

Question of Practice

Pain Control for Burn Victims

Don't be afraid to administer more morphine than is usual.

By Scott DeBoer, MSN, RN, CFRN

? What is a safe method of titrating analgesics in a patient with an emergent burn injury?

Morphine, the long-standing drug of choice for patients with burn injuries, should be quickly and aggressively administered, without exception, intravenously. The recommended dosage in pediatric burn patients is

0.1mg/kg every five to 10 minutes, and in adults it's 5 mg to 10 mg every five to 10 minutes. However, the key to ameliorating the overwhelming pain associated with burn injury is assessing the patient five minutes after each dose and administering sequential doses thereafter until the patient becomes, and remains, comfortable.

Morphine's depressive effect on respiration will be less of a danger if doses are given incrementally and the patient is assessed frequently for acceptable levels of pain relief and sedation, which may necessitate giving

much more than you're used to giving (see "Avoiding Opioid-Induced Respiratory Depression," *AJN*, April 1994). For example, it's not uncommon for adults with large-area partial- and full-thickness thermal burns to receive 80 mg to 100 mg of morphine, given in 10-mg increments, in the first hour of care. ▼

Scott DeBoer is the flight nurse educator at the University of Chicago Aeromedical Network in Chicago and the owner of Peds-R-Us Medical Education, Dyer, IN.

If you'd like to suggest a topic or submit a manuscript to *Question of Practice*, contact Thom Schwarz, editorial director, at ttschwarz@lww.com.

NURSEZONE.COM

For Work. For Life.

Hot Jobs • Real Stories • Resume Creator • Career Advice

www.nursezone.com

What you'll find in March

Meet the nurse who helped...
Lance Armstrong
...beat cancer.



Nurses volunteer to...
Rock Medicine
...make concerts safer.



Explore the country...
Travel Nursing
...while you work.



Circle No. 89 on Reader Inquiry Card