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