

SECTION: M-15

TITLE: Sedation for Painful Procedures

REVISED: November 1, 2017

GENERAL COMMENTS: This protocol is intended to provide guidance for sedation/patient comfort during brief painful procedures such as emergent need for relocation of injured extremity, cardioversion or other brief painful procedures.

Sedative medications should not be combined with opiate analgesics unless absolutely necessary as the combination of these medications can cause life threatening over sedation, hypotension, or other unpredictable results. Careful monitoring of patients should be employed with any administration of opiate or benzodiazepine medications.

ALS Providers should consider decreased dosage or prolong administration intervals of sedative or analgesic medications in higher risk populations such as altered mental status, traumatic head injury, recent use/administration of other sedative medications, elderly, or known/suspected hypersensitivity.

BLS SPECIFIC CARE: See adult General Medical Care Protocol M-1

ILS SPECIFIC CARE: See adult General Medical Care Protocol M-1

ALS SPECIFIC CARE: See adult General Medical Care Protocol M-1

Adult sedatives:

- Versed
 - IV/IO/IM: 0.5-2.5 mg slow IV push every 5-10 minutes (max dose 5 mg)
 - IN: 2.5 mg every 10 minutes (max dose of 5 mg)
- Valium IV/IO/IM
 - 2-5 mg slow IV push every 5-10 minutes (max dose 10 mg)

Pediatric sedatives:

- Versed
 - IV/IO/IM: 0.05-0.1 mg/kg slow IV push every 5-10 minutes (max dose 2.5 mg)
 - IN: 0.2 mg/kg every 5-10 minutes (max dose of 2.5 mg) (Not for use in children under 2 years of age)

Protocol

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