

Sierra – Sacramento Valley EMS Agency Treatment Protocol

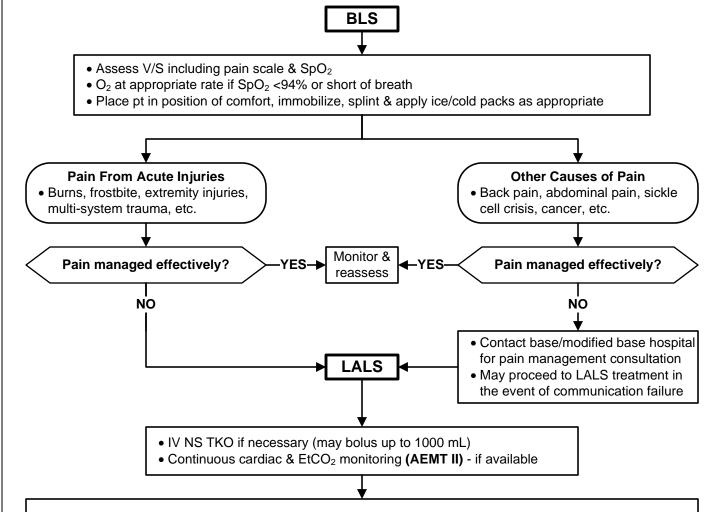
M-8 (LALS)

Pain Management

Approval: Troy M. Falck, MD – Medical Director Effective: 06/01/2022

Approval: Victoria Pinette – Executive Director Next Review: 05/2025

- Pain management shall be adequately addressed/documented for all pts with a report of pain.
- Treatment should be directed at reducing pain to a tolerable level pts may not experience complete relief.



Morphine (AEMT II)

2 - 5 mg slow IV (over 1 min) or IM - May repeat every 5 mins as necessary (max cumulative: 20 mg)

Pts with severe pain from acute isolated extremity injuries (including hip & shoulder), not adequately relieved by other pain management methods/analgesics

Midazolam (AEMT II)

- 1 mg slow IV May repeat x 1 in 5 mins (max cumulative: 2 mg)
- ① Use extreme caution when administering morphine & midazolam to the same pt; this results in a deeper level of sedation with an increased risk for airway & respiratory compromise
- Midazolam doses shall be administered a minimum of 5 mins following administration of a morphine dose
- ① Do not administer morphine or midazolam to pts with any of the following contraindications:
 - SBP <100
- SpO2 <94% or RR <12
- ALOC or suspected TBI