

NAUSEA AND VOMITING

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Indications:

- Patients that present or develop nausea and/or vomiting before or during transport to the hospital provided they have no contraindications.

Information Needed:

- Discomfort or condition: OPQRST (Onset, Provocation, Quality, Radiation, Region, Severity, Timing)
- Associated symptoms: Fever and/or chills, passing flatus, abdominal pain, chest pain, diarrhea, dizziness, light headedness, headache, diaphoresis, or flank pain.
- Gastrointestinal: Time and description of last meal or any other suspicious ingestions, description of vomit if any, history of similar episodes in the past and time of last bowel movement.
- Neurologic: Presence of a headache or trauma to the head. If dizziness is present, characterization as lightheaded or vertiginous, time when these symptoms started.
- Cardiologic: Presence of chest pain and diaphoresis, consider a cardiac etiology.
- Urologic: difficulty, pain, burning, frequency, and description. Consider kidney stone or infection of the urologic system.
- Gynecologic: Last menstrual period and possibility of pregnancy.
- Oncologic: History of recent chemo or radiation therapy.
- Medication history: Develops nausea/vomiting when given certain medications like narcotics. Antibiotics, alcohol, toxin ingestion or exposure are other things to inquire about.
- Medical history: surgery, related diagnosis (e.g., small bowel obstructions, benign positional vertigo, pancreatitis, head injury, kidney stones, diabetes, cardiac disease, etc.) medications (if any), any sick contacts or others with similar symptoms, and any remedies attempted.

Objective Findings:

- General appearance: severity of nausea/vomiting, skin color, diaphoresis
- Vital signs
- Consider 12 lead EKG
- Resolution of symptoms with treatment

Treatment:

- Position of comfort
- Routine medical care
- Consider Ondansetron (Zofran) 4mg ODT (Oral Dissolving Tablet) or IV. May repeat every 15 minutes to a total of 12 mg.
- Consider IV access and fluids

Contraindications:

- Avoid in patients with known sensitivity to Ondansetron (Zofran) or other serotonin antagonists (eg. Granisetron (Kytril), Dolasetron (Anzemet), Palonosetron (Aloxi).
- Do not use in patients taking Apomorphine (Apokyn, Ixense, Spontane, Uprima) – injectable drugs for Parkinson’s Disease, or rarely for erectile dysfunction.
- Do not use in patients known to have Phenylketonurics (contains phenylalanine)

Precautions and Comments:

- If other symptoms exist, refer to those treatment protocols after Ondansetron (Zofran) is given.
- Ondansetron (Zofran) is safe in pregnancy and breast feeding mothers.
- Can be administered for motion sickness.
- Can be used in patients who develop nausea from narcotics.
- Do NOT attempt to push the ODT through the foil backing. With dry hands, moisture on hands can cause unintended disintegration of the medication, PEEL OFF the foil backing from 1 blister and GENTLY remove the tablet. IMMEDIATELY place the ONDANSETRON (ZOFRAN) ODT on top of the tongue where it will dissolve in seconds, the patient’s saliva is all that is required. No additional liquid is needed.
- Although unlikely, side effects include headache, anaphylaxis, rash, flushing, prolonged QT, dizziness, diarrhea, tachycardia, sedation, or hypotension. Exclude other causes first.