

## 12.12 INTRAVENOUS INFUSION OF MORPHINE SULFATE CCT PARAMEDICS

- These procedures/interventions shall only be performed by paramedics with CCT-P (Critical Care Transport-Paramedic) training and designation.
- Patients shall be placed on cardiac and pulse oximetry monitors for duration of transport.
- A non-invasive blood pressure monitor device that will record and print out routine blood pressure reading every fifteen (15) minutes will be utilized.
- Signed transfer orders from the transferring physician must be obtained prior to transport and must provide for maintaining the **Morphine Sulfate** infusion during transport.
- If medication administration is interrupted (infiltration, accidental disconnection, malfunctioning pump, etc.) the CCT-P may restart the IV line as delineated in the transfer orders. Caution must be used to prevent inadvertent overdose of medication.
- The following parameters shall apply to all patients with pre-existing **Morphine Sulfate** infusions:
  - Regulation of the infusion rate will occur within the parameters as defined by the transferring physician, but may be titrated to the individuals response during transport
  - In cases of **severe** respiratory depression, sedation, confusion, hypotension, bradycardia, nausea and vomiting, the medication infusion will be discontinued and **Naloxone**, if indicated, may be administered as directed by your county of origin's EMS protocol. Notify the base physician.
- CCT-Ps may not initiate **Morphine Sulfate** infusions.