EMERGENCY DEPARTMENT POLICIES

SUBJECT: ED Nurse Initiated Pain Protocol

NO. 40.2

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Original Date of Issue: 2/12

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<th>Patient Population</th>
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<td>Neonate</td>
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<td>Pediatric</td>
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<td>Adolescent</td>
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<td>Adult</td>
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<td>Geriatric</td>
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Goal: maximize the number of patients who wish to have treatment for pain, treated for pain, in the shortest time.

Criteria
1. Patient endorses wish to have medication for pain.
2. Patient does not meet criteria to be triaged to resuscitation zone.
3. Patient does not have allergy to candidate pain medication.

Analgesic options
1. Acetaminophen 975 mg PO or Ibuprofen 800 mg PO
2. Oxycodone 5 mg PO
3. Morphine 4 mg IV

Nurse shall confirm order with one of the patient’s physicians in the following order:
- Intake Attending or Pediatrics Attending
- Either the North Senior Resident
- North Attending or South Attending (as patients are assigned to a zone)

Guidelines for medication dispensation

Complete Triage Assessment: (current meds, allergies, VS AND documented Pain level)

1. Give Acetaminophen 975 mg PO (15 mg/kg for peds) or Ibuprofen 800 mg PO (10 mg/kg for peds)
   - If not taken PTA
   - “Non urgent” pain complaints (ie, headache, toothache, earache, contusions, lacerations, minor burns, musculoskeletal pain, etc)
   - Pain level <5 in Adults or <8 in Pediatrics
   - Patient is not vomiting
   - Ibuprofen 800 mg PO (400 in the elderly or patient with liver failure) may be substituted in case Acetaminophen was taken by patient and there is no ASA / NSAID allergy.
   - May be in WR if no bed inside the ED.

2. Give Oxycodone 5 mg PO
   - Adult patients at triage with moderate pain (level 5-7)
• Patient is not vomiting
• Triaged into ED (no Resus criteria)

3. Morphine 4mg IV
   • If pain level is severe (level>7)
   • Patient is vomiting
   • Physician evaluation required within 30 minutes for IV pain medication +/- antiemetic
   • Triage into ED (no Resus criteria)