NEUROLOGIC EMERGENCIES
N-5 / SYNCOPE/NEAR SYNCOPE

PRIORITIES

- ABCs
- Assess level of consciousness
- Evaluate cardiac rhythm, precipitating factors, associated symptoms, medical history and medications;
- IV fluids, positioning for hypotension;
- Early transport;
- **EARLY CONTACT OF RECEIVING HOSPITAL.**

FINAL

DECEMBER 2006

PATIENT TREATMENT GUIDELINES

- Stabilize airway;
- **OXYGEN THERAPY** – high flow as tolerated. Be prepared to support ventilations with appropriate airway adjuncts;
- Position of comfort, left lateral decubitus if vomiting;
- **CARDIAC MONITOR** – treat dysrhythmias per specific treatment guideline; rapid transport when able;
- **IV** NS **TKO**; Complete blood glucose check and treat hypoglycemia (blood sugar = 60 mg/dl).
- IV bolus of Normal Saline, 250 cc for BP <90 mmHg systolic or HR >100; if no change in blood pressure or heart rate consider a second bolus of NS 250 ml.
- Consider second IV if appropriate..

DISRUPTED COMMUNICATIONS

In the event that a Solano County EMT-P is UNABLE to make physician contact for orders, the paramedic MAY NOT utilize those areas of the protocol needing physician direction and MUST TRANSPORT IMMEDIATELY TO THE CLOSEST FACILITY.