

Normal Vital Signs

Blood Pressure (resting):

Adults:

Normal BP	<120/<80 mmHg
Pre Hypertension (HTN)	120-139/80-89 mmHg
Stage 1 Hypertension (HTN)	140-159/90-99 mmHg
Stage 2 Hypertension (HTN)	≥160/≥100 mmHg

Children:

Birth (12 Hr, <1000g):	39-59/16-36 mmHg
Birth (12 hr, 3 kg):	50-70/25-45 mmHg
Neonate (96hr):	60-90/20-60 mmHg
Infant (6 mo):	87-105/53-66 mmHg
Toddler (2 yr):	95-105/53-66 mmHg
School Age (7yr):	97-112/57-71 mmHg
Adolescent (15yr):	112-128/66-80 mmHg

Heart Rate (resting):

Adults:

Female: 55-95 beats per minute (bpm)
Male: 50-90 beats per minute (bpm)

Children:

Neonate:	100-180 bpm awake	80-160 bpm asleep
Infant (6mo):	100-160 bpm awake	75-160 bpm asleep
Toddler:	80-110 bpm awake	60-90 bpm asleep
Preschooler:	70-110 bpm awake	60-90 bpm asleep
School-aged child:	65-110 bpm awake	60-90 bpm asleep
Adolescent:	60-90 bpm awake	50-90 bpm asleep

Respiration Rate (resting):

Adults:

12-18 breaths per minute

Children:

Infants:	30-60 breaths per minute
Toddlers:	24-40
Preschoolers:	22-34
School-aged children:	18-30
Adolescents:	12-16

4 Urgent/Emergent Situations

1. Is it a Stroke?

Give **3 commands**: “Smile ... Raise arms over head ... Say a simple sentence”

Call **911** if person is newly unable to perform any of the commands.

Signs/Symptoms:

- Sudden numbness or weakness of the face, arm or leg, especially on one side of the body
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden severe headache with no known cause

2. Lightheaded?

- Did they stand up too quickly? Likely orthostatic hypotension (falling blood pressure with upright position). → Sit back down. Encourage fluids. Do 10 heel rises prior to standing. Pause after standing before moving away from the chair and walking.
- Possible hypoglycemia (low blood sugar). → Ask: “When was your last meal?”. Offer a snack.
- Person with diabetes? Have them check their blood sugar level.
 1. If the person is behaving oddly and hypoglycemic but is conscious and capable of swallowing: → feed them sugar (glucose tablet, juice, or sugar dissolved in juice or water).
 2. If the glucometer indicates hyperglycemia: → do not feed the patient sugar. Push water while conscious and get the patient to medical treatment promptly.

*** NOTE: If you don't know if a person with diabetes is suffering from hypoglycemia or hyperglycemia (a glucometer isn't available), you can safely give the person sugar to see if it helps. This will not cause harm to the person already suffering from hyperglycemia ****

3. Unconscious patient – what do you do?

- **Unresponsive, pulseless, breathless?** Ask for help and have that person call 911. Tell someone else to retrieve the Automatic External Defibrillator (AED). You should begin CPR compressions as quickly as possible. When the AED arrives, stop CPR, hook up the AED and wait for directions.
- **Pulse and breathing present?** Call 911. Place patient in recovery position (sidelying). Take vital signs every 5 minutes. Write down the time and vital signs on a piece of paper.

In an Emergency, Call 911

Equipment (in Clark 6, PhysZou, next to Documentation Room)

1. Automatic External Defibrillator (AED)
2. Bag-valve mask “Ambu Bag”
3. First Aid Kit, including glucose tablets

PhysZOU address:
498 Turner Avenue
Columbia, MO 65211

Corner of Turner Ave. and Providence Rd.
Enter at “Mizzou Therapy Services” sign,
at SW corner of the building.
Room 6 Clark is first door on left side.

4. Grand Mal (Generalized) Seizure - What to do. What not to do.

Signs

- Loss of consciousness, falling down, loss of bowel or bladder control, and rhythmic convulsions.
- Muscle contractions and rigidity
- Falls, Rapid pulse, Pallor, Dilated pupils
- Biting the tongue, Frothing at the mouth
- Eyes rolling back in the head

Immediate Recovery

- Gradual awakening to consciousness
- Confusion
- Long sleep (after a brief awakening)

Full Recovery

- Fully awake, Normal mental stage (in some people)
- Tiredness, Depressed mood

What to do during the seizure:

- Protect the person from injury (remove harmful objects from nearby)
- Cushion their head
- Aid breathing by gently placing them in the recovery position once the seizure has finished.
- Be calmly reassuring
- Stay with the person until recovery is complete

How to put an unconscious person in the **RECOVERY POSITION**



DON'T

- Restrain the person
- Put anything in the person's mouth
- Try to move the person unless they are in danger
- Give the person anything to eat or drink until they are fully recovered
- Attempt to bring them around



Call an **AMBULANCE** if...

- You know it is the person's first seizure
- The seizure continues for more than 5 minutes
- One seizure follows another without the person regaining consciousness between
- The person is injured during the seizure
- You believe the person needs urgent medical attention

Details to Record

- Date and Time. How long it lasted
- What body parts are affected
- Type of movement and other symptoms
- Possible causes. Behavior after the seizure. Vital signs when stabilized