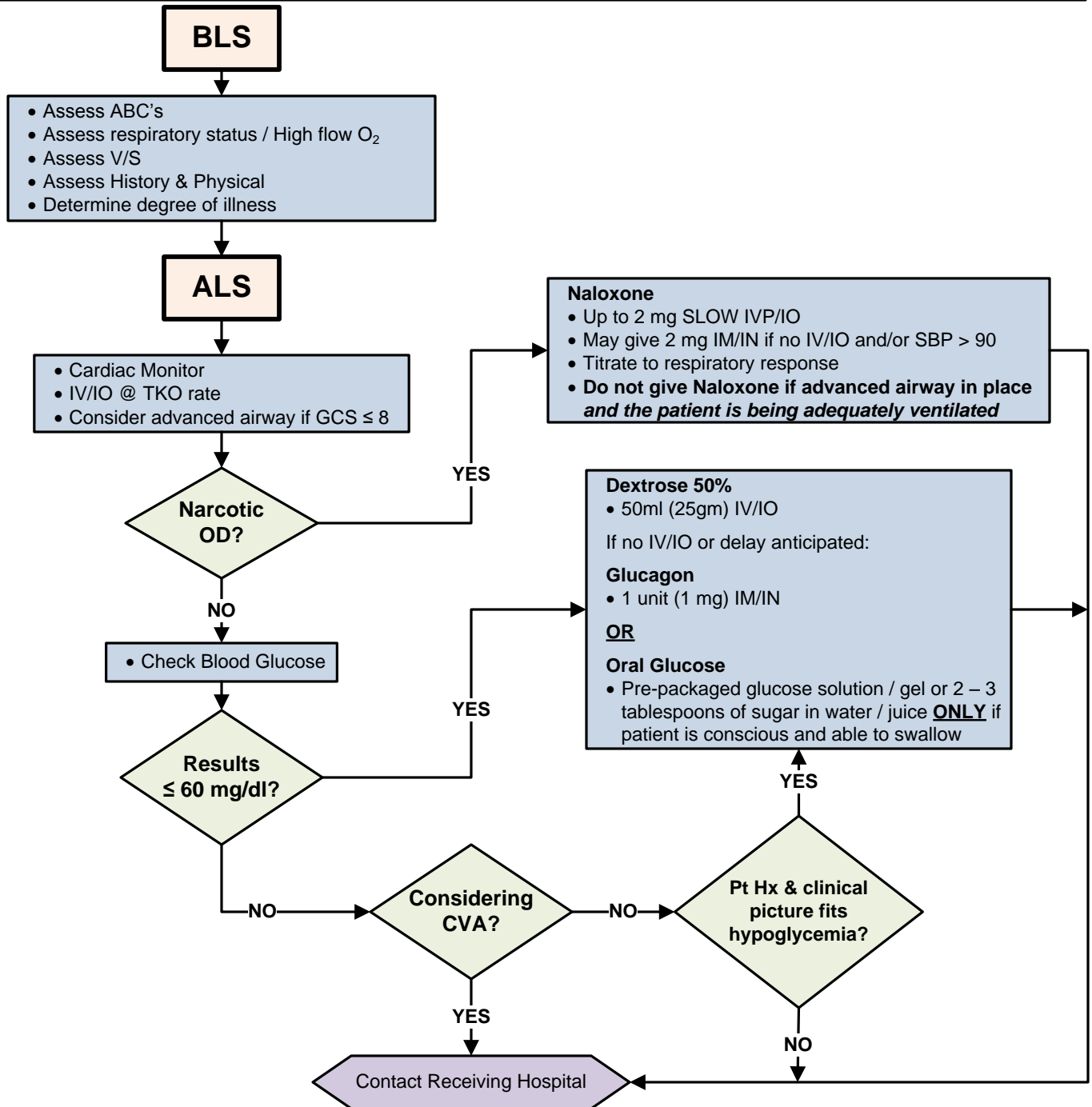




SIERRA SACRAMENTO VALLEY EMS AGENCY
TREATMENT PROTOCOL – MEDICAL EMERGENCY

NEUROLOGICAL
REFERENCE NO. N-1

SUBJECT: ALTERED LEVEL OF CONSCIOUSNESS



Effective Date: 12/01/2011
 Next Review Date: 07/2014
 Approved by:

Date last reviewed revised: 07/11
 Page 1 of 1

SIGNATURE ON FILE
 S-SV EMS Medical Director

SIGNATURE ON FILE
 S-SV EMS Regional Executive Director