

Yolo County Emergency Medical Services Agency

Protocols

Revised Date: May 1, 2024

SEDATION

Adult Pediatric

Indications

- Reduces combative behavior that endangers patients or caregivers
- Use as an adjunct for pain relief during ALS procedures such as cardioversion and/or transcutaneous cardiac pacing
- Reduces patient anxiety not improved by other calming measures
- Alleviates claustrophobia associated with CPAP or NRB

Contraindications

• SBP < 90 mmHg or < normal range for age

SBP does not apply for patients requiring TCP or cardioversion

BLS

Assess vital signs O_2 , titrate SpO_2 to $\geq 94\%$ Assist ventilations as needed

ALS

Cardiac Monitor, Waveform EtCO₂, Consider Vascular Access

Midazolam 2 mg SIVP

- Titrate to desired degree of sedation
- May repeat at 1 2 mg increments every 3 minutes
- Total max dose 6 mg

<u>Or</u>

Midazolam 5 mg IM

No repeat

Or

Midazolam 10 mg IN

- ½ dose each nare
- No repeat

Midazolam 0.1 mg/kg SIVP

- Titrate to desired degree of sedation
- May repeat x 2 every 5 -10 minutes
- Max single dose 2 mg
- Total max dose 4 mg

*Use a 1 mL syringe for Midazolam administration in pediatric patients

<u>Or</u>

Midazolam 0.1 mg/kg IM

- Max dose 4 mg
- No repeat

<u>Or</u>

Midazolam 0.2 mg/kg IN

- ½ dose each nare
- Max dose 5 mg
- No repeat

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Consider

- Use caution in the following situations:
 - Nausea/vomiting
 - Suspected drug or alcohol intoxication
 - Head injury
 - Altered Level of Consciousness
 - Multi-system trauma
- Combining Fentanyl and Midazolam can cause significant respiratory depression, hypotension and decreased consciousness (administer lower doses of one or both medications)
- Decrease dose of medication for patients > 65 years old or known respiratory disease

Direction

- Advise receiving hospital personnel that the patient has been sedated
- Contact Base Hospital for additional doses

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