



POLICY ADULT M1 NAUSEA AND VOMITING

Effective Date : January 16, 2017

Last Review: New Policy

Next Review: January 2019

Authority: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9

GENERAL INDICATIONS:

To alleviate nausea and vomiting from a variety of causes including but not limited to gastroenteritis, motion sickness, appendicitis. May be given prior to transport to prevent nausea/vomiting. May be given to prevent nausea/vomiting from pain medication administration. May use diphenhydramine as an alternative if allergic to ondansetron.

BLS TREATMENT:

OXYGEN: as appropriate, goal to maintain SPO2 at least 94%, assist ventilations as necessary, be prepared to suction airway if necessary

VITALS: assess vitals

BLOOD SUGAR CHECK: test blood sugar if indicated

ALS TREATMENT:

MONITOR: treat rhythm as appropriate

BLOOD SUGAR CHECK: test blood sugar if indicated

IV ACCESS: if severe vomiting or signs of dehydration; rate as appropriate, if patient has a systolic BP < 90 administer 250 ml fluid boluses to systolic BP > 90. Reassess patient after each bolus.

ONDANSETRON: 4 mg ODT, IV, IM or IO. Don't use ODT in patients with GCS < 14. Try to use ODT as first route of choice if possible. May give every 10 minutes as necessary to Max dose of 12 mg total.

DIPHENHYDRAMINE: 50 mg PO, IM or 25 mg IV, IO may be given if patient is allergic to Ondansetron. May be repeated once to a max dose of 50 mg total.

CONSIDERATIONS:

Syncope may occur when given IV, give slowly over 60 seconds. Ondansetron is **SAFE** for patients who are pregnant or breast feeding. For prolonged transport time consider Diphenhydramine for motion sickness.