



4203

Nausea and/or Vomiting

Treatment Protocol



Last Reviewed: October 4, 2022

Last Revised: July 1, 2023

BLS Patient Management

- **Establish, maintain, and ensure:**
 - A. A patent and easily managed airway. Use manual maneuvers (head-tilt / chin-lift or jaw thrust), oropharyngeal suction and/or airway adjuncts (OPA / NPAs) as clinically indicated
 - B. Adequate respirations and tidal volume. Use a mouth-to-mask device or bag valve mask (BVM), when clinically indicated. Rescue ventilations via a BVM require the use of a manometer. Waveform / digital capnography is required when paramedics are present
 - C. Controlled bleeding. Use direct pressure and/or pressure dressing(s) and/or tourniquet(s) and/or hemostatic dressing(s), as clinically indicated
- **Oxygen**
As clinically indicated. Titrate to maintain, or increase, SpO₂ to a minimum of 94%. A range of 88-92% is acceptable for patients with a history of COPD
- Position the patient as clinically indicated for safety, comfort, and to meet physiologic requirements
- Attach ECG leads to the patient when a paramedic is present

ALS Patient Management

- Establish, maintain, and ensure peripheral IV and/or IO access for emergency stabilization, and/or as clinically indicated, in adult and pediatric patients

Consider the need for additional sites as clinically indicated
- Interpret and continuously monitor ECG, vital signs and SpO₂
- **For nausea and/or vomiting**
Adults:
Ondansetron 4 mg PO (1 ODT). **MAY REPEAT TWICE TO MAX 12 MG. ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).**

****OR****

Ondansetron 4 mg (2 mL) IV solution slow IV/IO push or IM. **MAY REPEAT TWICE TO MAX 12 MG. ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).**

Pediatrics:
ADMINISTRATION OF ONDANSETRON ODT TO PATIENTS WEIGHING LESS THAN 10 KG (≈22 LBS) IS NOT PERMITTED.

Weight = 10 kg or greater: Ondansetron 4 mg PO (1 ODT). **MAY REPEAT TWICE TO MAX 12 MG. ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).**

****OR****

Ondansetron 0.1 mg / kg IV solution slow IV/IO push or IM. **MAX SINGLE DOSE IS 4 MG. MAY REPEAT TWICE. ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).** For assistance with accurate dosing, refer to the REMSA PMDR or REMSA app.

INITIAL AND REPEAT ADMINISTRATIONS FOR ADULTS AND PEDIATRICS REQUIRE A BASE HOSPITAL ORDER (BHO).

Adults: Diphenhydramine 25-50 mg (0.5 – 1 mL) IM or slow IV/IO push.

Pediatrics: Diphenhydramine 1 mg / kg slow IV/IO push. For assistance with accurate dosing, refer to the REMSA PMDR or REMSA app.

****OR****

Diphenhydramine 2 mg / kg IM. **MAX SINGLE DOSE IS 50 MG.** For assistance with accurate dosing, refer to the REMSA PMDR or REMSA app.