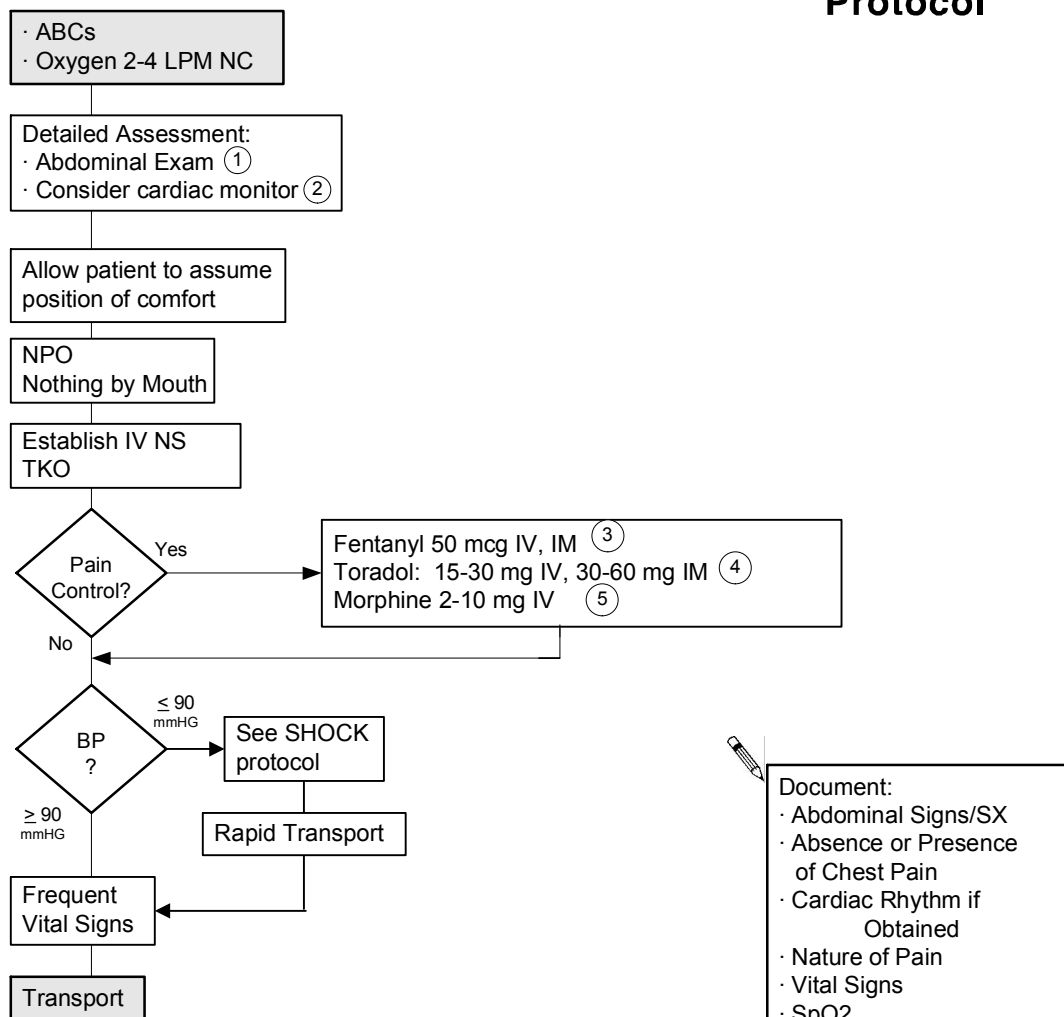


Abdominal Pain: Not related to pregnancy or trauma

ALS Protocol



- 1 Abdominal Exam: Note pain (nature, duration, intensity on 1-10 scale, radiation). Observe for palpable mass, always palpate with care. Auscultate prior to palpation. If AAA suspected initiate 2nd IV. Note associated signs & symptoms; (nausea, vomiting, bowel tones, guarding, rebound tenderness, distention). History: previous episodes, last meal, current medications, last menstrual period, possibility of pregnancy, bloody stool/ diarrhea, melena, hematemesis, fever
- 2 Be aware that ischemic cardiac pain can present as abdominal pain especially in older patients.
- 3 Fentanyl: repeat dose 50 mcg prn (titrate to pain). Physician order required for respiratory depression/compromise, shock, or altered mentation.
- 4 Toradol: Most effective for colic spastic type pain including gall bladder, kidney stones, and general pain control. Use caution if potential for bleeding and with elderly patients.
- 5 Morphine: May cause nausea/vomiting follow MS administration with Phenergan or Zofran.