

NAUSEA (A90)

The purpose of this protocol is to assist patients who have uncontrollable nausea with extended transport times and/or patients who have nausea from the administration of narcotics.

	F	E	O	P	D
ASSESSMENT	X	X	X	X	
PULSE OXIMETRY: apply and monitor.		X	X	X	
CAPNOGRAPHY: apply and monitor.				X	
OXYGEN: if pulse oximetry <94% or signs of respiratory distress.	X	X	X	X	
ECG MONITOR: as appropriate. Lead placement may be delegated. Treat as indicated.				X	
VASCULAR ACCESS: IV/IO, rate as indicated.				X	
*ONDANSETRON: 4 mg IM/IV/IO, or 4 mg Oral Disintegrating Tablet (ODT) for nausea and/or vomiting. May be repeated twice, not to exceed 12 mg.				X	
**DIPHENHYDRAMINE: 25 mg IM/IO or slow IV. May be repeated once to a maximum of 50 mg.				X	

***PRECAUTIONS FOR ONDANSETRON:**

- Known Sensitivity to Ondansetron (Zofran) or other 5-HT-3 antagonists.
 - Granisetron (Kytril)
 - Dolasetron (Anzemet)
 - Palonosetron (Aloxi)

**** PRECAUTIONS FOR DIPHENHYDRAMINE:**

- **USE WITH CAUTION IN PATIENTS WITH:**
 - Barbiturates, opiates, hypnotics, tricyclic antidepressants, MAOIs & alcohol.
 - CNS depression
 - Asthma
 - Pregnancy
- **WATCH CLOSELY FOR:**
 - Mouth dryness
 - Respiratory depression
 - Vomiting
 - Hypotension
 - Slurred speech
 - Allergic reaction

EFFECTIVE: November 1, 2023

Provider Key: F = First Responder/EMR
P = Paramedic

E = EMT O = EMT Local Optional SOP
D = Base Hospital Physician Order Required