



Summary of updated medical standing orders, base hospital treatment guidelines, and procedures effective October 1, 2017:

1. Hypoglycemia determination:

Wording for identification and treatment of hypoglycemia been clarified in all standing orders, base hospital treatment guidelines, and procedures that reference a blood glucose level for treatment of hypoglycemia:

Adult:

*Consider hypoglycemia with blood glucose analysis. In adults/adolescents, an exact cutoff value for Hypoglycemia has not been established because age and health cause variation in the effects of lower blood glucose levels. A blood glucose of 60 or less should be treated; if hypoglycemia is suspected and blood glucose is in the range of 60 to 80, treatment based on field impression is appropriate.*

*To treat hypoglycemia, administer one of the following:*

- ▶ *Oral glucose preparation, if airway reflexes are intact.*
- ▶ *10% Dextrose 250 mL (titrated for effect to improve consciousness).*
- ▶ *Glucagon 1 mg IM if unable to establish IV.*

*Note: IO access may be used for dextrose administration when patient is unconscious with blood glucose < 60, unable to establish IV and there is no response to IM glucagon.*

Pediatric:

*Blood glucose analysis, if blood glucose equal to or less than 60, administer one of:*

- ▶ *Oral glucose preparation, if tolerated and airway reflexes are intact.*
- ▶ *10% Dextrose 5 mL/kg IV (maximum 200 mL)*
- ▶ *Glucagon 0.5 mg IM if unable to establish IV.*

*Note: IO access may be used for dextrose administration when patient is unconscious with Blood glucose less than 60, unable to establish IV and there is no response to IM glucagon.*

2. PR-85 (D10 Drip):

Revised to clarify pediatric dosing.

3. SO-M-45 (Suspected Acute Cerebral Vascular Accident and Stroke Triage Criteria):

- A. Deleted seizure as an exclusion for triage to a stroke center
- B. Added “new-onset” slurred speech and unilateral loss of grip strength to ischemic stroke triage criteria.
- C. Emphasis on documenting name and phone number of person at scene who can confirm time of onset of stroke symptoms.

4. SO-P-45 (Bradycardia-Pediatric)

Revised to delete atropine from standing order and initiate rapid base hospital contact.

5. New Standing Orders:

- A. First Responder Oxygen Delivery
- B. First Responder AED
- C. BLS Naloxone

6. New Procedures:

- A. BLS Epinephrine Autoinjector
- B. BLS Glucometer

7. PR-30 Endotracheal Intubation

Removed EDD device as required step or equipment