

	<b>COUNTY OF SACRAMENTO</b> EMERGENCY MEDICAL SERVICES AGENCY	Document #	8017.15
	PROGRAM DOCUMENT:  <b>Dystonic Reaction</b>	Initial Date:	10/26/94
		Last Approval Date::	06/13/24
		Effective Date:	11/01/24
		Next Review Date:	06/01/26

\_\_\_\_\_  
 Signature on File  
 EMS Medical Director

\_\_\_\_\_  
 Signature on File  
 EMS Administrator

**Purpose:**

- A. To establish the treatment standard for patients with signs and symptoms of a dystonic reaction.
- B. A dystonic reaction occurs as an idiosyncratic reaction to a phenothiazine compound. Frequently, no clear history or medication use is ~~obtainable~~-available; therefore, this reaction should be treated based on its clinical presentation.
- C. Although diphenhydramine is used to treat this reaction, it is not an allergic reaction to the medication. The patient should be informed of this distinction. Dystonic reactions, which may require field treatment to alleviate patient discomfort, may present as the following:
  1. Facial grimacing with poor ability to voluntarily relax tensed facial muscles.
  2. Torticollis or twisted posturing of the neck.

**Authority:**

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

**Protocol:**

<b>BLS</b>
1. <del>ABC's</del> C-A-B's/ Routine Care- Supplemental O <sub>2</sub> as necessary to maintain SPO <sub>2</sub> ≥ 94%. Use the lowest concentration and flow rate of O <sub>2</sub> as possible. 2. Airway adjuncts as needed. 3. If possible, collect home medications and bring them to the emergency department with the patient.
<b>ALS</b>
1. Establish vascular access. 2. Cardiac Monitoring 3. DIPHENHYDRAMINE- 50 mg IV (preferred) or IM 4. Monitor and reassess patient after administration of DIPHENHYDRAMINE