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Executive Director

SIGNATURE ON FILE IN EMS OFFICE
Medical Director

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NON-TRAUMATIC ABDOMINAL PAIN

- I. AUTHORITY: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. PURPOSE: To serve as the treatment standard for EMT-Is and EMT-Ps in treating patients.
- III. PROTOCOL:

STANDING ORDERS

See Policy 554.86 for Abdominal Trauma

ABC's

OXYGEN:

Oxygen delivery as appropriate

MONITOR:

Treat rhythm as appropriate.

IV ACCESS

Establish an IV ~~with NS~~, titrate to a systolic BP of 90 – 100 mmHg if the assessment indicates any of the following:

- a. Hemodynamic instability
- b. Concurrent respiratory compromise
- c. Glasgow Coma Score of less than or equal to 13
- d. Significant hemorrhage
- e. Pulsatile abdominal mass

f. Suspected Ectopic Pregnancy

g. May establish an IV for pain management

~~OR~~

~~Of the pulse rate is less than or equal to 120 BPM AND there are signs of hypoperfusion such as decreased sensorium, diaphoresis, capillary refill greater than two seconds, cool extremities, or cyanosis.~~

~~May establish an IV for pain management~~

MORPHINE:

2 mg IVP/IM. May repeat once. Medical abdominal pain patients may only receive 4 mg Morphine without Base Physician Order.

BASE PHYSICIAN ORDER

MORPHINE:

Additional Morphine per Base Physician order.