

2009 GMVEMSC EMT-P Pediatric Prehospital Protocol

ALTERED MENTAL STATUS

Airway/IV 0.9 NS TKO/0₂
Determine BSL, if <60 mg/dl:
Dextrose 50% 1ml/kg if >25 kg
Dextrose 25% 2 ml/kg if >25kg *or*
Dextrose 50% 1ml/kg **diluted** with equal sterile H₂O
If <1 y/o:
Dextrose 25%/diluted with equal sterile H₂O, 2 ml/kg
If no IV
Glucagon 1 mg SC/IM
Repeat therapy if blood sugar <60 mg/dl
Narcan IV 0.1 mg/kg (max. 2mg)

ANAPHYLACTIC REACTION

Airway/IV 0.9 NS TKO/0₂ via NRB
Epi pen Jr. 0.15 mg < 30 kg
Epi Pen 0.3 mg > 30 kg
Bolus of 20 ml/kg if SBP < 100
If wheezing:
Albuterol 3ml/ Atrovent 0.5mg by Neb.
Repeat Albuterol x2
Benadryl 1 mg/kg (max 50mg) IVP/IM
Epi 0.5 mg 1:10,000 **slow** IVP
Glucagon 2 mg IVP/IM
If in arrest: 3 mg Epi 1:10,000 IVP

ASTHMA

Airway/IV 0.9 NS TKO/0₂ via NRB
Albuterol 3ml/ Atrovent 0.5mg by Neb.
Repeat Albuterol x2
Epi 0.01 mg/kg (1:1,000) SQ < 30 kg *or*
Epi 0.3 mg (1:1,000) SQ > 30 kg
*** Repeat Epi SQ**

ASYSTOLE/PEA

CPR for 2 min (unwitnessed)
Airway/O₂ /ETT/IV *or* IO
Monitor/AED
Epi 0.01 mg/kg 1:10,000 IV/IO
or Epi 0.1 mg/kg 1:1000 ETT
Repeat Epi q 3-5 min
Treat causes, consider hypoglycemia
Dextrose 50% 1ml/kg if >25 kg
Dextrose 25% 2 ml/kg if >25kg
Glucagon 1 mg IM if no IV
Treat causes, consider overdose
Narcan 0.1 mg/kg IVP
If renal dialysis
Calcium Chloride 0.2 ml/kg IVP
Sodium Bicarb 1mEq/kg IVP

BRADYCARDIA

Airway/IV 0.9 NS TKO/0₂ via NRB
CPR if HR < 60 bpm
Cardiac monitor
Epi 0.01 mg/kg 1:10,000 IV/I *or*
Epi 0.1 mg/kg 1:1,000 ETT
Repeat Epi q 3-5 min
If vagal tone *or* Primary AV block
Atropine 0.02 mg/kg IV/IO
(min. dose 0.1mg)
(max. dose 1.0 mg)
Repeat Atropine once
TCP 80 bpm @ gradual 5-200 mA
Sedate w/ Versed 0.1 mg/kg **slow** IV/IO
(max. dose 4 mg)

AIRWAY MANAGEMENT

May use Lidocaine 2% 2 mg/kg NEB
If resisting tube, Versed 0.1 mg/kg IVP

NON-TRAUMATIC SHOCK

Airway/IV 0.9 NS TKO/0₂ via NRB
Non-traumatic:
Fluid challenge 20 ml/kg
*** Repeat fluid bolus 20 ml/kg**
Consider second IV/IO
Dopamine drip
Start @ 5 mcg/kg/min (SBP > 100)
(max 20 mcg/kg/ml)
Uncontrolled bleeding
Consider second IV/IO
*** Contact MC to exceed 20 ml/kg bolus x3**

