

## EMS System for Metropolitan Oklahoma City and Tulsa 2019 Medical Control Board Treatment Protocols



Approved 9/12/18, Effective 1/15/19, replaces all prior versions

## 9D - PAIN MANAGEMENT (ACUTE ONSET & CHRONIC TYPE) **EMERGENCY MEDICAL ADULT & PEDIATRIC DISPATCHER** TREATMENT PRIORITIES **EMERGENCY MEDICAL** RESPONDER 1. Vital signs **EMD** 2, Opiate analgesia as clinically appropriate per **EMT** protocol ADVISE TO AVOID PHYSICAL EXERTION **EMT-INTERMEDIATE 85** OR ENVIRONMENTAL STRESS (TEMP EXTREMES). DO NOT MOVE THE PATIENT UNLESS IN DANGER DO NOT ATTEMPT TO SPLINT INJURIES **ADVANCED EMT PARAMEDIC EMR EMT** GENERAL SUPPORTIVE CARE (MEDICAL PT) OR TRAUMA AND HYPOVOLEMIC SHOCK SUPPORTIVE CARE (TRAUMA PT) **OBTAIN VITAL SIGNS** O2 VIA NC, NRB, OR BVM AS APPROPRIATE APPLY CARDIAC MONITOR (when available) **EMT OR HIGHER LICENSE:** MEASURE END - TIDAL CO2 & MONITOR WAVEFORM CAPNOGRAPHY (if equipped, \*\* Mandatory use if pt intubated) **AEMT EMT-185**

IV ACCESS

**ADULT:** IV NS TKO IF SYS BP  $\geq$  100 mmHg WITHOUT HYPOTENSIVE SYMPTOMS

ADULT: IV NS 250 mL BOLUS IF SYS BP <100 mmHg WITH HYPOTENSIVE SYMPTOMS & NO SIGNS OF PULMONARY EDEMA
ADULT: REPEAT UP TO 2 LITERS NS IF SYS BP REMAINS < 100 mmHg WITH HYPOTENSIVE SYMPTOMS & NO SIGNS OF PULMONARY EDEMA
PEDIATRIC: IV NS 20 mL/kg BOLUS IF SYS BP < (70 + 2x age in years) mmHg

REPEAT UP TO 60 mL/kg IF SYS BP REMAINS < (70 + 2x age in years) mmHg & NO SIGNS OF PULMONARY EDEMA

## **PARAMEDIC**

ANALGESIA (IF REQUIRED - PARAMEDIC DISCRETION, PARTICULARLY WITH CHRONIC PAIN SYMPTOMS)

FOR OPIATE USE, ADULT MUST HAVE SYS BP ≥ 100 mmHg; PEDIATRIC MUST HAVE SYS BP ≥ (70 + 2x age in years) mmHg

ADULT: FENTANYL 1 mcg/kg SLOW IVP/IM/IN, MAXIMUM DOSE 100 mcg. MAY REPEAT EVERY 10 MINUTES TO MAXIMUM CUMULATIVE DOSE OF 3 mcg/kg or 250 mcg WHICHEVER IS LESSER.

OR
ADULT: MORPHINE SULFATE 2 - 4 mg SLOW IVP, MAY REPEAT 2 - 4 mg EVERY 5 MINUTES TO A TOTAL OF 10 mg.
OR

ADULT: HYDROMORPHONE 0.5 - 1 mg SLOW IVP, MAY REPEAT EVERY 10 MINUTES TO MAXIMUM CUMULATIVE DOSE OF 2 mg.

PEDIATRIC: OLMCP ORDER ONLY

OLMCP CONSULT IF FURTHER ANALGESIA REQUIRED

CONTINUOUS ASSESSMENT & TREATMENT PER APPLICABLE PROTOCOL(S)