# PAIN & ANXIETY MANAGEMENT

### ALL PROVIDERS

- ☐ Focused history and physical exam
- Assess the patient's pain using verbal and non-verbal cues and appropriate pain scale
- ☐ Continuous cardiac, ETCO2, blood pressure, and pulse oximetry monitoring, when available
- ☐ Implement appropriate treatment guideline for the chief complaint.

#### ☐ Treatment Plan

- Consider non-pharmaceutical/family centered comfort measures as indicated, refer to the Family Centered Care Guideline.
- Immobilize any obvious injuries and place patient in a position of comfort
- Consider ice packs
- Implement pharmaceutical measures
  - Monitor patient vital signs every 5 minutes as this guideline is implemented
  - o Have naloxone available in case of respiratory depression
  - o Avoid or stop giving medications if SBP <100mmHg in adults, SBP <70 + (age in years x 2) mmHg for pediatrics, SaO2 < 90% without oxygen, or GCS <14
  - Stop pain medication dosing when the patient has adequate relief, pain score <5, adult SBP</li>
     <100mmHg, peds SBP <70 + (age in years x 2) mmHg, SaO2<90% without oxygen, or GCS <14</li>
  - o If pain and anxiety are both present, attempt to treat pain fully with analgesics alone before using analgesics and sedatives concurrently

## ☐ Key Considerations

- Use Wong-Baker Faces scale for pain assessment in patients 3-8 years old
- A FLACC scale can be used to assess pain in infants

#### **ADULT**

PEDIATRIC (<15 years of Age)
NOTE: Pediatric weight based dosing should not exceed Adult dosing.

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No				M	lodera	te				
Pain					Pain					Are you
	-1-	-1	_1_	_1_		-1-	-1-	- 1	1	$\bigcirc$
	$\neg$							$\neg$	1	(88) (88)
0	1	2	3	4	5	6	7	8	9	
										0 1 - 2

		EN	IT		
	Are you	in pain?	(¿Tiene	Dolor	?)
(3)	(5)		(5) (5)	(%)	) (pot
0	1 - 2	3 - 4	5 - 6	7-8	9 - 10
very happy.	hurts just	hurts a	hurts even	hurts a	hurts as much
no pain	a little bit	little more	more	whole lot	as possible
(Muy feliz	(Duele un	(Duele un	(Duele	(Duele	(Duele tanto como
Sin dalor)	poquito)	poco más)	aún más)	mucho)	pueda imaginar)

Categories		FLACC Scoring for Infants	
	0	1	2
Face	No particular expression or smile	Occasional grimace or frown, withdrawn, disinterested	Frequent to constant frown, clenched jaw, quivering chin
Legs	Normal position or relaxed	Uneasy, restless, tense	Kicking, or legs drawn up
Activity	Lying quietly, normal position, moves easily	Squirming, shifting back and forth, tense	Arched, rigid, or jerking
Cry	No cry (awake or asleep)	Moans or whimpers, occasional complaint	Crying steadily, screams or sobs, frequent complaints

Consolability Content, relaxed			occasional touching, lking to, distractible	Difficult to console or comfort		
	l	inugging of ta	iking to, distraction	Common		
	AEMT			AEMT		
<ul> <li>Vascular access and fluid therapy.</li> <li>The order in which medications below are listed is not intended to indicate hierarchy, order, or preference of administration</li> <li>Dosages should be reduced by half when there is concern for drug or alcohol intoxication</li> <li>Consider treating with antiemetic's prior to pain management</li> <li>Maximize dosing of a single agent before using additional agents</li> </ul>			<ul> <li>Vascular access and fluid therapy.</li> <li>The order in which medications below are listed is not intended to indicate hierarchy, order, or preference of administration</li> <li>Dosages should be reduced by half when there is concern for drug or alcohol intoxication</li> <li>Consider treating with antiemetic's prior to pain management</li> <li>Maximize dosing of a single agent before using additional agents</li> </ul>			
Pain Contr	ol		Pain Control			
☐ Acetaminophen 650-1000mg PO/IV, single dose only			☐ Acetaminophen 15mg/kg PO/IV, single dose only. Max dose 650mg			
□ Ketoro	<b>fen</b> 600mg PO, single dose <b>lac</b> 15mg IV, single dose of <b>ine Sulfate</b> 2-10 mg q10 m	nly	☐ <b>Ibuprofen 10mg/kg</b> PO ONLY FOR USE in patients over the age of 6 months, single dose only. Max dose 600mg			
IV/IO/I	M titrated to effect yl 25-100 mcg q10 minutes		☐ <b>Ketorolac</b> 0.5mg/kg IV (max 15mg), single dose only, ONLY FOR USE in patients over the age of 2.			
<ul> <li>Anxiety Control</li> <li>☐ Midazolam</li> <li>IV/IO - 2.5-5 mg, may repeat once in 10 minutes, if needed. Total max dose: 10mg</li> <li>Intranasal (IN) - 5 mg, may repeat once in 10 minutes to a max dose of 10mg</li> <li>Intramuscular (IM) - 2.5-5.0 mg per dose repeated q10 minutes to a maximum total</li> </ul>			IV/IM/IO. Use 2 to 100mcg per dose) 10 min.  Morphine Sulfatt dose) IV/IM/IO ti	ag (max 100 mcg per dose) mcg/kg for IN (intranasal) (max a. May repeat x 1 if needed after  e 0.1 mg/kg (max of 4mg per trated to effect oses, contact OLMC		
Diazep  IV eff  In pre  Loraze  IV eff	/IO – 5 mg every 10 min to ect or max dosage of 20 mg tramuscular (IM) – 10 mg eferred, unless no other optic	once (IM not ons) the desired	once in 10 mi 10 mg • Intranasal (I repeat once in max dose: 10	ng/kg (max 5 mg), may repeat inutes, if needed. Total max dose:  (N) - 0.2 mg/kg (max 5 mg), may n 10 minutes, if needed. Total mg  ar (IM) - 0.2 mg/kg (max 10		
© Conta	ct OLMC for dosages above led or use of medication NC ine parameters.	e those	• IV/IO - 0.1 m once in 10 m 10 mg • Intramuscul	ng/kg (max 5 mg), may repeat inutes, if needed. Total max dose:  ar (IM) – 0.2 mg/kg (max 10 mot preferred unless no other		
			☐ Lorazepam • IV/IO – 0.05	mg/kg (max 2 mg), may repeat inutes, if needed. Total max dose:		

4 mg

**Intramuscular (IM)** – 0.05 mg/kg (max 4 mg) once

**PARAMEDIC** 

- ☐ **Ketamine 40mg diluted in 100mL** of normal saline IV/IO infused over 15 minutes OR until analgesia is attained. This is the preferred method of treatment.
- ☐ **Ketamine 10-20mg** IV/IO every 5 minutes to desired effect or max dosage of **40mg**.
- $\Box$  Ketamine Intranasal 50mg x 1 dose.

Contact OLMC for dosages above those provided or use of medication NOT fitting the guideline parameters.

**PARAMEDIC** 

- ☐ Ketamine 0.15-0.3 mg/kg (max 40mg) diluted in 100mL of normal saline IV/IO infused over 15 minutes ONLY FOR USE in patients over the age of 2 years. May halt infusion if pain relief obtained before full dose administered. This is the preferred method of treatment.
- ☐ **Ketamine 0.15-.03mg/kg** IV/IO every 5 minutes to the desire effect or max dose of **0.6mg/kg** not to exceed **40mg**.
- ☐ **Ketamine Intranasal 0.7mg/kg** x 1 dose not to exceed 50mg.