

CENTRAL CALIFORNIA
EMERGENCY MEDICAL SERVICES
A Division of the Fresno County Department of Public Health

Manual	Emergency Medical Services Administrative Policies and Procedures	Policy Number 530.43
Subject	Paramedic Treatment Protocols PEDIATRIC PAIN MANAGEMENT	Page 1 of 2
References	Title 22, Division 9, Chapter 3.3 of the California Code of Regulations	Effective 01/21/2025

STANDING ORDERS	
Assess Pain	Determine the patient's pain score using standardized pain scale (sample pain scales in Special Considerations). Document pain scale and vital signs before each medication administration.
Monitor	Place on cardiac and SpO ₂ monitors.
Oxygen	Supplemental oxygen as needed to maintain O ₂ sats > 94%. Assess and treat, as appropriate, for underlying cause.
Nonpharmacologic pain control measures	Place in position of comfort, apply ice packs or heat, splint if indicated for pain due to trauma, gentle transport and reassurance.
Mild to moderate pain	1-5, i.e., pain interferes with activities, but is not disabling: - Acetaminophen 15 mg/kg IV over 10 minutes (max dose 1,000 mg). Do not administer in patients < 2 years or <10 kg. Acetaminophen may be administered in addition to fentanyl for patients with moderate to severe pain.
Moderate to severe pain	6-10, i.e., pain is intolerable or disabling: - Fentanyl 1 mcg/kg IV/IM/IO/IN (max dose 100 mcg). In radio failure, may repeat x 1 if moderate to severe pain recurs or persists after 10 minutes (max cumulative dose 200 mcg).
Nausea and emesis	Age greater than 6 months, less than 4 years: Ondansetron 2 mg ODT or 0.15 mg/kg IV max 4 mg Age greater than 4 years: Ondansetron 4 mg ODT/IM/IV

Approved By	Revision
EMS Division Manager	
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STANDING ORDERS (CONTINUED)

Reassess	Reassess and document pain scale and vital signs after each medication administration.
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SPECIAL CONSIDERATIONS AND PRIORITIES

- For patients 15 years and older, refer to Adult Pain Management Protocol.
- Non-pharmacologic interventions such as positioning, ice/heat, and splinting should be considered before administering analgesic medications. Pain assessment should be performed using pain scale including numeric rating, activity tolerance, and facial expression.
- Acetaminophen should not be given for fever or solely for discomfort associated with fever. Fever is a potential warning sign for sepsis and it is important that this is not masked by prehospital administration of acetaminophen.
- Fentanyl is contraindicated in the following conditions:
 - Hypotension for age
 - If the patient exhibits respiratory depression
 - Pregnant patients in active labor
- Pain medications administered must be communicated in verbal handoff at the receiving hospital.
- Consider IN or IM administration when appropriate for patients who do not otherwise require IV access. Patients with mild pain may be managed with nonpharmacologic measures if the risk/pain associated with IV placement outweighs benefit of analgesic.

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Minor Able to adapt to pain	1 Very Mild
	2 Discomforting
	3 Tolerable
Moderate Interferes with many activities.	4 Distressing
	5 Very Distressing
	6 Intense
Severe Patient is disabled and unable to function independently.	7 Very Intense
	8 Utterly Horrible
	9 Excruciating Unbearable
	10 Unimaginable Unspeakable



From Wong D.L., Hockenberry-Eaton M., Wilson D., Winkelstein M.L., Schwartz P.: *Wong's Essentials of Pediatric Nursing*, ed. 6, St. Louis, 2001, p. 1301. Copyrighted by Mosby, Inc. Reprinted by permission.

Instructions:

Explain to the person that each face is for a person who feels happy because he has no pain (hurt) or sad because he has some or a lot of pain. Ask the person to choose the face that best describes how he/she is feeling

→ Face 0 is very happy because he doesn't hurt at all

→ Face 2 hurts just a little bit

→ Face 4 hurts a little more

→ Face 6 hurts even more

→ Face 8 hurts a whole lot

→ Face 10 hurts as much as you can imagine, although you don't have to be crying to feel this bad