

## 8.02 PEDIATRIC ALTERED MENTAL STATUS

### KNOWN OR SUSPECTED HYPOGLYCEMIA

BLS Treatment
<ul style="list-style-type: none"><li>• Position of comfort.</li><li>• NPO, unless otherwise specified.</li><li>• Assess circulation, airway, breathing, and responsiveness.</li><li>• <b>Oxygen</b> as indicated.</li><li>• Provide Spinal Motion Restriction as indicated or position of comfort as indicated.</li><li>• Appropriately splint suspected fractures/instability as indicated.</li><li>• Bandage wounds/control bleeding as indicated.</li></ul> <p><b>Glucose Paste</b> or <b>oral Glucose</b> to known diabetic patients with symptoms of hypoglycemia.</p>
ALS Treatment
<p><b>Current American Heart Association Guidelines concerning Emergency Cardiac Care assessments and interventions shall always take precedence over local protocols when there is a conflict concerning techniques of resuscitation.</b></p>
<ul style="list-style-type: none"><li>• Advanced airway if indicated</li><li>• IV or IO of <b>Normal Saline</b> 10 ml/kg.</li><li>• Check blood glucose. If blood glucose &lt;60 mg/dl: administer <b>Dextrose</b></li><li>• If no IV or IO access: administer <b>Glucagon</b></li></ul>

### AMS OF UNKNOWN CAUSE

BLS Treatment
<ul style="list-style-type: none"><li>• Position of comfort.</li><li>• NPO, unless otherwise specified.</li><li>• Assess circulation, airway, breathing, and responsiveness.</li><li>• <b>Oxygen</b> as indicated.</li><li>• Provide Spinal Motion Restriction as indicated or position of comfort as indicated.</li><li>• Appropriately splint suspected fractures/instability as indicated.</li><li>• Bandage wounds/control bleeding as indicated.</li></ul> <p><b>Glucose Paste</b> or <b>oral Glucose</b> to known diabetic patients with symptoms of hypoglycemia.</p>
ALS Treatment
<ul style="list-style-type: none"><li>• IV or IO of <b>Normal Saline</b> at 10 ml/kg.</li><li>• <b>Naloxone</b>: Neonate = AVOID use in neonate</li><li>• Check blood glucose. If blood glucose &lt;60 mg/dl: administer <b>Dextrose</b></li><li>• If no IV or IO access: administer <b>Glucagon</b>.</li></ul>

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### APPARENT LIFE THREATENING EVENT (ALTE)

BLS Treatment
<ul style="list-style-type: none"><li>• Position of comfort.</li><li>• NPO, unless otherwise specified.</li><li>• Assess circulation, airway, breathing, and responsiveness.</li><li>• <b>Oxygen</b> as indicated.</li><li>• Provide Spinal Motion Restriction as indicated or position of comfort as indicated.</li><li>• Appropriately splint suspected fractures/instability as indicated.</li><li>• Bandage wounds/control bleeding as indicated.</li></ul> <p><b>Glucose Paste or oral Glucose</b> to known diabetic patients with symptoms of hypoglycemia.</p>
ALS Treatment
<ul style="list-style-type: none"><li>• IV or IO of <b>Normal Saline</b> As indicated</li><li>• <b>Naloxone</b>: Neonate = AVOID use in neonate</li><li>• Check blood glucose. If blood glucose &lt;60 mg/dl: administer <b>Dextrose</b></li><li>• If no IV or IO access: administer <b>Glucagon</b>.</li></ul>

#### ALTE is defined as:

- Age less than or equal to 2 years old.
- Episode frightening to the observer (may think the infant has died) and involves some combination of:
  - Apnea;
  - Color change (cyanosis, pallor, erythema, plethora);
  - Marked change in muscle tone (limpness);
  - Choking or gagging.