Pediatric Altered Mental Status

History
- Past medical history
- Medications
- Recent illness
- Irritability
- Lethargy
- Changes in feeding / sleeping
- Diabetes
- Potential ingestion
- Trauma

Signs and Symptoms
- Decrease in mentation
- Change in baseline mentation
- Decrease in Blood sugar
- Cool, diaphoretic skin
- Increase in Blood sugar
- Warm, dry, skin, fruity breath, kussmaul respirations, signs of dehydration

Differential
- Hypoxia
- CNS (trauma, stroke, seizure, infection)
- Thyroid (hyper / hypo)
- Shock (septic-infection, metabolic, traumatic)
- Diabetes (hyper / hypoglycemia)
- Toxicological
- Acidosis / Alkalosis
- Environmental exposure
- Electrolyte abnormalities
- Psychiatric disorder

Pediatric Airway Protocol(s) if indicated
- Blood Glucose Analysis Procedure
  - IV Procedure
  - IO Procedure
- Spinal Immobilization Protocol if indicated

Blood Glucose Analysis Procedure

IV Procedure

IO Procedure

Spinal Immobilization Protocol

Blood Glucose ≤ 69 or ≥ 250

YES

Exit to Pediatric Diabetic Protocol

NO

Signs of shock
Poor perfusion

YES

Exit to Pediatric Hypotension / Shock Protocol

NO

Signs of OD
Toxicology related

YES

Exit to Pediatric Overdose / Toxic Ingestion Protocol

NO

Signs of Hypo / Hyperthermia

YES

Exit to Hypo / Hyperthermia Protocol

NO

B 12 Lead ECG Procedure

P Cardiac Monitor

Notify Destination or Contact Medical Control

Pearls
- Recommended Exam: Mental Status, HEENT, Skin, Heart, Lungs, Abdomen, Back, Extremities, Neuro
- Pay careful attention to the head exam for signs of bruising or other injury.
- Be aware of AMS as presenting sign of an environmental toxin or Haz-Mat exposure and protect personal safety.
- It is safer to assume hypoglycemia than hyperglycemia if doubt exists. Recheck blood glucose after Dextrose or Glucagon
- Consider alcohol, prescription drugs, illicit drugs and Over the Counter preparations as a potential etiology.
- Consider Restraints if necessary for patient's and/or personnel's protection per the restraint procedure.

Protocol 50
2012

This protocol has been altered from the original 2012 NCCEP Protocol by the Johnston County EMS System Medical Director