

BACKGROUND

The intranasal route for delivery of fentanyl has been shown to be an effective and safe alternative to intravenous opioids for the management of moderate to severe pain in infants and children.

INDICATIONS FOR USE

Initial analgesia for children aged 1 month and older, in moderate to severe pain, with

- Fractures and dislocations
- Burns
- Major lacerations

CONTRAINDICATIONS

- Hypersensitivity or intolerance to fentanyl or its compounds

The intranasal route is contraindicated in the following:

- Bilateral occluded nasal passages or epistaxis (may cause unreliable drug delivery)
- Weight above 70 kg (volume of medication would exceed 2 mL total)

PRECAUTIONS

Use with caution in the following:

- Age less than 1 month
- Renal or hepatic impairment or biliary disease
- Hypotension (per age)
- Pulmonary or cardiovascular impairment
- Difficult airways
- Obstructive sleep apnea
- Head injury
- Seizure disorder
- Increased Intracranial Pressure (ICP)
- Altered mental status
- GI obstruction
- Inflammatory bowel disease
- MAO inhibitor antidepressants within the last 14 days
- Prior dosing with narcotic (may produce drug accumulation)
- Co-administered sedatives/CNS depressants/Respiratory depressants and co-morbid medical conditions may enhance respiratory and circulatory depression and may require modification to dose

DOSE

1.5 micrograms/kg

Use a 100 micrograms/2 mL vial

NOTE: an independent double check of drug calculation and preparation must be done prior to administration.

SIDE EFFECTS

Uncommon: nausea, vomiting, sedation

Rare (not described with IN use): respiratory depression, muscle rigidity (including chest wall)

ADMINISTRATION TECHNIQUE

Administer using a 1-3 mL syringe and atomizer. Refer to Intranasal Medication via Atomizer policy and procedure.

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MONITORING GUIDELINES

Place patient on Cardiac Monitor for continuous monitoring.

Pre-administration: monitor and record vital signs (HR, RR, BP, SpO₂) and pain score using developmentally appropriate pain scale.

Post-administration: monitor and record vital signs, pain score and arousal score every 10 minutes for 30 minutes. Monitor for any allergic reactions to fentanyl (e.g. urticaria, hives).

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