 – General - Exception Protocol

Key Documentation Elements

- Interaction with hospice or end-of-life care clinician
- Confirmation of advanced directive or other advanced care documentation