Neurological Emergencies N-1 Altered Level of Consciousness

Stabilize airway using appropriate adjunct (BLS or ALS airway) if necessary Oxygen - titrate SpO2 ≥95% OR Oxygen - High flow via BVM if patient is not breathing Cardiac monitor IV/IO access Blood glucose check Suspected Opioid Cause of Hypoglycemia Overdose ALOC? For suspected For seizures stroke refer to refer to Other type of Protocol N-2 Protocol N-4 **ALOC** For syncope/ near syncope refer to Protocol N-5 For patients with respiratory depression If patient has blood glucose ≤70 AND unresponsiveness, pinpoint pupils, or other signs of opioid overdose Dextrose 50% 25g IV/IO May repeat once for persistent blood Naloxone 2mg SLOW IV/IO/IM glucose ≤70 May repeat q2min to max of 8mg Titrate to respiratory effect Consider OR Oral Glucose 1 prepackaged dose for Naloxone 4 mg IN patients who are alert and has a gag reflex May repeat q2min to max of 16mg Titrate to respiratory effect If no IV/IO access and patient cannot

take oral glucose

Glucagon 1mg IM