

Treatment Protocols
Abdominal Pain - Pediatric

Stable	Unstable
Blood pressure appropriate for age	Systolic blood pressure low for age, and/or signs of poor perfusion
Pediatric BLS Standing Orders	
<ul style="list-style-type: none"> Universal Patient Protocol In females, establish last menstrual period if patient has started her menses Encourage immediate transport 	<ul style="list-style-type: none"> Universal Patient Protocol In females, establish last menstrual period if patient has started her menses Encourage immediate transport
Pediatric LALS Standing Order Protocol	
<ul style="list-style-type: none"> Establish IV PRN 	<ul style="list-style-type: none"> Establish IV 10-20 mL/kg NS IV bolus; titrated to age-appropriate systolic BP MR x1 For persistent hypotension, see Shock Protocol
Pediatric ALS Standing Order Protocol	
<ul style="list-style-type: none"> Establish IV/IO Ondansetron 0.1 mg/kg, max 4 mg - IV/IO/IM/ODT PRN MR x1 Pain Management Protocol PRN 	<ul style="list-style-type: none"> Establish IV/IO 10-20 mL/kg NS IV bolus; titrated to age-appropriate systolic BP MR x1 Ondansetron 0.1 mg/kg, max 4 mg - IV/IO/IM/ODT PRN MR x1 Pain Management Protocol PRN For persistent hypotension, see Shock Protocol
Pediatric Base Hospital Orders	
<ul style="list-style-type: none"> BH – repeat Ondansetron x 1 dose 	<ul style="list-style-type: none"> BH - Repeat Ondansetron x 1 dose BH – Repeat NS bolus x 1
Notes	
<ul style="list-style-type: none"> In pediatrics (and less frequently adults), abdominal pain can be anaphylaxis. Consider epinephrine IM if clinical history and exam are consistent with anaphylaxis. 	

APPROVED:

Signature on File
Katherine Staats, M.D. FACEP
EMS Medical Director