

**WITHIN 30 MINUTES IN THE ED
TRIAGE AS ESI 2 PER NIH & AHRQ**

S**TOP** pain. Administer IV opioids within 30 mins of triage. Account for tolerance. Assess and re-dose in 30 mins. **Pain = vaso-occlusion = tissue anoxia and damage = EMERGENCY**

A**SSESS** for other complications (i.e., hypoxia, worsening anemia, etc.) **Assess** for dehydration.

F**EVER** requires investigation for adults and peds due to higher risk of sepsis. Temps >101.5 in children require IV antibiotics within 1 hour.

E**XECUTE** the guidelines. Labs screen for underlying complications. They do not rule out a pain crisis!

R**EDUCE** morbidity. Discuss post-discharge pain and care management options.

SickleCell911.org

I'm experiencing a sickle cell emergency requiring immediate, specialized treatment. I've been encouraged to share this card to help support you in my care.

Name _____

SCD Type _____

Baseline Hemoglobin _____

Physician _____

Dr.'s Phone _____

ACCESS TREATMENT ALGORITHMS:

SickleCell911.org

EXPERT GUIDANCE FOR:

- vaso-occlusive crises/pain episodes
- fever ● acute complications
- administering opioids ● primary care

Sickle Cell Disease Association of America - MI
in partnership with the Emergency
Department Sickle Cell Care Coalition