

## MORPHINE SULFATE

### **ACTION: Analgesic**

- Centrally acting opiate analgesic effective for acute pain.
- For cardiac patients: morphine reduces the pain of ischemia and reduces anxiety, reducing oxygen demands on the heart, improving ischemia.

### **INDICATIONS:**

- Chest pain of suspected ischemic origin.
- Management of acute pain according to ALS Treatment Protocols.

### **CONTRAINDICATIONS:**

- Hypersensitivity
- Respiratory Insufficiency
- Asthma or exacerbated COPD
- Head injury
- Hypotension
- Decreased LOC

### **POTENTIAL SIDE EFFECTS:**

- Respiratory depression
- Hypotension
- Decreased LOC
- Nausea and vomiting
- Decreased heart rate

### **ADULT DOSE/ROUTE:**

⇒ 2 - 4 mg slow IVP/IO or 5mg IM. May repeat in 10min for continued pain if SBP > 90 mmHg to total dose of 20 mg.

### **PEDIATRIC DOSE/ROUTE:**

⇒ **Less than 6 months:** 0.05mg/kg slow IVP/IM/IO. May repeat in 10min at half the initial dose. Max dose 4mg without Base Contact.

⇒ **Greater than 6 months:** 0.1 mg/kg slow IVP/IM/IO. May repeat in 10min at half the initial dose x1. Max dose 4mg without Base Contact.

### **NOTES:**

- Closely monitor respiratory status and systolic blood pressure. Be prepared to assist ventilations of any patient who is administered Morphine.
- Morphine effects may be potentiated if administered with midazolam. Contact Base Hospital Physician if considering administering both medications.
- Contact Base Hospital Physician if higher doses of Morphine are required.