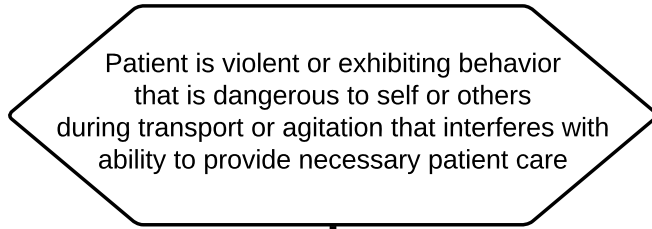




History	Signs and Symptoms	Differential
<ul style="list-style-type: none"> • Past medical history • Pertinent medication history • Compliance with medications • Recent exacerbating factor(s) • Petitioned or court ordered • Collateral information • Substance abuse history 	<ul style="list-style-type: none"> • Statements of suicidal/homicidal thoughts/ actions • Agitated/violent behavior • Exhibiting behaviors that can be deemed dangerous to self or others • Acute psychological complaint 	<ul style="list-style-type: none"> • Altered mental status related to drug usage • Trauma • Hypoglycemia/Hyperglycemia • Infection/Fever



B	Attempt verbal reassurance and calm patient Engage friends or family if they are able to help calm patient
	Follow agency SOP for physical restraint

P	Administer midazolam 0.1 mg/kg IM/IN Max initial dose 10 mg IM/IN May repeat x 1 at half initial dose after 10 minutes to a max total dose of 15 mg IM/IN
	or Administer midazolam 0.05 mg/kg IV/IO Max initial dose 5 mg IV/IO May repeat x1 at half initial dose after 10 minutes to a max total dose of 7.5 mg IV/IO <i>For patients with agitation that interferes with necessary patient care</i> Administer midazolam 0.05 mg/kg IM/IV/IO (max dose 2.5 mg) May repeat x1 after 10 minutes to a max total dose of 5mg IV/IO ≤14 or > 65 years max initial and total doses are half ≤ 8 yrs: Contact Medical Direction for orders Use caution when patient at risk for hypotension, as midazolam administration will lower blood pressure.

B	Obtain full set of vital signs once able (including initial temperature when available) O ₂ to maintain sat ≥ 94%
---	---

P	IV/IO access once able to safely obtain Apply cardiac monitor and EtCO ₂ as soon as possible if sedation is administered. Consider 12-lead ECG
---	---

B	Reassess and document mental status and vital signs every 5 minutes and neurovascular status of all extremities every 15 minutes (if physically restrained).
---	--



Education/Pearls

Behavioral patients provide a unique challenge and possible danger to the healthcare provider. These patients often lose their ability to make medical decisions. Patients with mental health disorders often have co-existing medical conditions.

Combative patients with traumatic injury/TBI present a uniquely challenging scenario. The provider must consider the risks of causing hypotension by providing chemical sedation only when absolutely necessary.

- Security is essential:
 - Always be sure to protect yourself and others.
 - Patients who verbalize a danger to self or others may NOT refuse care.
 - Attempt to protect patient from injury, but do not place yourself in danger to do so.
 - Summon law enforcement as necessary.
- Restraints should only be used if necessary.
 - Physical Restraint:
 - Handcuffs are to be placed by law enforcement only. If in law enforcement handcuffs, key must be within proximity of patient care at all times (but not within patient's reach).
 - Place stretcher in sitting position.
 - Do not apply restraints that restrict the patient's chest wall movement.
 - Pearls for extremity restraint:
 - Restrain all four extremities to stationary frame of stretcher
 - All restraints must allow quick release
 - Reassess and document neurovascular status of all extremities every 15 minutes
 - Chemical Restraint:
 - Utilize with caution, as all restraint medications can cause respiratory compromise
 - Should be a later consideration for pediatric patients
 - **EtCO₂ should be used for all patients who receive chemical sedation.**
 - **A request by law enforcement for sedation does not justify initiating chemical sedation.**
- Patients with severe agitation have a propensity to develop severe acidemia with progression to sudden cardiac arrest, which is why safe positioning, prompt sedation, and thorough medical evaluation are necessary for prehospital treatment.
- Apply cardiac monitor and obtain vital signs as soon as possible, particularly when chemical restraints have been administered. Reassess VS every 5 minutes and document patient status, response, and monitor airway.