Bayfield-Ashland Counties EMS	M-10
MEDICAL	NAUSEA and VOMITING

SYMPTOMS: Patient currently nauseated and/or vomiting.

Assessment, Treatment and Interventions

Nausea and vomiting are symptoms of illness. In addition to treating the patient's nausea and vomiting, a thorough physical and history are key to identifying what may be a disease in need of emergent treatment (i.e. bowel obstruction, myocardial infarction, pregnancy).

ALL LEVELS

- 1. Conduct primary assessment including abdominal exam.
- 2. Obtain vital signs including pulse, respiratory rate, SpO₂ and blood pressure.
- Conduct physical examination and gather history focused on potential causes of nausea and vomiting (e.g. gastrointestinal, cardiovascular, gynecological, hypoglycemia, hyperglycemia, pregnancy).

EMR-O; EMT-O

4. Anti-emetic – allow patient to inhale vapor from isopropyl alcohol wipe 3 times every 15 minutes as tolerated.

EMT-R

Assess blood glucose level.

EMT-O

6. Obtain ECG if applicable.

AEMT-R

7. If signs of hypovolemia, consider isotonic IV/IO fluid bolus 20ml/kg normal saline.

AEMT-O

8. If signs of hypovolemia, consider isotonic IV/IO fluid bolus lactated Ringers.

INT-O

- 9. Administer anti-emetic medication (any that can be given IV can be given IO):
 - a. Ondansetron [Adult: 4mg IV/PO/SL or ODT; Pediatric: 0.15mg/kg IV/PO (max dose of 4mg)].

PARA-O

- b. Metoclopramide [10mg IM/IV x 1].
- c. Prochlorperazine [10mg IM/IV x 1].
- d. Diphenhydramine [Adult: 1mg/kg IM/IV/PO (maximum dose of 25mg); Pediatric: 1mg/kg IM/IV/PO (maximum dose of 25mg)].

MEDICAL Page 1 of 1 NAUSEA and VOMITING