

PAIN MANAGEMENT

UPDATED 4/2025

ALL PROVIDERS

- ☐ Focused history and physical exam
- ☐ Assess the patient's pain using verbal and non-verbal cues and appropriate pain scale
- ☐ Continuous cardiac, ETCO₂, blood pressure, and pulse oximetry monitoring.
 - Mandatory for any narcotic use
- ☐ **Treatment Plan**
 - Consider non-pharmaceutical/family centered comfort measures as indicated.
 - Immobilize any obvious injuries and place patient in a position of comfort
 - Consider ice packs
 - Implement pharmaceutical measures
 - Monitor patient vital signs every 5 minutes
 - Have naloxone available in case of respiratory depression
 - **Be cautious in giving pain medications if:** SBP <90mmHg in adults, SBP <70 + (age in years x 2) mmHg for pediatrics, SpO₂ < 90% without oxygen, GCS <14, or adequate relief has been achieved (<5/10 pain scale)
 - **If pain and anxiety are both present, treat pain fully prior to contacting OLMC for further guidance.**
 - **Behavioral Emergencies protocol should not be used with pain management, before OLMC guidance.**
- ☐ **Key Considerations**
 - Use Wong-Baker Faces scale for pain assessment in patients 3-8 years old
 - A FLACC scale can be used to assess pain in infants
- ☐ **Dosages should be reduced by half when there is concern for drug or alcohol intoxication and/or elderly.**
- ☐ **Maximize dosing of a single agent before using additional agents**
- ☐ **The order in which medications below are listed is not intended to indicate hierarchy, order, or preference of administration**

FLACC Scoring for Infants			
Categories	0	1	2
Face	No expression or smile	Occasional grimace or frown, withdrawn, disinterested	Frequent to constant frown, clenched jaw, quivering chin
Legs	Normal position or relaxed	Uneasy, restless, tense	Kicking, or legs drawn up
Activity	Lying quietly, normal position, moves easily	Squirming, shifting back and forth, tense	Arched, rigid, or jerking
Cry	No cry (awake or asleep)	Moans or whimpers, occasional complaint	Crying steadily, screams or sobs, frequent complaints
Consolability	Content, relaxed	Reassured by occasional touching, hugging or talking to, distractible	Difficult to console or comfort

ADULT

PEDIATRIC

NOTE: Pediatric weight-based dosing should not exceed adult dosing.

EMT

EMT



AEMT

- ☐ Vascular access and fluid therapy
- ☐ **Acetaminophen - 500-1000mg PO**, single dose only
- ☐ **IV Acetaminophen - 15mg/kg** (Max 1000mg). 100ml drip should be infused over 15 minutes.
- ☐ **Ibuprofen - 600mg PO**, single dose only
- ☐ **Ketorolac - 30mg IM or 15mg IV/IO**, single dose only
- ☐ **Fentanyl - 25-100mcg** (1mcg/kg) q10 minutes IV/IO/IM/IN. (Max 200 mcg)
- ☐ **Morphine Sulfate - 2-10mg q5 minutes** IV/IO/IM titrated to effect. (Max 10 mg)

AEMT

- ☐ Vascular access and fluid therapy
- ☐ **Acetaminophen - 15mg/kg PO**, single dose only. (Max 650mg).
- ☐ **IV Acetaminophen - 15mg/kg** 100ml drip should be infused over 15 minutes. (Max 1000mg)
- ☐ **Ibuprofen - 10mg/kg PO** single dose only. **ONLY FOR USE in patients over the age of 6 months**, (Max dose 600mg)
- ☐ **Ketorolac - 0.5mg/kg IV or IM** single dose only, **ONLY FOR USE in patients over the age of 2**. (Max 15mg)
- ☐ **Fentanyl - 1 mcg/kg IV/IM/IO**. May repeat once after 10-15mins. (Max 50mcg per dose)
 - **2 mcg/kg** for IN (intranasal) (Max 100mcg per dose).
- ☐ **Morphine Sulfate - 0.1 mg/kg IV/IM/IO** titrated to effect (Max 4mg per dose)

PARAMEDIC

- ☐ **Ketamine**
 - Consider the size of the patient for dosing, ideal body weight (IBW) should be used
 - **IV/IO Push– 10-20mg** every 5 minutes to the desired effect (Max of 40mg)
 - **IV/IO Drip- 40mg** is to be diluted in 100mL of NS/LR
 - Infused over 15mins OR until analgesia is attained
 - **Intranasal – 50mg x 1 dose**
- ☐ May halt infusion if pain relief is obtained before full dose is administered.
- 🕒 **For additional doses, contact OLMC**

PARAMEDIC

- **Ketamine**
 - Consider the size of the patient for dosing, ideal body weight (IBW) should be used
 - **IV/IO – 0.15-0.3mg/kg** diluted in 100mL of NS or LR, IV/IO infused over 15 minutes **ONLY FOR USE in patients over the age of 2 years**. (Max 40mg)
- May halt infusion if pain relief is obtained before full dose is administered.
- 🕒 **For additional doses, contact OLMC**