



St. Clair County Medical Control
Community Paramedicine
Dizziness

Initial: March 2025

Section 11-73

Dizziness

Indications: This protocol provides general guidance for the evaluation of patients with a complaint of dizziness under the Community Paramedicine Program. The CP will respond to a residence on request from the primary care provider, on request by the patient through 911 triage or on referral from ALS 911 response. The CP will follow guidelines outlined by the primary care providers or on-line medical direction orders.

Purpose: To assess the patient with dizziness and differentiate between the patients who can be treated supportively vs those who will require ED evaluation.

CPU Directives:

1. Follow General Protocol for CP Patient Assessments.
2. Obtain and review patient health history and primary care provider's orders prior to evaluation when available.
3. Perform neurological assessment. Obtain Cincinnati Stroke Scale. If Cincinnati Stroke Scale is positive, transport to Emergency Department. Refer to CVA Protocol.
4. Obtain 12 lead ECG. If EKG shows signs of arrhythmia or coronary ischemia, refer to the appropriate protocol.
5. Assess dizziness for light headedness vs. vertigo (sense of movement or unsteadiness and inability to walk straight).
6. Consider treatment with IV fluids or anti vertigo medication.
7. Consider administration of NS IV fluid bolus up to 1 liter wide open. Repeat as indicated. Administer IV fluids cautiously in the elderly and those with a history of CHF.
8. Consider administering Antivert 25mg PO for dizziness.
9. Contact the PCP or on-line medical direction per the General Protocol for CP Patient Assessments. Along with the patient report and discuss treatment and continuity plans.
10. Continue treatment and follow the General Protocol for CP Patient Assessments until a disposition is determined and continuity plan completed.