



ORANGE COUNTY EMERGENCY MEDICAL SERVICES  
PREHOSPITAL ALS STANDING ORDERS

PRE-EXISTING ENDOTRACHEAL INTUBATION REQUIRING  
SEDATION - PEDIATRIC

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Date:  
Revised:

SO-P-120  
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09/23/2025  
  
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\*\*\*\* BASE HOSPITAL CONTACT REQUIRED \*\*\*\*

**ALS STANDING ORDERS:**

This standing order is for use **when a pre-existing endotracheal tube in a pediatric patient requires continued ventilation support but is having difficulty tolerating an endotracheal tube that is in proper position** (usually reflex coughing or choking).

1. Assess perfusion and blood pressure, if SBP > 80, consider sedation:
  - *Midazolam 0.1mg/kg (maximum 5mg) IV/IO/IM once.*
2. Re-assess blood pressure, if SBP < 80 after Midazolam:
  - *Give 20 mL/kg (maximum 250 mL) normal saline bolus and reassess blood pressure*
3. Monitor oxygenation/ventilation using pulse oximetry and/or waveform capnography.
4. Suction as needed.
5. Do not extubate an endotracheally intubated patient after Midazolam sedation.
6. Notify Base Hospital (CCERC preferred) that sedation has been required to support maintenance of intubation ventilation support.
7. ALS escort to nearest facility appropriate for the patient (CCERC, Trauma Center, Burn Center, ERC, etc.) and re-contact Base Hospital as needed.

Approved:

Review Dates:  
Final Date for Implementation: 4/1/2026  
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