## **FENTANYL**

**Additional Names:** Sublimaze

**Classification:** Opioid Analgesic, Synthetic Opioid

**Indications:** Acute Pain

Sedation

**Contraindications:** Known Hypersensitivity to Fentanyl or other opioid agonists

Known or suspected constipation or other gastrointestinal

obstruction

Significant respiratory depression

Bradycardia

Dosages: Adult:

**Post-Intubation Sedation** 

25-50mcg IV/IO, q 2min prn, max 200mcg

Non-Traumatic Abdominal Pain / Nausea & Vomiting

25-50mcg IV/IO/IM/IN, q 2min prn for severe pain concerning for a surgical pathology

that is not bowel obstruction or ileus (max 100 mcg)

Special Populations Non-traumatic Pain Management

1 mcg/kg IV/IM/IN q 5 minutes for moderate to severe pain (max 100 mcg)

**Chest Pain** 

25-50mcg IV/IO/IN/IM, q 2min prn, max 200mcg

**Traumatic Pain Management** 

25-50mcg IM or slow IV push, q 2min prn, max 150mcg

If additional analgesia is needed for persistently severe pain (8-10) believed to be due to

a surgical pathology contact Med Control

**Pediatric:** 

**Traumatic Pain Management** 

1mcg/kg IV, 1-2mcg/kg IN, max 100mcg, may repeat x1 with Medical Control orders

**Side Effects:** Bradycardia, respiratory depression, apnea, muscle rigidity, diarrhea, nausea,

constipation, dry mouth

**Physiological:** Narcotic agonist of opiate receptors; inhibits ascending pain pathways thus altering

response to pain. Produces analgesia, respiratory depression, and sedation.



**Effects** 

## **Additional Info:** Effects are related to the dose and speed of administration. May cause sudden

respiratory depression/arrest.

Usual effects last for 30-60 min, IM onset 7-8 min with duration of 1-2 hrs

Use caution with elderly or debilitated patients

Use caution in patients taking other CNS depressant medications/ETOH use

Use caution in patients with respiratory disease

