

## ANALGESIC MEDICATIONS (REFERENCE)

## FENTANYL

Potent narcotic (opiate) agonist

Used by Combat Medics

For mild to moderate pain management in a casualty that IS NOT in shock or in respiratory distress and IS NOT at significant risk of developing either condition.

DOSAGE(S):

800 mcg transmucosal, may repeat after 15 min;

ROUTE(S):

Transmucosal – between the cheek and gum (CM)

CONTRA-INDICATIONS:

Fentanyl allergy, significant hypotension, MAO inhibitors, myasthenia gravis, potential benefits may warrant use in pregnant women despite potential risks if the alternative is worse

POTENTIAL SIDE EFFECTS:

Sedation, euphoria, bradycardia, hypotension, circulatory depression, miosis, blurred vision, nausea, vomiting, laryngospasm, bronchoconstriction or respiratory depression

DRUG INTERACTIONS: Alcohol and other CNS depressants potentiate effects, MAOIs may precipitate hypertensive crisis

ONSET/PEAK/DURATION: 15-60 sec (<transmucosal)/20 sec to 4 min/1-2 hr

TACTICAL CONSIDERATIONS: Casualty weapons, communications and sensitive equipment should be secured; alterations in mental status can adversely affect assessment for shock and/or traumatic brain injury – use AVPU method to establish baseline prior to medication administration; monitor airway, breathing, and circulation closely - be prepared to administer naloxone, if indicated.

