



EMS System for Metropolitan Oklahoma City and Tulsa 2025 Medical Control Board Treatment Protocols



 EMS SECTION

Approved 9/04/24, Effective 1/15/25, replaces all prior versions

16FF – MORPHINE SULFATE

PARAMEDIC

Class: Narcotic analgesic

Actions/Pharmacodynamics: Stimulates central nervous system opiate receptors, producing systemic analgesia. Modest vasodilation effects increase peripheral venous capacitance, and reduce venous return, myocardial workload, and myocardial oxygen demand.

Indications:

- Snakebites (8E)
- Abdominal Pain/Nausea/Vomiting/Diarrhea (9A)
- Pain Management (Acute Onset & Chronic Type) (9D)
- Eye Injury (10B)
- Dental Injury/Pain (10C)
- Chest/Abdomen/Pelvis Injury (10D)
- Extremity/Amputation Injury (10G)
- Compartment Syndrome (10J)
- Crush Injury Syndrome (10K)
- Burns (10L)
- Lightning/Electrical Injury (11C)
- Pelvic Pain (13E)

For all listed situations, indication is acute pain control in alert, hemodynamically stable patient.

Contraindications:

- Hypotension
- Respiratory Depression
- Minor Degrees of Pain
- Pain Assessed as Factitious

Side Effects: Hypotension, respiratory depression, euphoria, dizziness. Nausea and/or vomiting are rarely seen if administration is slow IVP. Rapid IVP will lead to an accompanying histamine release, producing the nausea and/or vomiting often erroneously attributed to morphine itself.

Pharmacokinetics: Onset of action within 3-5 minutes after IV administration. Duration of effect can reach 4 hours depending upon end-organ function.



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PROTOCOL 16FF: Morphine Sulfate, cont.

Dosage:

- Snakebites – Adult (8E)**
- Abdominal Pain/Nausea/Vomiting/Diarrhea – Adult (9A)**
- Pain Management (Acute Onset & Chronic Type) – Adult (9D)**
- Eye Injury – Adult (10B)**
- Dental Injury/Pain – Adult (10C)**
- Chest/Abdomen/Pelvis Injury – Adult (10D)**
- Extremity/Amputation Injury – Adult (10G)**
- Compartment Syndrome – Adult (10J)**
- Crush Injury Syndrome – Adult (10K)**
- Burns – Adult (10L)**
- Lightning/Electrical Injury – Adult (11C)**
- Pelvic Pain – Adult (13E)**

For all listed situations, indication is acute pain control in alert, hemodynamically stable patient.
2 – 4 mg slow IVP
May repeat every 5 minutes to a maximum cumulative dose of 10 mg

- Snakebites – Pediatric (8E)**
- Abdominal Pain/Nausea/Vomiting/Diarrhea – Pediatric (9A)**
- Pain Management (Acute Onset & Chronic Type) – Pediatric (9D)**
- Eye Injury – Pediatric (10B)**
- Dental Injury/Pain – Pediatric (10C)**
- Chest/Abdomen/Pelvis Injury – Pediatric (10D)**
- Extremity/Amputation Injury – Pediatric (10G)**
- Compartment Syndrome – Pediatric (10J)**
- Crush Injury Syndrome – Pediatric (10K)**
- Burns – Pediatric (10L)**
- Lightning/Electrical Injury – Pediatric (11C)**
- Pelvic Pain – Pediatric (13E)**

For all listed situations, indication is acute pain control in alert, hemodynamically stable patient
****OLMC Order Only** – Typical dose is 0.1 mg/kg up to 2 mg per dose.

How Supplied:

- 2 mg/1 mL pre-filled syringe
- 4 mg/1 mL vial, ampule, or pre-filled syringe
- 8 mg/1 mL pre-filled syringe
- 10 mg/1 mL vial
- 10 mg/10 mL vial

(Always check concentration and dose per container at time of patient medication administration)