2-3 Altered mental status v.1.2

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**Box A: Drug doses and treatments**

Signs may include delirium, unconscious, coma, confusion, speech or motor deficit

START.

**❶ Call for help** (anaesthetist**,** midwife, obstetrician, +/- medical on-call)

 **Ask**: “who will be the team leader?”

 **Team leader assigns** checklist reader and scribe

 **Note time**

**❷ Assess clinical status using ABCDE approach**

 Position woman in left lateral (recovery) position

 If airway obstructed ➔ perform head tilt/chin lift or jaw thrust

 Give oxygen at 15 L/min via reservoir mask, titrate to SpO2 95-98%

 Start continuous monitoring: SpO2, respiratory rate, 3-lead ECG and blood pressure

 If airway protection indicated ➔ intubate and ventilate

**❸ Insert wide-bore IV access, take bloods** for FBC, U+E, LFT, clotting, thyroid function, magnesium, venous blood gas and toxicology

**❹ Assess circulation**

 Conventional therapies to treat hypotension, brady- and tachyarrhythmia

**❺ Measure blood glucose**

 If < 4 mmol/L ➔ (**Box A** *hypoglycaemia*)

**❻ Check for drug related causes of altered consciousness** (**Box A**)

 Prescribed ➔ check prescription

 Non- prescribed ➔ send urine for toxicology

❼ **Check neurology for signs of stroke** (**Box B**)

❽ **Check for other differential diagnoses** (**Box C**)

**❾ If diagnosis unclear** ➔ **urgent CT / MRI head scan**

 (Liaise with neurologist and radiologist)

**Hypoglycaemia** (blood glucose < 4 mmol/L)

20% dextrose 100 ml over 10 minutes IV then recheck blood glucose

If blood glucose < 4 mmol/ L ➔ repeat dextrose

*-or-* Glucagon 1 mg IM/IV/SC (once only)

**Opioid overdose**

Naloxone 0.4-2 mg IV/IM/SC, repeat every 3 minutes PRN

**Benzodiazepine overdose**

Flumazenil 0.2 mg IV, repeat PRN

**Box B: FAST stroke assessment**

**F**acial droop *show me your teeth / smile*

**A**rm drift *close your eyes, extend arms palms up for 10 seconds*

**S**peech *repeat this after me….*

**T**ime *a stroke is an emergency, time critical*

Contact nearest **hyperacute stroke unit**

Arrange urgent CT / MRI head

**Box C: Differential diagnosis** Hypoglycaemia ➔ (**Box A**) Drug overdose ➔ (**Box A**) Eclampsia ➔ **2.1**

Severe pre-eclampsia ➔ **2.2**

Postictal ➔ check epilepsy history

Stroke ➔ (**Box B**)

Intracerebral pathology ➔ arrange appropriate imaging

Sepsis ➔ check history and examination findings

Hypothermia ➔ check temperature

Haemorrhage ➔ **2.5** (antepartum) or **2.6** (postpartum)

Local anaesthetic toxicity ➔ **2.8**

Electrolyte disturbance (e.g., sodium) ➔ **2.9a** and **2.9b**

**Box D: Critical changes**

Obstetric cardiac arrest ➔ **1-1**

Eclampsia ➔ **2-1**