CPER digest

October 2015

You respond for a 6 year old who had a witnessed fall off the monkey bars (approximate fall 2-3 metres). The patient fell onto their right arm with no LOC and did not strike their head. Upon your arrival, the patient is crying and their only complaint is of right arm pain. On assessment you find the patient to have an obvious closed forearm deformity with no circulatory compromise. The patient's vitals are as follows: HR - 123 bpm, full, regular; Resps - 26/min, full, regular; Resps - 128/86; Resps - 12

What are your next steps?

You patch to the BHP for authorization and dosage verification as this patient is < 8 years old

You respond for a 16 year old playing football that fell to the ground dislocating their left shoulder. The patient weighs approximately 80 kg and complains that the pain is 10 out of 10. The patient's vitals are as follows: HR - 118 bpm, full, regular; Resps - 24/min, full, regular; Resps

What is the dosage of morphine for this patient?

 $(0.05 \text{ mg/kg} = 0.05 \text{ mg/kg} \times 80 \text{ kg} = 4.0 \text{ mg})$, however...under the Pediatric Analgesia Medical Directive, this patient should receive a maximum single dose of 3.0 mg of morphine due to their age being < 18 years old with a repeat of 3.0 mg maximum dose if required.

Remember that the indications for pain management under the Pediatric Analgesia Medical Directives are as follows:

- Severe pain AND
- Isolated hip **OR** extremity fractures or dislocations **OR** major burns **OR** current history of cancer related pain

Also, as per the Adult Analgesia Medical Directive, acetaminophen, ibubrophen and ketorolac cannot be administered to a patient that is < 18 years old

