

PATIENT COMFORT/PAIN MANAGEMENT

Pain management in the field may be indicated when a patient is experiencing severe pain. Except in rare circumstances, pain medication should not be administered to multi-system trauma patients with possible head, abdomen, or chest injuries. Nausea and/or vomiting can be a side-effect of narcotic pain medications or associated with many conditions including motion sickness while being transported.

- A. Perform **Initial Treatment/Universal Patient Care Protocol** and follow the proper protocol for medical management based on clinical presentation.
- B. Review patient's allergies, current medications, and past medical history.
- C. For severe pain:
 1. Administer Fentanyl (Sublimaze®) 1 microgram/kilogram – up to 100 micrograms max single dose, slow IV, IM, IO, or IN (max dose of 50 mcg (1ml) per nostril).

If no pain relief after two (2) minutes, may repeat Fentanyl **PER Medical Command Physician (MCP) order** at 1 microgram/kilogram up to 100 micrograms max dose.



DO NOT administer Fentanyl (Sublimaze®) to children less than 12 years old without **Medical Command Physician (MCP) order**. Pediatric dose is 1 microgram/kilogram, max dose of 50 micrograms.



-OR-

2. Administer **Morphine Sulphate** 2 mg slow IV, IM or IO. May repeat every five (5) minutes up to 10 mg unless pain is relieved.

- If systolic BP drops below 90mm/hg discontinue analgesic administration and administer IV fluid bolus 250 mL Normal Saline and contact **Medical Command**.

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NOTE: Administration of pain medications may not be tolerated well in patients over 55 years of age. Doses should be initiated low and repeated as needed. Administration of these medications in patients > 55 years of age shall be as follows:

Administer **Fentanyl** (*Sublimaze*®) 0.5 microgram/kilogram – up to a max initial dose of 100 micrograms. Additional doses require **MCP order**.

-OR-

Administer **Morphine Sulfate** 1 mg slow IV; may repeat every five (5) minutes up to 10 mg unless pain is relieved.

- Use caution if hypotensive and/or bradycardic. Consider use of **Fentanyl** (*Sublimaze*®).
- If systolic BP drops below 90 mm/Hg during administration of **Morphine Sulfate**, discontinue analgesic administration and administer IV fluid bolus 250 mL Normal Saline and contact Medical Command.

OPTIONAL: Non-cardiac related pain may be treated as follows: **PER Medical Command Physician ORDER** Administer Ketamine (*Ketalar*) 0.2 mg/kg to a max dose of 20 mg slow IVP over one (1) minute or 0.5 mg/kg IM to a max dose of 20 mg. Subsequent doses also require **Medical Command Physician (MCP) order**



- D. If discomfort persists, **contact Medical Command Physician (MCP)** to discuss further treatment and/or to request additional medication. Monitor blood pressure and respiratory effort.



- E. To prevent or treat nausea and vomiting, consider administration of:
1. **Ondansetron** (*Zofran*®) 4 mg IV or IM slowly over 4 minutes (pediatric dose 0.15 mg/kg IV up to 4 mg max dose).
- F. Expedite transport and monitor vital signs and mental status closely.