# HEALTHEAST MEDICAL TRANSPORTATION MEDICAL OPERATIONS MANUAL

# **MORPHINE SULFATE**

**Drug Classification: Narcotic Analgesic** 

# **BACKGROUND**

#### **Pharmacodynamics**

Morphine acts on opiate receptors in the brain, providing both analgesia and sedation.

# **Indications**

- 1. Generalized pain and aching.
- 2. Abdominal and soft tissue pain.
- 3. Headache with history of chronic headaches.
- 4. Narcotic withdrawal.

#### **Contraindications**

1. Allergy or known hypersensitivity to Morphine.

#### **Cautions**

- 1. May cause respiratory depression, hypotension and vomiting.
- 2. Use with caution in asthma, COPD and shock.
- 3. May mask the signs and symptoms of a head injury. Use with caution in head injured patients.
- 4. Be prepared to assist ventilations and to administer the narcotic antagonist naloxone (Narcan).
- 5. Reduce dosage by 50% in patients over the age of 65.

# **DOSAGE and ADMINISTRATION**

ADULT		PEDIATRICS (less than 60 kg)	
For abdominal pain or non-traumatic musculoskeletal pain		For abdominal pain or non-traumatic musculoskeletal pain	
1.	Pain rated at 4-6: Administer 0.05 mg/kg IV/IO/IM in 5 mg increments.	1.	Pain rated at 4-6: Administer 0.05 mg/kg IV/IO/IM.
2.	Pain rated at 7 $-$ 10: Administer 0.1 mg/kg IV/IO/IM in 5 mg increments. Maximum initial dose 10 mg.	2.	<ol> <li>Pain rated at 7 – 10: Administer 0.1 mg/kg IV/IO/IM. Maximum initial dose 10 mg.</li> <li>May repeat every 10 – 15 minutes as needed, to a maximum total dose of 20 mg.<sup>1</sup></li> </ol>
3.	May repeat every 10 – 15 minutes as needed, to a maximum total dose of 20 mg. <sup>1</sup>		

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# **ADVERSE REACTIONS/SIDE EFFECTS**

• Rash, urticaria, edema, respiratory depression, dizziness, flushing, nausea and vomiting, diaphoresis

# **NOTES**

<sup>1</sup>Contact Medical Control for total doses exceeding 20 mg.

# **REFERENCE GUIDELINE:**

**1C Pain and Nausea Management** 

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