



SHOCK (SYMPTOMATIC HYPOTENSION) – PEDIATRIC

ALS STANDING ORDERS:

1. Cardiac monitor and document rhythm: treat bradycardia using appropriate cardiac SO.
2. Pulse oximetry, if room air oxygen saturation less than 95%, provide:
 - ▶ *High-flow Oxygen by mask or nasal cannula 6 L/min flow rate (direct or blow-by) as tolerated.*
3. IV access, if unresponsive consider IO if peripheral IV cannot be established:
 - ▶ *20 mL/kg Normal Saline bolus.*
 - ▶ *If no response to first bolus of Normal Saline, repeat 20 mL/kg Normal Saline bolus and contact Base Hospital for further orders.*
4. Obtain blood glucose and document finding, if blood glucose less than 60, administer one of:
 - ▶ *Oral glucose preparation, if tolerated and airway reflexes are intact.*
 - ▶ *10% Dextrose 5 mL/kg IV (maximum dose 250 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.
5. ALS escort to appropriate ERC.

Approved:

Carl Schultz, MD

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