

BEHAVIORAL EMERGENCY STANDING ORDER

Initiate Supportive Care:

- Protect from harming self and others
- Obtain vital signs if safe to perform
- Oxygen to keep O₂ Sat > 90%

Inclusion

- Acute psychological complaint
- Confirmed or reported suicidal or homicidal ideation /statement / gesture

Exclusion

- When an acute medical need or complaint is identified & another SO would be more appropriate

Orders

If patient is cooperative:

- BLS: Use verbal redirection and calming measures as needed

If patient is acutely agitated and/or combative:

- BLS: Use verbal redirection and calming measures. If unsuccessful, then:
 - Utilize: [Restraint Protocol](#)
- ALS: follow BLS orders above AND
 - Administer: **0.05mg/kg to max of 5mg Midazolam IM / IN.**
 - May repeat x 1 after 10 minutes
 - Reassess and Document:
 - Continuous pulse ox, and consider ETCO₂ if available
 - Vital signs every 5 minutes

Contact Medical Direction if:

- The patient wishes to refuse
- The EMS providers cannot safely restrain the patient
- Patient condition deteriorates

Special Note: If providing care for the patient with acute agitation, the EMS provider should never place themselves in danger. EMS providers should request/utilize law enforcement for assistance with restraints when necessary. Higher dosing of Midazolam maybe necessary and can be employed after contacting online medical direction.