Non-Traumatic Headache
For non-traumatic headache or head pain

History
- Age
- Location and duration
- Severity (0 – 10 scale)
- Past medical history
- Drug allergies and medications
- Fever

Signs and Symptoms
- Severity (pain scale)
- Quality (e.g., sharp, dull, or stabbing)
- Radiation
- Relation to movement or respiration
- Photophobia
- Nausea/vomiting

Differential
- Migraine
- Head trauma
- Intracranial hemorrhage
- Arterial hypertension
- Substance use withdrawal
- Viral/bacterial infection
- Hypoxia
- Hypercapnia

Assess pain severity
Use combination of pain scale, circumstances, HPI, and illness severity

Neurologic symptoms? Yes

Severe pain
- Apply cold pack if applicable
- Consider, IV
- Assess and monitor respiratory status
- Apply and monitor cardiac rhythm
- Consider, Ondansetron for nausea

Mild pain
- Position of comfort
- Apply cold pack if applicable
- Low flow Oxygen

Notify receiving facility.
Consider Base Hospital for medical direction

Stroke/CVA/TIA

Effective November 2018
Effective April 2022
Pearls

- Use judgement in assessing pain and consider circumstances and history of narcotic use before administering narcotics.
- Pain severity (0 – 10 scale) shall be recorded before and after all BLS pain control measures and ALS pain medication delivery. Monitor blood pressure and respirations closely as pain control medications may cause hypotension or respiratory distress.
- Low flow oxygen can be used to treat cluster-type headaches.
- Patients may display a wide variation of response to opioid pain medication (Fentanyl). Consider the patient’s age, weight, clinical condition, other recent drugs, or alcohol and prior exposure to opiates when determining initial dosing.