



Emergency Medical Services Program Policies – Procedures – Protocols

Pain Control/Fever (116)

5 mg slow IV/IM/IO every 5 minutes to MAX of 20 mg. <ul style="list-style-type: none">Repeat pain assessment and primary survey.	<ul style="list-style-type: none">If Fentanyl unavailable; administer Morphine 0.1-0.2 mg/kg IM or slow IV/IO may repeat every 5 minutes to max of 10 mg.Repeat pain assessment and primary survey.
Base Hospital Contact Required	Base Hospital Contact Required

116 PAIN CONTROL/FEVER

1. **Acetaminophen administered orally** shall not be given to newborns or premature infants less than 6 months of age.
2. **Acetaminophen administered via IV** shall not be given to pediatric patients who are 2 years of age or younger.
3. Acetaminophen IV can be used with fentanyl, ketamine, or ketorolac if inadequate pain control with initial agent.
4. Contraindications for Acetaminophen include allergy/ hypersensitivity, severe liver disease, chronic alcoholism, or hepatic impairments including transplant.
5. Ketorolac (Toradol) or Acetaminophen should be first line pain medication for mild to moderate pain.
6. Ketorolac is the preferred agent for renal colic/ kidney stone pain.
7. Ketorolac (Toradol) inhibits the bodily synthesis of prostaglandins. It works by blocking the production of certain natural substances that cause inflammation. The effect helps to decrease swelling, pain, or fever.
8. Ketamine should be first line pain medication for trauma and hypotensive patients.
9. Ketamine is a hypnotic analgesic. A rapid-acting nonbarbiturate hypnotic analgesic agent characterized by normal pharyngeal-laryngeal reflexes, normal or enhanced skeletal muscle tone, and possible cardiovascular and respiratory stimulation.

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10. Ketorolac (Toradol) Table:

Contraindications	Caution	Side Effects
Age<2 years old	May increase blood pressure	Nausea
		Hypertension
Multisystem Trauma		Ulcers
Hypersensitivity/Allergy to (NSAIDS)		Rash/Itching
Active Bleeding		
Pregnancy		
Hx Renal Disease, Kidney Transplant		
Age>65 years old		

11. Ketamine Analgesia Table:

Contraindications	Caution	Side Effects
Age < 4 years	Likelihood of respiratory depression and undesired pressor effects are increased by too rapid IV administration.	Tachycardia
GCS 14 or less		Increased salivation
Known or suspected alcohol or drug intoxication		Laryngospasm, occurs mostly at higher doses.
Known or suspected pregnancy		Nausea/Vomiting

12. Opioid Analgesia Table:

Contraindications	Cautions	Side Effects
BP<90 Systolic	Use with Caution in elderly	Respiratory Depression
Respiratory Depression	Head Trauma	Hypotension/Bradycardia
Altered Mental Status		Altered Mental Status
		Nausea/Vomiting

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13. Morphine Sulfate should be administered slowly and cautiously for children weighing less than 100 pounds. Blood pressure and respiratory rate must be closely observed during administration.
14. Fentanyl is 100 times more potent than Morphine (100 mcg of Fentanyl = 10 mg of Morphine).
15. Have Naloxone and respiratory assistance readily available.
16. Fentanyl must be given slow IVP (over 2 minutes)/IM/IO/Atomized. Intranasal dose must be split 25 mcg per nostril NO REPEAT.
17. In the case of infants, children, or adults unable to verbally communicate where a painful situation may exist, vital signs should be assessed for elevations in respiratory rate and heart rate as indicators of pain.
18. If patient is experiencing nausea/vomiting from analgesia administration, refer to [nausea/vomiting](#) protocol for treatment.
19. Altered mental status is considered anything below the patients' baseline mental status.

PAIN MEASUREMENT SCALE

