Pain and Nausea Management

Signs and Symptoms

- Traumatic injury
- Severe abdominal pain
- Severe back pain
- Elevated pulse BP and/or respiratory rate

History

- Musculoskeletal injury
- Kidney stones
- Migraines
- Chronic pain

Differential

- Extremity trauma
- Acute abdomen
- AAA
- Ectopic
- Migraine headaches
- Kidney stones

Care

B E I P

Follow general protocol #3, Orders for all Patients.

Provide non-medication techniques for pain management as appropriate (ice packs, splinting, positions of comfort, reassurance).

If nauseated or vomiting

E I P

Establish an IV of **Normal Saline**.

Administer **Ondansetron** (**Zofran®**) 4 mg slow IV push

If the patient in consistent/severe pain and does not have a diminished level of consciousness, respiratory depression, hypotension (SBP <100mmHg), or suspected head injury:

Establish SpO_2 monitoring and consider $ETCO_2$ monitoring.

Administer **Fentanyl** (**Sublimaze®**) 50-100 micrograms SLOW IV. (over 2 min.). May repeat once if inadequate response.

OR

Administer **Morphine Sulfate** 2-5 mg SLOW IV (over 2 min.). May repeat once if inadequate response.

If patient is extremely agitated,

(E) (I) (P)

consider administration of **Diazapam**(**Valium®**) 2.5-5 mg SLOW IV push.

Reassess patients' pain level and continue to monitor vital signs, SpO_2 and $ETCO_2$.

Pearls

- In some cases, pain medication may facilitate extrication and movement of patient.
- Dose ranges provided allow provider to select dose based on size of patient and pain severity.
- Contact Medical control and consider use of reversal agent if oversedation/respiratory depression occurs; providers may elect to "premedicate" with antiemetic if nausea anticipated, particularly if patient is on backboard.
- BLS providers should weigh the benefit of requesting ALS for pain management against any potential delays in transport.
- Zofran, Fentanyl, or Morphine may be administered IM if unable to obtain IV access.

Performance indicators

- Document pain scale (1–10), SpO2, and vital signs before and after treatment.
- Patient experiences pain relief.