SEIZURES

Airway/IV 0.9 NS TKO/0₂ via NRB
BVM/NPA *during* Seizure
Valium 0.2 mg/kg (max 5 mg) SLOW IVP *or*
Versed 0.2 mg/kg (max 4 mg) IN
Persistent Seizures
Repeat Valium 5 mg IVP *or*
Repeat Versed @ 4 mg IN
Accucheck, if <60 mg/dl
Dextrose 50% 1ml/kg if >25 kg
Dextrose 25% 2 ml/kg if >25kg *or*
Dextrose 50% 1ml/kg **diluted** with equal sterile H₂O
If <1 y/o:
Dextrose 25% 2 ml/kg **diluted** with equal sterile H₂O
If no IV
Valium 0.5 mg/kg (max 10 mg) rectally
Glucagon 1 mg IM

FRACTURES/DISLOCATION/SPRAINS

For isolated extremity trauma
Airway/IV 0.9 NS TKO/0₂ via NRB
Morphine Sulfate 0.1 mg/kg **slow** IVP/SQ
(not for patients <2 y/o)
(max. dose 5 mg)
*** Morphine Sulfate 0.1 mg/kg up to 5 mg IVP**
*** Morphine Sulfate 0.1 mg/kg SQ if transport > 30 min**

VIOLENT PATIENTS

Consider medical causes
Consider:
Versed 0.2 mg/kg (max 4 mg) IN *or*
Valium 0.5 mg/kg PR (max 5 mg)

Courtesy of



TACHYCARDIA

Airway/IV 0.9 NS TKO @ AC/O₂ via NRB
Stable
Vagal Manuevers
Unstable
Adenosine 0.1 mg/kg IVP (max 6 mg)
Adenosine 0.2 mg/kg IVP (max 12 mg)
Cardioversion 1 j/kg
Cardioversion 2 j/kg
Sedate w/ Versed 0.1 mg/kg slow IV/IO
(max. dose 4 mg)

V-FIB/ PULSELESS V-TACH

CPR for 2 min (unwitnessed)
Airway/O₂ /ETT/IV *or* IO
Monitor/AED - Defib @ 2 j/KG
If witnessed, Defib immediately
Epi 0.01 mg/kg 1:10,000 IV/IO (0.1 ml/kg)
or Epi 0.1 mg/kg 1:1,000 ETT
Shock 4 J/kg after each drug dose
Amiodarone 5 mg/kg (max 300 mg) IVP
Amiodarone 5 mg/kg (max 300 mg) IVP
Treat possible causes
If no IV
Lidocaine 1 mg/kg (max 100 mg) ETT
If conversion to perfusing rhythm
If after Lidocaine bolus
Lidocaine drip 20-50 mcg/kg/min

POISONING/OVERDOSE

Airway/IV 0.9 NS TKO/0₂ via NRB
Narcan up to 0.1 mg/kg (max 2 mg) IVP *or*
Narcan 0.1 mg/kg (max 2 mg) IN
For tricyclic overdose:
*** Sodium Bicarb 1mEq/kg IVP**
For Calcium Channel overdose
*** Calcium Chloride 0.2 ml/kg IVP**
(max 500 mg)
*** Glucagon 1 mg IM/IVP**
For Beta Blocker overdose
*** Glucagon 1 mg IM/IVP**

DIALYSIS PT. in ARREST

Calcium Chloride 0.2 ml/kg IVP
(max 500 mg)
Flush IV line
Sodium Bicarb 1 mEq/kg slow IVP

NEONATAL RESUSCITATION

Priority of care
Warm, Dry off, Suction
Stimulate
Oxygen
Establish ventilations (BVM/ETT)
If HR <100 BVM
If HR < 60 bpm
Chest compressions @ 120/min
Epi 0.01 mg/kg 1:10,000 IV/IO *or*
Epi 0.1 mg/kg ETT
Repeat Epi q 3 min
Consider 10 ml/kg fluid bolus
Consider Narcan 0.1 mg/kg IV/IO/ETT
If blood sugar < 40 mg/dl:
Dextrose 12.5% 1 ml/kg IV