

**Treatment Protocols**

**Date: 07/01/2023**

***Abdominal Pain – Adult***

**Policy #9010A**

<b>Stable</b> Blood pressure >90 mmHg	<b>Unstable</b> Systolic blood pressure <90 mmHg, and/or signs of poor perfusion
<b>Adult BLS Standing Orders</b>	
<ul style="list-style-type: none"> <li>• Universal Patient Protocol</li> <li>• For female patients, establish last menstrual period through age 50 years old</li> <li>• Encourage immediate transport</li> </ul>	<ul style="list-style-type: none"> <li>• Universal Patient Protocol</li> <li>• For female patients, establish last menstrual period through age 50 years old</li> <li>• Encourage immediate transport</li> </ul>
<b>Adult LALS Standing Order Protocol</b>	
<ul style="list-style-type: none"> <li>• Saline lock/IV PRN</li> </ul>	<ul style="list-style-type: none"> <li>• Establish IV</li> <li>• NS 500-1,000 mL IV MR x 1 to a max of 2,000 mL to maintain a SBP of <math>\geq</math> 90 mmHg</li> </ul>
<b>Adult ALS Standing Order Protocol</b>	
<ul style="list-style-type: none"> <li>• Monitor EKG</li> <li>• Saline lock/IV/IO PRN</li> <li>• Ondansetron 4 mg IV/IO/IM/ODT PRN x1, MR x1, total 8 mg</li> <li>• <b>Pain Management Protocol PRN</b></li> </ul>	<ul style="list-style-type: none"> <li>• Monitor EKG</li> <li>• Establish IV/IO PRN</li> <li>• NS 500-1,000 mL IV MR x 1 to a max of 2,000 mL to maintain a SBP of <math>\geq</math> 90 mmHg</li> <li>• Ondansetron 4 mg IV/IO/IM/ODT PRN, MR x1, total 8 mg</li> <li>• <b>Pain Management Protocol PRN</b></li> </ul>
<b>Adult Base Hospital Orders</b>	
<ul style="list-style-type: none"> <li>• BH - Repeat Ondansetron 4 mg</li> </ul>	<ul style="list-style-type: none"> <li>• BH - Repeat NS bolus</li> <li>• BH - Repeat Ondansetron 4 mg</li> </ul>

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**Notes**

- Consider 12 lead EKG in patients with diffuse or epigastric pain, as potential anginal equivalent
- Less frequently adults' abdominal pain can be anaphylaxis. Consider epinephrine IM if clinical history and exam are consistent with anaphylaxis.
- In elderly adults, abdominal pain is often a life-threatening illness. Minimize time on scene to shorten time to definitive care.
- For persistent hypotension, see **Shock Protocol**
- Signs of poor perfusion include:
  - $\ddagger$ SBP <90 mmHg and exhibiting any of the following signs/symptoms of inadequate perfusion, e.g.,
  - Altered mental status (decreased LOC, confusion, agitation)
  - Pallor
  - Diaphoresis
  - Significant chest pain of suspected cardiac origin
  - Severe dyspnea

APPROVED:

Signature on File

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