



EMSA-Intermediate Treatment Protocol 5902

Pain Management

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Pain management in the field may be indicated when there is isolated trauma to extremities, severe burns, or amputations. Occasionally, patients with severe musculoskeletal back, neck, or flank pain may require pain treatment in order to facilitate packaging and transport. Except in rare circumstances, pain medication **should not** be administered to multiple trauma patients with possible head, abdomen, or chest injuries.

Nausea and/or vomiting can be a side-effect of narcotic pain medications or associated with many conditions including motion sickness while being transported. Contact Medical Command for assistance for patients suffering from severe nausea or to prevent nausea associated with these conditions.

- A. Perform **TAMP (5101) or MAMP (5201)**.
- B. Review patient's allergies, current medications, and past medical history.
- C. IV normal saline KVO or saline lock.
- D. Contact Medical Command.

E. If severe pain, administer morphine sulfate 2 to 4 mg IV (pediatric dose 0.05mg/kg) **per order of MCP**.



F. If pain not relieved may repeat dosing **per MCP order**. Doses greater than 4 mg IV in a single dose **require MCP order**.



- G. Expedite transport and monitor vital signs and mental status closely.