

**Jackson County Medical Control Authority**  
**Community Paramedicine Protocols**  
**GI COMPLAINTS**

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### ***GI Complaints***

**Indications:** This protocol provides guidance for the evaluation and treatment of a patient with GI complaints under the Community Paramedicine Program. The CPU will respond to a residence evaluation and treatment of a patient with GI complaints on request from the primary care provider, on request by the patient through 911 triage or on referral from ALS 911 response.

**Purpose:** Evaluation and treatment of patients with presumed simple GI complaints. These would include nausea, vomiting and/or diarrhea of short duration without signs of hemodynamic compromise or significant abdominal pain.

**CPU Directives:**

1. Follow **General Protocol for CPU Patient Assessments** as indicated.
2. Obtain and review patient health history and primary care provider's orders prior to evaluation when available.
3. Using universal precautions start an IV and administer NS IV/IO fluid bolus up to 1 liter, wide open.
4. Administer additional IV fluid boluses, as indicated by hemodynamic state. Continue IV fluid bolus to a maximum of 2 liters.
5. Contact the patient's PCP or on-line medical direction, provide a patient report and determine whether on-scene treatment is appropriate.
6. For a patient with nausea and/or vomiting administer Ondansetron (Zofran) 4mg IV/IM. If nausea and/or vomiting persists after 45 minutes repeat Ondansetron (Zofran) 4mg IV/IM.
7. After treatment the patient should be reassessed. Treatment goals include: the cessation of nausea and/or vomiting, toleration of PO fluids, cessation of and abdominal symptoms and indications of complete rehydration such as lack of orthostatic vital sign changes.
8. Contact the patient's PCP or on-line medical direction, provide a revised patient report and determine appropriate disposition and continuity plan. This plan may include a prescription for anti-emetics, scheduled reevaluation as determined by the PCP or on-line medical direction.