

Subject: Treatment Policies - ALS
Sedation

Associated Policies:

I. Indications:

- A. Anxiety communicated by patient not relieved with other calming measures.
- B. Combative behavior that endangers patient and caregivers when concern exists for an underlying medical or psychiatric emergency.

II. Contraindications:

- A. Absolute-
 - 1. Sensitivity to Midazolam
- B. Relative:
 - 1. Nausea/vomiting
 - 2. Airway compromise

III. Procedure:

- 1. Ensure rescuer safety.
- 2. Do not attempt to restrain patient unless appropriate resources are available. Obtain vitals and place on monitor if safe to do so prior to medication administration.
- 3. Determine the most appropriate route of administration (IV, IM or IN)
 - a. Administer Midazolam per Policy # 5332
- 4. Once patient has been controlled to allow administration of medications ensure that if they were placed prone that they are moved to supine or semi-fowlers as soon as reasonable. Never transport a restrained patient prone.
 - a. Obtain blood pressure, pulse and apply cardiac monitor, continuous pulse oximetry, and/or capnography if unable to do so previously.
 - b. Administer oxygen as needed per policy #6030
 - c. Obtain IV access if safe for the provider to do so.

IV. Special Information:

- 1. Never give sedation without resuscitation equipment available.
- 2. Consider ½ normal dosing for patients > 60 years of age.
- 3. Use of sedation will be reviewed by the Provider Agency.
- 4. Utilizing pharmacological sedation should only be undertaken for the benefit of the patient to allow treatment and transport of patients undergoing suspected medical and/or psychiatric emergencies.
- 5. Pharmacological sedation shall not be used to facilitate law enforcement activities.