

ADULT ASTHMA/COPD WITH WHEEZING

HPI	Signs & Symptoms	Differential Diagnosis
<ul style="list-style-type: none"> Asthma, COPD, chronic bronchitis, emphysema Home treatment: oxygen, inhaler, nebulizer Medications: steroids, bronchodilators Toxic exposure, smoke inhalation 	<ul style="list-style-type: none"> Shortness of breath Pursed lip respirations Inability to speak complete sentences Increased respiratory rate/effort Use of accessory muscles Tripoding Wheezing, rhonchi, rales 	<ul style="list-style-type: none"> Heart failure Aspiration/obstruction Anaphylaxis Acute Coronary Syndrome Pneumothorax Pulmonary embolism Upper respiratory infection Anxiety, hyperventilation

	EMR	EMT	PM
1. Provide Adult Routine Medical Care - treat life threatening problems with airway, breathing circulation and disability	•	•	•
2. Obtain ECG and 12 lead, monitor Capnography		•	•

SEVERE/IMPENDING FAILURE: Altered Mental Status, pale/diaphoretic

3. DuoNeb: ALBUTEROL : 2.5 mg / IPRATROPIUM BROMIDE : 0.5 mg, via CPAP: 5 cm PEEP, may increase to max. 10 cm PEEP, may repeat DuoNeb x 2	•	•
4. MAGNESIUM SULFATE : 2g diluted in 100 mL D5W IVPB, over 15 min., do not delay administration (≥65, OLMC to consider 1g dosage)		•
5. If patient continues to deteriorate contact OLMC : EPINEPHRINE 1 mg/mL: 0.3 mg IM in anterolateral thigh	•	•

MILD/MODERATE: GCS 15, MAP >65, SBP >90, skin warm/dry

3. DuoNeb: ALBUTEROL : 2.5 mg / IPRATROPIUM BROMIDE : 0.5 mg, may repeat x 2	•	•
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NOTE:

- MAGNESIUM SULFATE** is NOT to be given to renal failure or dialysis patients.
- ALBUTEROL** and **IPRATROPIUM BROMIDE** may be administered in-line CPAP or intubation.
- Do not delay transport while waiting for response.

PEARLS:

- MAGNESIUM SULFATE** may cause hypotension that will usually respond to a fluid bolus.
- When assessing for cause of respiratory distress, CHF tends to be associated with lower levels of Capnography compared to COPD.