

## MORPHINE (MSO<sub>4</sub>)

<b>THERAPEUTIC EFFECTS</b>	A potent analgesic which also causes some vasodilation. Reduces myocardial oxygen demand.	
<b>INDICATIONS</b>	<ol style="list-style-type: none"> <li>1. For the treatment of severe pain (for patients with prolonged transport time, &gt; 30 minutes).*</li> <li>2. For the treatment of severe pain when fentanyl is not available.</li> </ol>	
<b>CONTRAINDICATIONS</b>	Should not be administered to patients with: <ul style="list-style-type: none"> <li>✓ Head or abdominal pain</li> <li>✓ Hypersensitivity to morphine</li> <li>✓ Hypotension</li> <li>✓ Volume depletion</li> </ul>	
<b>PRECAUTIONS/SIDE EFFECTS</b>	May cause respiratory depression. <b>Naloxone (Narcan®)</b> should be readily available to counteract the effects of morphine. The receiving physician should be informed directly of the prehospital administration of morphine at the time of hospital arrival.	
<b>ADULT DOSAGE/ROUTE</b>	<b>Indication 1</b>  2-6 mg IV push. Repeat with 2 mg q 5 minutes, as needed. 5-15 mg may be given IM based on the patient's weight.	<b>Indication 2</b>  2-6 mg IV push. Repeat with 2 mg q 5 minutes, as needed. 5-15 mg may be given IM based on the patient's weight.
<b>PEDIATRIC DOSAGE/ROUTE</b>	<b>Indication 1</b>  1 mg q 5 minutes IVP, as needed. Dose not to exceed 0.1 mg/kg. Appropriate dose may be given IM based on patient's weight.	

\*Morphine may be substituted for Fentanyl in the event of a Fentanyl drug shortage.