Potential causes of pain include:

- Musculoskeletal
- Visceral (abdominal)
- Cardiac
- Pleural / respiratory
- Neurogenic
- Renal (colic)

History

- Age
- Location and duration
- Severity (0 – 10 scale or Wong-Baker faces scale)
- Past medical history
- Medications
- Drug allergies

Signs and Symptoms

- Severity (pain scale)
- Quality (e.g. sharp, dull, or stabbing)
- Radiation
- Relation to movement or respiration
- Increased with palpation of area

Differential

- Per the specific TG

Position of comfort

Apply cold pack, if applicable

Monitor and reassess

Consider IV/ IO procedure

Assess and monitor respiratory status

Monitor continuous EtCO₂

Apply and monitor cardiac rhythm

Moderate to severe pain

Fentanyl IV/IO/IM

Use Pediatape and refer to dosing guide or Fentanyl IN

Use Pediatape and refer to dosing guide

Single dose only

Monitor and reassess every 5 minutes following administration

Refer to contraindications and cautions

Notify receiving facility.
Contact Base Hospital for medical direction as needed

Fentanyl
Contact Base Hospital for additional orders

Pearls

• Use EXTREME CAUTION in administering pain medication to patients less than 10kg.
• This treatment guideline applies to patients < 15 years of age and who can be measured on a PediaTape. If a patient is larger than a PediaTape, you may use the Adult Pain Control Treatment Guideline.
• Pain severity (0 – 10 scale or Wong-Baker faces scale) is a vital sign to be recorded before and after all BLS pain control measures and ALS pain medication delivery. Monitor blood pressure and respirations closely as pain control medications may cause hypotension or respiratory distress.
• Contraindications of Fentanyl include:
  - Closed head injury
  - Hypotension
    - Neonate: < 60mmHg or weak pulses
    - Infant: < 70mmHg or weak pulses
    - 1-10 years: < 70mmHg + (age in years x2)
    - Over 10 years: <90mmHg
  - Altered level of consciousness
  - Respiratory failure/worsening status
  - Headache
  - Childbirth/suspected active labor
  - Headache
  - Childbirth/suspected active labor
• Have Naloxone available to reverse respiratory depression should it occur.
• Burn patients may require higher than usual opioid doses to achieve adequate pain control. IF A PATIENT HAS SUFFERED BURNS THAT REQUIRE TRANSPORT TO A BURN CENTER, THE PATIENT MAY REQUIRE MORE THAN THE MAXIMUM TOTAL DOSE OF FENTANYL OR KETAMINE TO ACHIEVE PAIN CONTROL. CONTACT THE BASE HOSPITAL FOR ADDITIONAL ORDERS.