KETOROLAC INJECTION EMSAC OCTOBER 2025

ACTION: Analgesic/antipyretic

- Non-steroidal anti-inflammatory (NSAID)
- Non-selective cyclooxygenase (COX) inhibitor, which slows the production of prostaglandins (mediators of the inflammatory response causing pain and fever) by competitively blocking the enzyme (COX).

INDICATIONS:

Mild to moderate pain as described by patients with a pain scale score ≤ 6 or less.

CONTRAINDICATIONS:

- Known allergy or hypersensitivity to NSAIDS or aspirin
- Active Hemodynamically unstable bleeding or bleeding disorder (hemophilia)
- Suspected stroke or head trauma
- Suspected pregnancy
- Acute significant trauma (see notes)
- Acute neurologic symptoms (including focal weakness, paresthesias or other stroke symptoms)
- Hemophilia
- Pregnant or high possibility of pregnancy as reported by patient
- History of GI bleeding or ulcers
- Current aspirin or anticoagulation therapy
- History of renal disease, or kidney transplant
- <30kg (65lbs) in weight
- Age < 18 years old or > 65 years old
- Hypotension
- Current steroid use
- History of asthma

POTENTIAL SIDE EFFECTS:

- Diarrhea
- Abdominal pain
- Increased risk of GI bleeding

- Nausea/vomiting
- Drowsiness
- Tinnitus (ringing in the ears)

ADULT DOSE/ROUTE:

⇒ Dose: 15 mg X1 IV push (preferred), or 1530 mg IM/40.

*IV preferred route

PEDIATRIC DOSE/ROUTE:

Dose: 15mg X 1 IV push (preferred), or 15 mg IM/IO

Do not use in patients < 30kg/65lbs Under Age <18</p>

NOTES:

- Use with caution in patients >65 years of age, that are more likely to have listed contraindications
- Clinically evaluate patients to determine if pain score can be administered. If pain score cannot be administered due to patient condition (severe pain) consider alternates to ketorolac.
- Significant trauma consists of injuries requiring trauma center destination criteria, or those as a result of which the paramedic is concerned for internal/difficult to control hemorrhage.

Effective: xx/xx/xx Supersedes: 10/29/18

