

TREATMENT PROTOCOL: PAIN MANAGEMENT *

1. Basic airway
2. Spinal immobilization prn
3. Pulse oximetry
4. Oxygen prn
5. Cardiac monitor prn: document rhythm and attach ECG strip if dysrhythmia identified
6. Control bleeding prn
7. Venous access prn
8. Non-invasive pain management
 - Splint injured extremity and elevate
 - Reposition patient
 - Ice pack
 - Distracting measures
 - Reassurance
9. Assess patient for an infusion device and/or transdermal patches for narcotics; if present, report to base hospital
10. For burn injury, refer to Ref. No. 1271, Burns
11. For isolated extremity injury and other trauma, refer to Ref. No. 1275, General Trauma
12. For chest pain, refer to Ref. No. 1244, Chest Pain
13. For the patient who is at least 20wks pregnant, refer to Ref. No. 1261, Emergency Childbirth (Mother)

14. CONTINUE SFTP or BASE CONTACT

15. For other non-traumatic pain, including non-traumatic abdominal pain, consider:

Fentanyl ①②③

50-100mcg slow IV/IO push, titrate to pain relief

May repeat every 5min, maximum adult dose 200mcg

50-100mcg IM/IN one time



Pediatric: 1mcg/kg slow IV/IO push, titrate to pain relief

May repeat every 5 minutes

1mcg/kg IM one time

1.5mcg/kg IN one time

See Color Code Drug Doses/L.A. County Kids ④

Morphine ①②③

2-12mg slow IV push, titrate to pain relief

May repeat every 5min, maximum total adult dose 20mg



Pediatric: 0.1mg/kg slow IV push

See Color Code Drug Doses/L.A. County Kids ④

Do not repeat dose, maximum pediatric dose 4mg

SPECIAL CONSIDERATIONS

- ① Use with caution: in elderly, if SBP less than 100mmHg, sudden onset acute headache, suspected drug/alcohol intoxication, suspected active labor, nausea/vomiting, respiratory failure or worsening respiratory status
- ② Contraindications: Absolute: respiratory rate less than 12 breaths/min, hypersensitivity or allergy. Relative: use with caution in altered LOC.
- ③ Ondansetron, 4mg IV, IM or ODT may be administered one time prior to fentanyl or morphine administration to reduce potential for nausea/vomiting
- ④ If the child is off the Broselow™ and adult size, move to the Adult protocol and adult dosing