



Regional Emergency Medical Organization
Regional Medical Advisory Committee



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REMAC ADVISORY: 2008 - 05

Re: **Pain Management Protocol Modification** **Morphine dosing for intramuscular administration**

Background:

The development of the current pain management protocol in the REMO region has been a very exciting process for the Medical Advisory Committee. Over the last three years we have seen the implementation of standing order morphine, first for paramedics and currently for paramedics and critical care technicians. This has been safe and highly successful.

Many providers are choosing to give an initial dose of morphine intramuscularly. The dosing chosen for the protocol is very conservative for the slow absorption of the intramuscular route. Currently dosing for Morphine on standing orders is 0.05 mg/kg for both intravenous (IV) and intramuscular (IM) administrations. This is leading to inadequate initial pain management in some patients. At the request of both our providers and our physicians, the REMAC has revised and increased the dosing of morphine for IM administration.

Modification:

- Morphine 0.1 mg/kg for IM (intramuscular) administration
- Morphine 0.05 mg/kg for IV (intravenous) administration remains unchanged
- Total dose of morphine administered prior to consulting with a physician is 10 mg.

Note:

Providers may always give LESS than the weight based dose. Please consider in the elderly or chronically ill.

Please remember:

- Standing orders are established to facilitate the early administration of pain medications to patients in severe pain. Please make every attempt to initiate pain management early in the course of EMS care, prior to moving the patient to the ambulance.
- Document the pain scale for a patient before and after administration of the medication.
- Redose medication as needed during transport.
- Proximity to the hospital is not a reason to withhold pain management.