
AUTHORIZED BY: CPC Quality of Care Committee
ISSUE DATE: June 2002
CATEGORY: ACP Medications
TITLE: **Morphine Sulphate**

REVISION DATE: Sept 2018
PAGE: 1 of 2

-
- Other Names:**
- MSO₄
- Classifications:**
- Opioid Analgesic
- Pharmacodynamics:**
- Analgesic
 - Anxiolytic
- Onset:**
- IV: 20 min.
 - IM: 30-60 min.
- Peak:**
- IV: 20 min.
 - IM: 30-60 min.
- Duration:**
- IV: 4 to 5 hrs
 - IM: 4 to 5 hrs
- Indications:**
- Symptomatic treatment of acute or chronic pain.
- Contraindications:**
- SBP drops by 1/3 or more of its initial value post administration
 - Allergy or sensitivity to the medication
 - Injury to head or chest or abdomen OR pelvis (for pediatric)
 - Intoxication
 - Acute respiratory depression
- Precautions:**
- Hepatic and renal insufficiency
 - Pain of unknown etiology
 - Caution in patients with convulsive disorders, cranial injuries respiratory insufficiency, cardiac arrhythmias, reduced blood volume and in children and elderly or debilitated patients
 - Caution in patients with simultaneous use of alcohol, other opioid analgesics or benzodiazepines
- Adverse Reactions:**
- Respiratory depression and to a lesser degree circulatory depression including orthostatic hypotension (increased incidence with rapid IV administration; lowest with infusion)
 - Bradycardia
 - Increased intracranial pressure
 - Dizziness, mental clouding, sedation
 - Pruritus; allergic phenomena
- Drug Interactions:**
- Potency increases with benzodiazepine use
- Special Considerations:**
- Morphine should be considered in suspected cardiac ischemia only after 3 doses of sublingual NTG have been administered or if NTG is contraindicated.
 - Morphine should be used with caution in unstable angina (UA)/NSTEMI due to an association with increased mortality (Class II a, LOE C).

Preparations:

- 2 mg/ml (1 ml vial), 10 mg/ml (1 ml vial)

References:

- Ontario Provincial ALS Patient Care Standards (ACP) Version 4.5
- Compendium of Pharmaceuticals and Specialties 2013
- 2015 AHA Guidelines : ACLS

NOTE: *The information contained herein does not supersede or negate the MoHLTC Provincial Medical Directives and should only serve as general information about the medication itself. For medication dosages, please refer to the current version of the Ontario Provincial ALS Patient Care Standards.*