

POLICY: 554.46
TITLE: Nausea

EFFECTIVE: 09/01/2026
REVIEW: 8/2028
SUPERCEDES:

APPROVAL SIGNATURES ON FILE IN EMS OFFICE

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NAUSEA

- I. **AUTHORITY**
Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. **PURPOSE**
To serve as a patient treatment standard for EMRs, EMTs, AEMTs, and Paramedics within their scope of practice.
- III. **PROTOCOL**
The purpose of this protocol is to improve patient comfort by treating nausea when indicated.

**Provider Key: F = First Responder/EMR E = EMT O = EMT Local Optional SOP
P = Paramedic A=Advanced EMT D = Base Hospital Physician Order Required**

	F	E	O	A	P	D
ASSESSMENT	X	X	X	X	X	
PULSE OXIMETRY: apply and monitor.		X	X	X	X	
CAPNOGRAPHY: apply and monitor.					X	
OXYGEN: if pulse oximetry <94% or signs of respiratory distress.	X	X	X	X	X	
ECG MONITOR: as appropriate. Lead placement may be delegated. Treat as indicated.					X	
VASCULAR ACCESS: P - IV/IO, AEMT - IV only, rate as indicated.				X	X	
*ONDANSETRON: 4 mg IM/IV/IO, or 4 mg Oral Disintegrating Tablet (ODT) for nausea and/or vomiting. May be repeated twice, not to exceed 12 mg.					X	
**DIPHENHYDRAMINE: 25 mg IM/IO or slow IV. May be repeated once to a maximum of 50 mg.					X	

***PRECAUTIONS FOR ONDANSETRON:**

- Known Sensitivity to Ondansetron (Zofran) or other 5-HT-3 antagonists.
 - Granisetron (Kytril)
 - Dolasetron (Anzemet)
 - Palonosetron (Aloxi)

**** PRECAUTIONS FOR DIPHENHYDRAMINE:**

• **USE WITH CAUTION IN PATIENTS WITH:**

- Barbiturates, opiates, hypnotics, tricyclic antidepressants, MAOIs & alcohol.
- CNS depression
- Asthma
- Pregnancy

• **WATCH CLOSELY FOR:**

- Mouth dryness
- Respiratory depression
- Vomiting
- Hypotension
- Slurred speech
- Allergic reaction