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|  | <b>COUNTY OF SACRAMENTO</b><br>EMERGENCY MEDICAL SERVICES AGENCY     | Document #          | 9018.06  |
|   | <u>PROGRAM DOCUMENT:</u><br><br><b>Pediatric<br/>Pain Management</b> | Initial Date:       | 07/23/13 |
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Signature on File  
EMS Medical Director

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Signature on File  
EMS Administrator

**Purpose:**

- A. To serve as the treatment standard in treating pediatric patients with complaints of pain.

**Authority:**

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

**Protocol:**

- A. Every patient deserves to have their pain managed. Consider reassurance, adjusting position of comfort, ice or heat, and gentle transport before deciding to treat with narcotic medication.

Criteria for use of opiate medication for pain control (All criteria must be met):

Burns:

1. Partial or full thickness burn(s) with moderate to severe pain and without evidence of shock or altered mental status.
2. SBP > [70 + 2x age]
3. RR > minimum appropriate for age and SpO2 ≥ 94% irrespective of oxygen.

Trauma:

1. Moderate to severe pain from amputations and/or suspected rib fractures, extremity fracture(s), including hip or shoulder injuries, or dislocations
2. No evidence of head injury and GCS = 15 or baseline
3. SBP > [70 + 2x age]
4. RR > minimum appropriate for age and SpO2 ≥ 94%

Other (i.e. non-traumatic abdominal pain, sickle cell crisis, cancer pain):

1. Moderate to Severe pain
  2. SBP > [70 + 2x age]
  3. RR > minimum appropriate for age and SpO2 ≥ 94%
- B. Avoiding hypothermia is imperative to the management of the critical pediatric patient. Passive warming measures including warm ambient/environmental temperature, use of blanket, covering head may be used to maintain normal body temperature >37°C or 98.6°F.

### BLS

1. Assess and support ABCs as needed
2. Supplemental O<sub>2</sub> as necessary to maintain SpO<sub>2</sub> ≥ 94%. Use the lowest concentration and flow rate of O<sub>2</sub> as possible.
3. Assess and treat as appropriate for underlying cause.
4. Transport.

### ALS

1. Advanced Airway Adjuncts as needed. Refer to Pediatric Airway Management PD# 8837
2. Cardiac Monitor and SpO<sub>2</sub>.
3. Initiate vascular access
4. Document pain scale (sample scale attached below) with initial assessment/vital signs, after each administration of medication, and after all procedures.
5. Pain medication shall be titrated to relief if pain not effectively managed with BLS pain management methods. ONLY USE ONE (1):
6. **Fentanyl Citrate:**
  - a. Burn:
    - 1 mcg/kg slow IV/IO/IN push q 5 minutes. Max dose of 3 mcg/kg total
  - b. Trauma:
    - 1 mcg/kg slow IV/IO/IN push q 5 minutes. Max dose of 2 mcg/kg total
  - c. Other:
    - 1 mcg/kg slow IV/IO/IN push q 5 minutes. Max dose of 2 mcg/kg total
7. Morphine Sulfate:
  - a. Burn:
    - \*\* 0.1mg/kg slow IV/IO push q 5 minutes. Max dose of 0.3 mg/kg.
  - b. Trauma:
    - \*\* 0.1mg/kg slow IV/IO push q 5 minutes. Max dose of 0.2 mg/kg.
  - c. Other:
    - 0.1mg/kg slow IV/IO push q 5 minutes. Max dose of 0.2 mg/kg total

\*\* Avoid morphine in hypovolemic patients.

**Examples of a 0-10 Pain Scales**

|  |  |
|--|--|
|  | <b>0</b>                                     |
| <b>Minor</b><br>Able to adapt to pain                                      | <b>1</b><br><b>Very Mild</b>                 |
|  | <b>2</b><br><b>Discomforting</b>             |
|  | <b>3</b><br><b>Tolerable</b>                 |
| <b>Moderate</b><br>Interferes with many activities.                        | <b>4</b><br><b>Distressing</b>               |
|  | <b>5</b><br><b>Very Distressing</b>          |
|  | <b>6</b><br><b>Intense</b>                   |
| <b>Severe</b><br>Patient is disabled and unable to function independently. | <b>7</b><br><b>Very Intense</b>              |
|  | <b>8</b><br><b>Utterly Horrible</b>          |
|  | <b>9</b><br><b>Excruciating Unbearable</b>   |
|  | <b>10</b><br><b>Unimaginable Unspeakable</b> |

Wong-Baker FACES Pain Rating Scale



From Wong D.L., Hockenberry-Eaton M., Wilson D., Winkelstein M.L., Schwartz P.: Wong's Essentials of Pediatric Nursing, ed. 6, St. Louis, 2001, p. 1301. Copyrighted by Mosby, Inc. Reprinted by permission.

Cross Reference: Pediatric Burns, PD# 9004.  
 Pediatric Trauma, PD# 9017.  
 Pediatric Parameters, PD# 9016.  
 Pediatric Airway Management PD# 8837