

PEDIATRIC ALTERED LEVEL OF CONSCIOUSNESS

UNIVERSAL ALGORITHM

- Identify and treat reversible causes
- Establish vascular access
- Utilize current Broselow tape
- Use adult protocols for patients > 34 kg

STABLE

UNSTABLE

OBERVE/MONITOR

If blood glucose is < 60 mg/dl and patient can self administer:

- **Oral Glucose** 15 Gm (1 tube), repeat as needed

If blood glucose is < 60 mg/dl, administer:

- **Dextrose 25%** 0.5 Gm/kg (2-4 ml/kg) (2 ml/kg) [Updated 12/18/07] slow IVP over 5 min (see dilution preparation in Drug Formulary)

If blood glucose is < 60 mg/dl and no success with two (2) IV attempts, administer:

- **Glucagon** 0.1 mg/kg IM, not to exceed 1 mg

If narcotic overdose is suspected and respirations are inadequate, administer:

- **Narcan** not to exceed 2 mg initial dose IVP/IM, titrated to maintain adequate respirations

OR

If patient is in extremis and no IV access administer:

- **Narcan** 0.4 mg SL injection, titrated to maintain adequate respirations

BASE PHYSICIAN ORDER ONLY

- **Diazepam** with agitated or combative ALOC patient
- **Charcoal** 1Gm/kg, not to exceed 30 Gm