



County of Santa Cruz

HEALTH SERVICES AGENCY

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EMERGENCY MEDICAL
SERVICES PROGRAM

Protocol No. N1
Reviewed 04/01/2010

Emergency Medical Services Program

Approved

Medical Director

Subject: ALTERED LEVEL OF CONSCIOUSNESS

I. BLS Treatment Protocol:

- A. Treat life threats. (See Policy 4000).
- B. Spinal precautions as indicated.
- C. If unconscious, place a dime size amount of glucose paste under the tongue.
- D. If pt can swallow on command, administer glucose paste or let patient self-administer glucose product.
- E. Prepare for transport / transfer of care.

II. ALS Treatment Protocol:

- A. Treat life threats. (See Policy 4000).
- B. Do BG Chem and if less than 70 mg/dl treat as needed.
- C. If conscious, consider giving glucose PO.
- D. Dextrose 50%, 25gms IVP. If level of consciousness improves, but not mentally clear, may repeat dextrose bolus. Recheck patency of IV line frequently.
- E. If no IV can be established and patient presents with altered mentation, give Glucagon 1unit (1mg) IM.
- F. Administer Narcan 0.5mg IVP/ IN or 1 mg IM. Narcan dose may be repeated in 3-5 minutes as indicated to a total of 2 mg. Titrate dose to respiratory effect. If more than 2 mg via any route is needed to support respirations, contact Base Station for additional orders.
- G. Transport.
- H. Repeat BG Chem.
- I. Contact Base Station.

Notes:

- If the patient's history of present illness/clinical presentation suggests acute hypoglycemia, give sugar even if the blood sugar reading is in the "low normal" range (70-80mg/dl).
- Glucagon often causes nausea and vomiting.
- IN = Intranasal
- Rapid IV administration of high doses of Narcan has been correlated with an increased incidence of severe withdrawal reactions. Patients also tend to awaken with more violent behavior when large IV doses are administered rapidly.