



## INDICATIONS

Conscious patient with complaints of pain consequent of trauma

## Patient Assessment

**1** Obtain vital signs and pain score

**2** **3** **4**

**2** Critical resuscitation interventions

**2** **3** **4**

## Exclusion Criteria?

Acute drug intoxication  
Chronic pain requiring ongoing use of analgesia  
Altered mental status or major head injury  
Haemodynamically unstable condition  
Pain consequent of non-traumatic or medical cause

NO

**Moderate to Severe Pain  
(Pain Score 4 - 10)**

**Consider non-pharmacological measures**

**Pain Persistent?**

YES

**First-line Analgesia**

**3ml Methoxyflurane  
(Max: 1 dose)**

NO

**Close Monitoring & Transport to Nearest Paediatric Hospital**



## PAIN ASSESSMENT

- Use the **Wong Baker Faces Scale** for children 3 to 6 years of age
- Use the **Visual Analogue Scale** for children above 6 years old
- Pain score is rated:
  - Mild pain - Score 1 to 3
  - Moderate pain - Score 4 to 6
  - Severe pain - Score 7 to 10



## MANAGEMENT

## Non-Pharmacological Measures

- Should be used for all patients
- Measures include:
  - Reassurance
  - Immobilization or splinting
  - Ice and elevation
  - Psychological techniques e.g. distraction, video, toys or music
  - Keep caregiver close

## Pharmacological Measures

- Check for contraindications
- All vials of Pentrox must be accounted for and use must be documented properly (Refer to [EMS-SOP-034](#)).



## MONITORING

- Monitor **the vital signs, pain score and GCS** every 5 minutes after administration of any analgesia
- Monitor the **Ramsay Sedation Score (RSS)** every 5 minutes during treatment of Pentrox and 5 minutes post administration
- Stop administration of analgesia if  $RSS \geq 3$  at any time

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