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Org. Date: 8/91 Revised: 10/01/2017

ALS STANDING ORDERS:

1. If signs of dehydration or poor perfusion:

NAUSEA-VOMITING - PEDIATRIC

- ► Establish IV access
- ▶ Infuse 20 mL/kg Normal Saline bolus, may repeat twice to maintain perfusion.
- 2. For continuous nausea or vomiting, age 4 years or greater, administer:
 - \blacktriangleright Ondansetron (ZofranTM) 4 mg (one 4 mg ODT tablet) to dissolve orally on inside of cheek as Tolerated.
- 3. If altered mental status or unresponsive:

Obtain blood glucose and document finding, if blood glucose equal to or less than 60, administer one of:

- ► Oral glucose preparation, if airway reflexes are intact.
- ▶ 10% Dextrose 5 mL/kg IV (maximum dose 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.

- 4. Maintain airway, suction as necessary.
- 5. ALS transport to nearest appropriate ERC, contact Base Hospital as needed.

Approved:

Review Dates: 05/16, 11/16, 05/16 Final Date for Implementation: 10/01/2017

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TREATMENT GUIDELINES:

 Repeated vomiting can result in hypovolemic shock. If dehydration suspected, intravenous normal saline infusion is required to help control vomiting.

• Vomiting can be a symptom of diabetic ketoacidosis associated with marked elevation in blood glucose level, which is best treated with normal saline as described in SO above.

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