

Respiratory Emergencies

R-6 Asthma/COPD/Bronchospasm

Priorities
 Airway Management
 Determine degree of physiologic distress
Mild: speak full sentences, mild wheezing, fully conscious,
Moderate: speak short sentences, may have mild cyanosis, moderate wheezing, may have increased BP and HR, slight accessory muscle use, wheezing
Severe: unable to speak or speak few word sentences, ALOC, present cyanosis may be present, heavy accessory muscle use, severe wheezing
 Be prepared for advanced airway use in patients with asthma

Stabilize airway using the appropriate adjunct
 Oxygen – titrate to SpO2 >95%
 Cardiac Monitor

Mild distress

Moderate/severe distress

For wheezing
Albuterol 5mg via HHN/Nebulizer Mask
 May repeat albuterol only once for continued wheezing

Consider
Ipratropium bromide 0.5mg via HHN/Nebulizer Mask
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IV/IO access

CPAP at 10cmH2O

IV/IO access

For patients with severe asthma and bronchospasm
Epinephrine 1:1,000 0.3mg IM
 Consult Base Hospital Physician prior to giving to a patient ≥35y/o or is hypertensive

DISRUPTED COMMUNICATIONS
 In the event of a “disrupted communications” situation, Solano County Paramedics may utilize all portions of this treatment protocol without Base Hospital Contact as needed to stabilize an immediate patient.