

Southeast Michigan Regional
ADULT TREATMENT
ALTERED MENTAL STATUS

Initial Date: 11/15/2012
Revised Date: 6/16/2021

Section 3-1

Altered Mental Status

The purpose of this protocol is to provide for the assessment and treatment of patients with altered mental status. Consideration should be given to treatable and reversible causes due to hypoglycemia, hyperglycemia, opioid overdose, or possible stroke.

1. Follow **General Pre-hospital Care Protocol**.
2. **If the patient is not alert or vital signs are unstable:**
 - a. Evaluate and maintain airway, provide oxygenation and support ventilations as needed per **Emergency Airway Procedure**.
 - b. If no suspected spinal injury, place the patient in recovery position.
3. If respiratory depression is present due to suspected opioid overdose, administer Naloxone per **Naloxone Administration Procedure**.
4. Restrain the patient if necessary, refer to **Patient Restraint Procedure**.
5. For a known diabetic, consider small amounts of oral glucose if unable to measure blood glucose level.
6. For unknown etiology:
 - a. Measure blood glucose level.
 - i. If less than 60 mg/dL (hypoglycemia):
 1. administer oral glucose if there are no airway concerns
 2. If there are airway concerns, administer IV Dextrose 25 gm (if unable to start IV, consider I/O)
 - ii. If more than 250 mg/dl (hyperglycemia):
 1. begin administering 1 liter/hr of Normal Saline.
 - iii. Recheck the blood glucose 10 minutes after glucose/dextrose administration
 - b. Consider Stroke; follow **Stroke or Suspected Stroke Protocol**
 - c. Consider 12-Lead per **12-Lead ECG Protocol**
7. Contact Medical Control