Follow Initial Protocol for All Patients

**Goals:**
- Safely treating/transporting the agitated patient

**Signs/Symptoms:**
- Violent, agitated, uncooperative patients
- Danger to self or others

**Documentation Key Points:**
- Etiology of agitation
- Blood glucose level
- Medications administered
- Repeated vitals/airway assessments

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**BLS**

**Follow Initial Protocol for All Patients**

**Anxious**
- Establish rapport with patient
  
**Anxious or Agitation?**

**Agitation**
- Attempt verbal reassurance and calming of patient
  - Engage family members if available and warranted

**Establish rapport with patient**

**Record 17. RIKER Score**

**H33. Midazolam (Versed)**
- Adult: 1-2.5 mg IV/IO
- Pediatric: 0.02 mg/kg IV/IO
- Pediatric max dose 2.5 mg

**Record 17. RIKER Score post medication administration**

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**Excited Delirium**
- (NOT A CRIME)
  - N: Naked
  - O: Violence against objects
  - T: Superhuman Tough
  - C: Confusion
  - R: Resistant
  - I: Incoherent
  - M: Mental Health History
  - E: Early Backup

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**Special Considerations**
- Important to document use of restraints; including but not limited to type of restraint, placement, perfusion distal to restraint
  - Consider using SpO2 to monitor distal perfusion
  - Involve law enforcement, document who was on scene and assisted with decisions
  - Utilize medical control

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**Original Adoption Date:** 8/00
**Date of Most Recent Update:** 6/2020
**Medical Director:** Chad Torstenson, MD; Cory Vaudt, DO
**Past Protocol Updates:** 5/05, 12/06, 5/09, 9/10, 12/13, 9/18

- **G40. Physical Restraints**
- **G8. Blood Glucose Analysis**
- **H26. Ketamine**
- **H33. Midazolam (Versed)**
- **E3. Medication Assisted Airway**
- **Temperature Monitoring**
- **ETC02 monitoring**
- **G22. EKG and 12 lead EKG**