

Sierra – Sacramento Valley EMS Agency Treatment Protocol

M-11 (LALS)

Behavioral Emergencies

Approval: Troy M. Falck, MD – Medical Director

Effective: 12/01/2024

Approval: John Poland – Executive Director

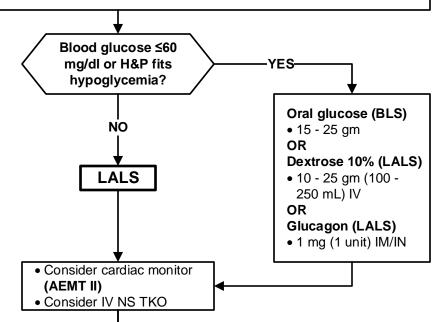
Next Review: 10/2027



- Attempt to de-escalate situation by determining triggering event, attempt calming talk & redirection techniques* move pt to safe location & minimize stimulus
- Utilize appropriate restraint mechanisms in situations where the pt is violent, potentially violent, or exhibiting behavior that is dangerous to self or others (Reference: S-SV EMS policy 852)
- Assess V/S, including SpO2 and temperature (if able)
- Assess/treat for underlying medical/traumatic cause of behavioral issues as appropriate
- Check blood glucose (if able)

*Redirection Techniques

- Coach pt in taking slow, deep breaths or have them attempt 'Box Breathing':
 - Breath in for 4 seconds
 - Hold for 4 seconds
 - Exhale for 4 seconds
 - Hold for 4 seconds
- Have pt name 5 things they can see right now
- Give pt a color and ask them to find something around them with that color



Severe Anxiety

- Uncontrollable feelings of panic, fear, doom, or impending danger
- Tachypnea/hyperventilation
- Tachycardia
- Cold, sweaty, numb, or tingling hands or feet

Behavioral Crisis (Including severe agitation with altered mental status)

- Intense paranoia
- Disorientation/hallucinations
- Extreme aggression/violent behavior
- Danger to self/others
- Hyperthermia
- Increased strength

Severe Anxiety symptoms not adequately relieved by other means:

Midazolam (AEMT II)

- 1 2 mg IV/IM/IN
- May repeat dose x 1, after 5 mins, if severe anxiety symptoms persist

If pt combative, such that harm to self or others is likely:

Midazolam (AEMT II)

• 10 mg IM/IN

OR

• 5 mg IV/IO