

**Treatment Protocols*****Altered Mental Status (Non-Traumatic) - Adult*****Date: 07/01/2025****Policy #9030A****Adult BLS Standing Orders**

- **Universal Patient Protocol**
- Assess and control airway and breathing as needed per **Airway Policy**
- Oxygen PRN
- **Test glucose**
- Capnography
- Gather history from patient, and if patient unable to provide history, ask bystanders, family or friends
- Bring family or friend to hospital if available for history
- Assess for traumatic injury. If present, go to **Trauma Protocol**
- If suspected stroke or TIA, go to **Stroke Protocol**
- If suspected poisoning, including opioid overdose, go to **Poisoning Protocol**
  - Bring pill or medication bottles to hospital if possible
- If suspected Sepsis/SIRS, use **SIRS Protocol**
- For hypotension, use **Shock Protocol**

**HYPOGLYCEMIA, Glucose < 60 mg/dL (adult)**

- Administer glucose PO, if patient is alert, has a gag reflex, and can swallow:
  - Glucose paste on tongue depressor placed between cheek and gum
  - Granulated sugar dissolved in liquid

**SEIZURE**

- See **Seizure Protocol**

**Adult LALS Standing Order Protocol**

- Glucose monitoring
- Establish IV
- Capnography
- NS 500-1,000 mL IV MR x 1 to a max of 2,000 mL to maintain a SBP of  $\geq$  90 mmHg

**HYPOGLYCEMIA, Glucose < 60 mg/dL**

- Dextrose 25 gm IV for BS < 60 mg/dL or unobtainable x1, MR x1
- Glucagon – 1 mg IM x1 if no IV and BS level <60 mg/dl or unobtainable
- Repeat glucose testing following intervention

**Adult ALS Standing Order Protocol**

- Monitor/EKG
- Establish IV/IO
- Capnography
- Glucose monitoring
- Obtain 12 Lead EKG
- NS 500-1,000 mL IV MR x 1 to a max of 2,000 mL to maintain a SBP of  $\geq$  90 mmHg

**Intervene as appropriate per Airway Policy****HYPOGLYCEMIA, Glucose < 60 mg/dL**

- Dextrose 25 gm IV for BS < 60 mg/dL or unobtainable x1, MR x1 PRN for persistent hypoglycemia PRN
- Glucagon – 1 mg IM if no IV and BS level <60 mg/dl or unobtainable
- Repeat glucose testing following intervention

**Nausea/Vomiting**

- Ondansetron 4 mg IV/IO/IM/ODT PRN, MR x1, total 8 mg

**Treatment Protocols*****Altered Mental Status (Non-Traumatic) - Adult*****Date: 07/01/2025****Policy #9030A****Adult Base Hospital Orders**

- During times of dextrose shortage, up to two (2) types of dextrose solution can be carried in each unit: D10 and one other concentration. D10 is the only currently approved dextrose solution for pediatric patients.

A conversion chart for adult patients requiring dextrose

Concentration	Amount To Administer for Equivalent 1 Amp of D50 (25 grams glucose)
D50 (50 grams / 100 mL)	1 ampule or 50 mL
D25 (25 grams / 100 mL)	100 mL
D10 (10 grams / 100 mL)	250 mL
D5 (5 grams / 100 mL)	500 mL

## Notes

- D10 (dextrose 10% solution) is the only approved dextrose solution for pediatric patients.
- Liver patients will not necessarily respond well to glucagon administration and may require multiple dextrose administrations.

APPROVED:

SIGNATURE ON FILE – 07/01/25

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