General Weakness

For non-focal weakness, general malaise, and any nonspecific 'sick' symptoms

History
- Age
- Duration of symptoms
- Severity of symptoms
- Past medical history (e.g., cancer, heart disease, adrenal disease, diabetes, thyroid, dialysis)
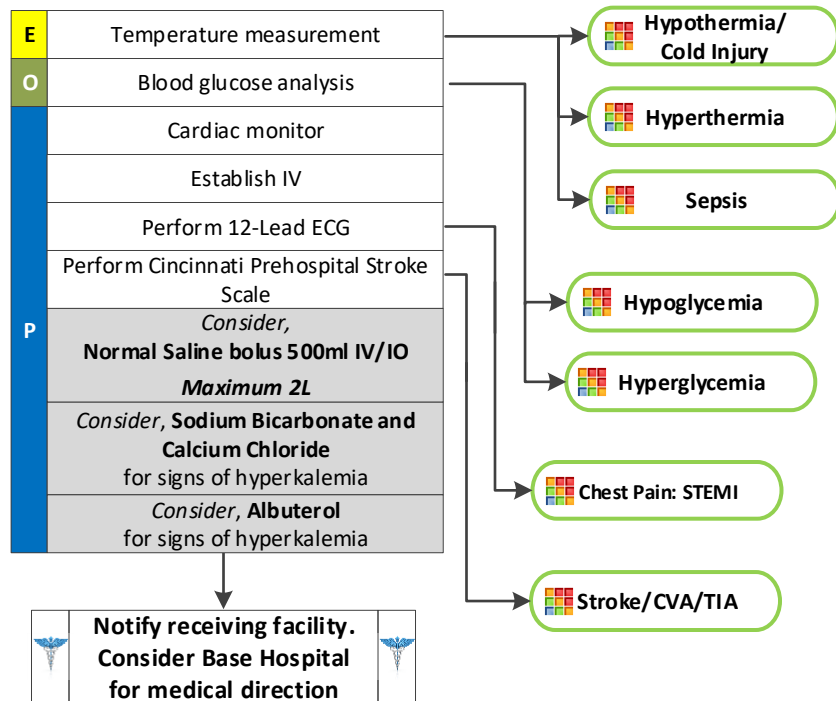- Medications (hypoglycemic agents/diuretics)

Signs and Symptoms
- General malaise
- Fatigue
- Isolated or general weakness

Associated Symptoms (helpful to localize source)
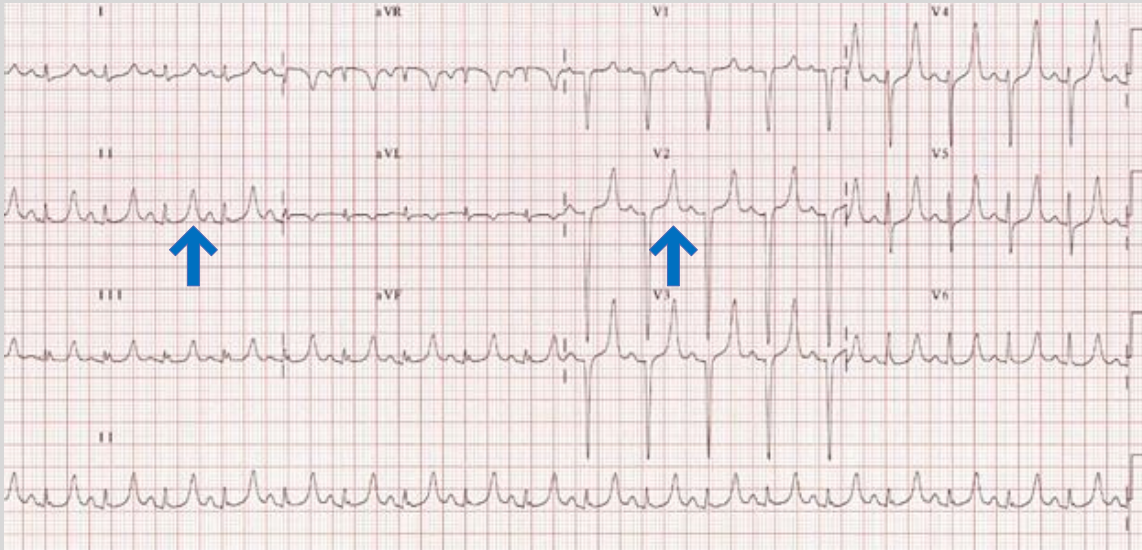- Cough, chest pain, headache, dysuria, abdominal pain, mental status changes, rash

Differential
- Infection/sepsis
- Medication/drug/toxin reaction
- Myocardial infarction
- Hypothermia/hyperthermia
- Electrolyte imbalance (i.e., hyperkalemia)
- Hypoglycemia/hyperglycemia
- Thyroid disorder
- Stroke/TIA
- Dehydration
- Myasthenia gravis/Guillain-Barre

E — Temperature measurement → **Hypothermia/Cold Injury**

O — Blood glucose analysis → **Hyperthermia**, **Sepsis**

P —
- Cardiac monitor
- Establish IV
- Perform 12-Lead ECG
- Perform Cincinnati Prehospital Stroke Scale → **Hypoglycemia**, **Hyperglycemia**
- *Consider,* **Normal Saline bolus 500ml IV/IO** *Maximum 2L*
- *Consider,* **Sodium Bicarbonate and Calcium Chloride** for signs of hyperkalemia
- *Consider,* **Albuterol** for signs of hyperkalemia

→ **Chest Pain: STEMI**
→ **Stroke/CVA/TIA**

Notify receiving facility. Consider Base Hospital for medical direction

Adult Medical Treatment Protocols

General Weakness

For non-focal weakness, general malaise, and any nonspecific 'sick' symptoms

Peaked T-waves or bradycardia are signs of hyperkalemia. Increased extracellular potassium reduces myocardial excitability, which results in the depression of both pace making and conducting tissues. Progressively worsening hyperkalemia leads to suppression of impulse generation by the SA node and reduced conduction by the AV node and HIS-Purkinje system, resulting in bradycardia and conduction blocks that ultimately lead to cardiac arrest.

In order to treat hyperkalemia in the prehospital setting, the QRS must be ≥ 0.12 seconds. If the patient has not yet arrested, be prepared for the patient to do so. Early recognition and treatment is essential to helping reverse this critical condition.

Adult Medical Treatment Protocols

Pearls
- Diabetics, geriatric, and female patients often have atypical pain, or only generalized complaints. Suspect cardiac etiology in these patients, and perform a 12-Lead ECG.
- Patients taking potassium supplements or who are on dialysis or with a history of severe renal disfunction have a higher risk of hyperkalemia.

SAN MATEO COUNTY HEALTH
EMERGENCY
MEDICAL SERVICES

Treatment Protocol   A15