



PAIN MANAGEMENT



Escambia County, Florida - ALS/BLS Medical Protocol

Paramedic Only
This entire protocol is ALS / Paramedic only.

Isolated Extremity Fracture

The purpose of this procedure is to manage pain associated with isolated extremity fractures not associated with multi-system trauma or hemodynamic instability.

ALS Level 1

1. Patients should be asked to quantify their pain on an analog pain scale (0=least severe to 10=most severe).

This number should be documented and used to measure the effectiveness of analgesia.

2. Distal circulation, sensation and movement should be noted and recorded in the injured extremity.
3. The extremity should be immobilized as described in [Extremity Injuries](#).
4. Extremity fractures should be elevated, if possible, and cold applied.

ALS Level 2 (Physician authorization required)

1. If pain persists and systolic BP >100 mmHg, Morphine Sulfate may be given intravenously. Morphine Sulfate should be given at a rate of 2 mg IV over 2-3 minutes, to the desired effect or a maximum of 10 mg.

Acute Back Strain


This procedure should be used in the isolated back strain where an acute abdominal process can be ruled out (see [Abdominal Pain Differential](#)).



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Approved by:


Charles Neal, D.O. Medical Director



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ALS Level 1

1. Patients should be asked to quantify their pain on an analog pain scale (0=least severe to 10=most severe).

This number should be documented and used to measure the effectiveness of analgesia.

2. Secure patient to back board PRN.

ALS Level 2 (*Physician authorization required*)

3. If pain persists and systolic BP >100 mmHg, Morphine Sulfate may be given intravenously.

Morphine Sulfate should be given at a rate of 2 mg IV over 2-3 minutes, to the desired effect or a maximum of 10 mg.

Renal Colic

This procedure is used for flank pain associated with kidney stones where an acute abdominal process can be ruled out (see [Abdominal Pain Differential](#)).

ALS Level 1

1. Patients should be asked to quantify their pain on an analog pain scale (0=least severe to 10=most severe).


This number should be documented and used to measure the effectiveness of analgesia.



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ALS Level 2 (*Physician authorization required*)

2. If pain persists and systolic BP >100 mmHg, Morphine Sulfate may be given intravenously. Morphine Sulfate should be given at a rate of 2 mg IV over 2-3 minutes, to the desired effect or a maximum of 10 mg.

Soft Tissue Injuries, Burns, Bites and Stings

This procedure is used for pain associated with soft tissue injuries, burns, bites and stings not associated with multi-system trauma or hemodynamic instability.

ALS Level 1

1. Patients should be asked to quantify their pain on an analog pain scale (0=least severe to 10=most severe). This number should be documented and used to measure the effectiveness of analgesia.

ALS Level 2 (*Physician authorization required*)


1. If pain persists and systolic BP >100 mmHg, Morphine Sulfate may be given intravenously. Morphine Sulfate should be given at a rate of 2 mg IV over 2-3 minutes, to the desired effect or a maximum of 10 mg.



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