

Sickle Cell Pain Crisis

Aliases

None noted

Patient Care Goals

1. Identify potentially life-threatening complications of a sickle cell disease
2. Improve patient comfort

Patient Presentation

Inclusion Criteria

Patient with known sickle cell disease experiencing a pain crisis

Exclusion Criteria

1. Pain due to acute traumatic injury [See [Trauma Section](#)]
2. Abdominal pain due to or related to pregnancy [See [OB/GYN Section](#)]
3. Patients with sickle cell trait

Patient Management

Assessment

1. Perform airway assessment and management per the [Airway Management Guideline](#)
2. Obtain vital signs (pulse, blood pressure, respiratory rate, neurologic status assessment) and pulse oximetry
3. Provide evaluation and management of altered mental status per the [Altered Mental Status Guideline](#)
4. Provide evaluation and management of pain per the [Pain Management Guideline](#)
5. Obtain vascular access as necessary to provide analgesia and/or fluid resuscitation
6. Assess for potentially serious complications other than pain crisis which may include:
 - a. Acute chest syndrome
 - i. Hypoxia
 - ii. Chest pain
 - iii. Fever
 - b. Stroke [See [Suspected Stroke/Transient Ischemic Attack Guideline](#)]
 - i. Focal neurologic deficits
 - c. Meningitis
 - i. Headache
 - ii. Altered mental status
 - iii. Fever
 - d. Septic arthritis
 - i. Severe pain in a single joint
 - ii. Fever
 - e. Splenic sequestration crisis (usually young pediatric patients)
 - i. Abdominal pain, LUQ
 - ii. Splenic enlargement (examine with care)
 - iii. Hypotension, tachycardia