



4201

Symptomatic
Hypoglycemia

Treatment Protocol

Last Reviewed: **October 4, 2022**Last Revised: **September 5, 2023**

BLS Patient Management

- **Establish, maintain, and ensure:**
 - A. A patent and easily managed airway. Use manual maneuvers (head-tilt / chin-lift or jaw thrust), oropharyngeal suction and/or airway adjuncts (OPA / NPAs) as clinically indicated
 - B. Adequate respirations and tidal volume. Use a mouth-to-mask device or bag valve mask (BVM), when clinically indicated. Rescue ventilations via a BVM require the use of a manometer. Waveform / digital capnography is required when paramedics are present
 - C. Controlled bleeding. Use direct pressure and/or pressure dressing(s) and/or tourniquet(s) and/or hemostatic dressing(s), as clinically indicated
- **Oxygen**
As clinically indicated. Titrate to maintain, or increase, SpO₂ to a minimum of 94%. A range of 88-92% is acceptable for patients with a history of COPD
- Position the patient as clinically indicated for safety, comfort, and to meet physiologic requirements
- Attach ECG leads to the patient when a paramedic is present
- **For symptomatic hypoglycemia with blood glucose less than 80 mg/dL in adults or 70 mg/dL in pediatrics**
Adults: Glucose (oral) 15 gm (1 tube) PO. **MAY REPEAT PRN.**

Pediatrics:
ADMINISTRATION OF GLUCOSE (ORAL) TO PATIENTS WEIGHING LESS THAN 10 KG (≈22 LBS) IS NOT PERMITTED.
 - Weight is between 10 – 29 kg: Glucose (oral) as tolerated, PO. **MAY REPEAT PRN.**
 - Weight = 30 kg or greater: Glucose (oral) 15 gm (1 tube) PO. **MAY REPEAT PRN.**

ALS Patient Management

- Interpret and continuously monitor ECG, vital signs and SpO₂
- **For symptomatic hypoglycemia with blood glucose less than 80 mg/dL in adults or 70 mg/dL in pediatrics and neonates**
Adults: Dextrose 25 gm (D10%) IV/IO bolus or drip. **MAY REPEAT PRN.**

Pediatrics and neonates: Dextrose 5 mL / kg (D10%) IV/IO bolus or drip. **MAY REPEAT PRN.** For assistance with accurate dosing, refer to the REMSA PMDR or REMSA app.
- **For symptomatic hypoglycemia with blood glucose less than 80 mg/dL in adults or 70 mg/dL in pediatrics and neonates WHEN UNABLE TO ADMINISTER DEXTROSE**
Adults: Glucagon 1 mg (1 mL) IM. **ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).**

Pediatrics and neonates:
Weight = 21 kg (≈46 lbs) or less: Glucagon 0.5 mg IM.
Weight = 22 kg (≈48 lbs) or more: Glucagon 1 mg IM.
ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).
- **For symptomatic hypoglycemia with blood glucose less than 80 mg/dL in adults or 70 mg/dL in pediatrics WHEN UNABLE TO ADMINISTER DEXTROSE OR GLUCAGON**
Adults: Glucose (oral) 15 gm (1 tube) PO. **MAY REPEAT PRN.**

Pediatrics:
ADMINISTRATION OF GLUCOSE (ORAL) TO PATIENTS WEIGHING LESS THAN 10 KG (≈22 LBS) IS NOT PERMITTED.
 - Weight is between 10 – 29 kg (≈22-64 lbs): as tolerated, PO. **MAY REPEAT PRN.**
 - Weight = 30 kg or greater (≈66 lbs+): 15 gm (1 tube) PO. **MAY REPEAT PRN.**

Patient Disposition

- **CONTACT A SINGLE BASE HOSPITAL FOR ANY PATIENT THAT REFUSES TRANSPORT FOLLOWING THE INITIATION OF AN ALS TREATMENT**