

Michigan
Adult Treatment Protocols
RESPIRATORY DISTRESS

Date: May 31, 2012

Page 1 of 3

Respiratory Distress

Pre-Medical Control

MFR/EMT/SPECIALIST/PARAMEDIC

1. Follow **General Pre-hospital Care Protocol**.
2. Allow patient a position of comfort.
3. **Determine the type of respiratory problem involved:**

STRIDOR/UPPER AIRWAY OBSTRUCTION:

MFR/EMT/SPECIALIST/PARAMEDIC

1. Complete Obstruction:
 - A. Follow **Emergency Airway Procedure**.
2. Partial Obstruction: epiglottitis, foreign body, anaphylaxis:
 - A. Follow **Emergency Airway Procedure**.
 - B. Consider anaphylaxis (see **Anaphylaxis/Allergic Reaction Protocol**).
 - C. Transport in position of comfort.

CLEAR BREATH SOUNDS:

PARAMEDIC

1. Possible hyperventilation, metabolic problems, MI, pulmonary embolus
 - A. Obtain 12-lead ECG, if available.

CRACKLES (CHF/PULMONARY EDEMA):

MFR/EMT/SPECIALIST/PARAMEDIC

1. Refer to the **Pulmonary Edema/CHF** protocol in the adult cardiac protocols.

RHONCHI (SUSPECTED PNEUMONIA):

MFR/EMT/SPECIALIST/PARAMEDIC

1. Sit patient upright.

EMT/SPECIALIST

2. Consider CPAP per MCA selection. Refer to **CPAP/BiPAP Procedure**.

SPECIALIST/PARAMEDIC

3. Consider NS IV/IO fluid bolus up to 1 liter, wide open if tachycardia, repeat as needed.

PARAMEDIC

4. Consider CPAP/BiPAP (if available) per **CPAP/BiPAP Procedure**.

ASYMETRICAL BREATH SOUNDS:

PARAMEDIC

1. If evidence of tension pneumothorax and patient unstable, consider decompression (refer to **Pleural Decompression Procedure**)

Michigan
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RESPIRATORY DISTRESS

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Page 2 of 3

WHEEZING, DIMINISHED BREATH SOUNDS (ASTHMA, COPD):

MFR/EMT/SPECIALIST

1. Assist the patient in using their own Albuterol Inhaler, if available

EMT/SPECIALIST

2. Administer Albuterol if available. Refer to **Nebulized Bronchodilators Procedure**.
3. Consider CPAP per MCA selection. Refer to **CPAP/BiPAP Procedure**.
4. Administer Epi-Pen (0.3 mg) in patients unable to tolerate nebulizer therapy.

PARAMEDIC

3. Administer Bronchodilator per **Nebulized Bronchodilators Procedure**.
4. Administer Epinephrine 1:1,000, 0.3 mg (0.3 ml) IM in patients unable to tolerate nebulizer therapy
5. Per MCA Selection, if a second nebulized treatment is needed, administer Prednisone **OR** Methylprednisolone.

Medication Options:

Prednisone
50 mg tablet PO

YES NO

Methylprednisolone
125 mg IV

YES NO

6. Consider CPAP/BiPAP (if available) per **CPAP/BiPAP Procedure**.

Post -Medical Control:

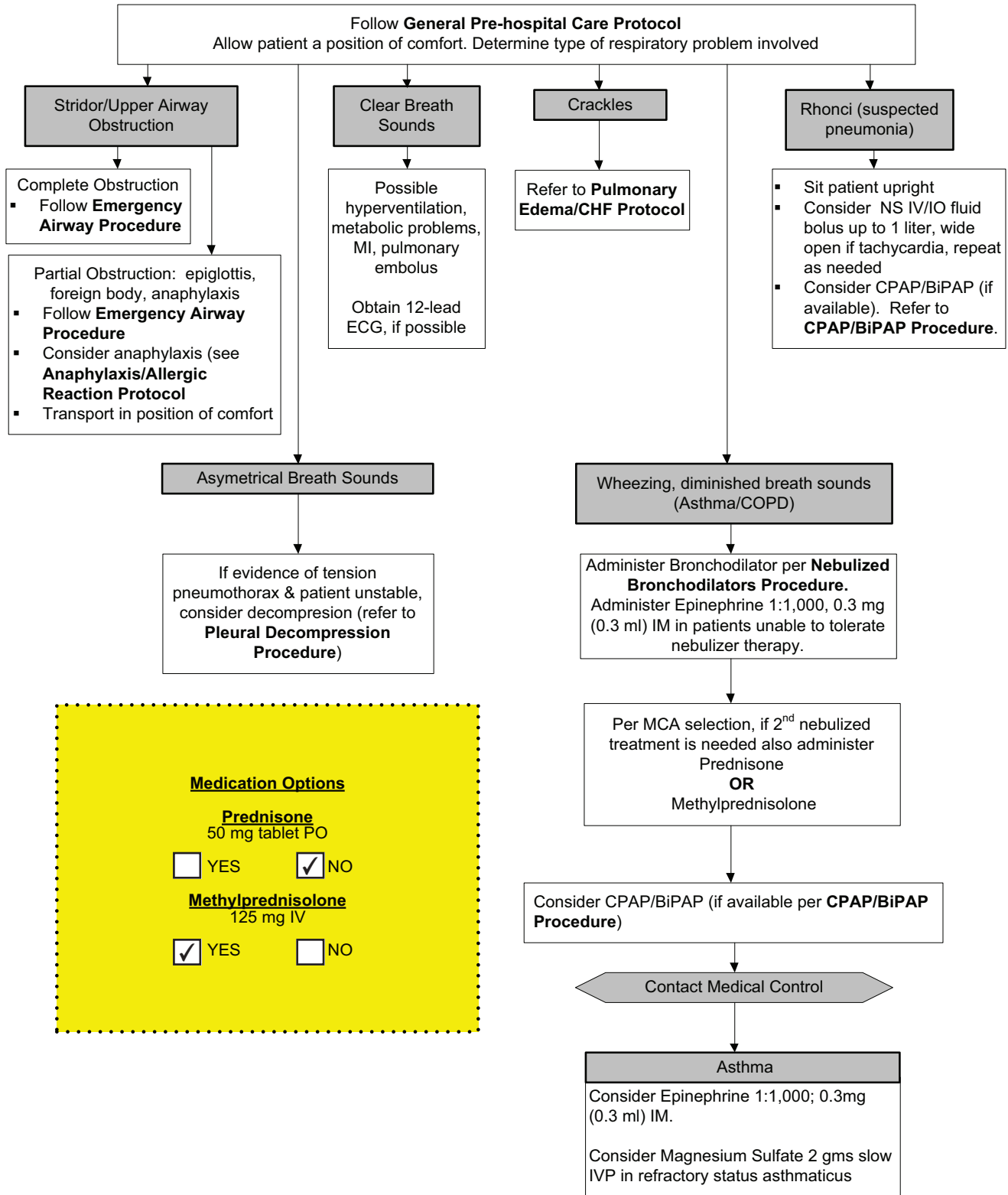
Asthma:

1. Consider Epinephrine 1:1,000, 0.3 mg (0.3 ml) IM.
2. Consider Magnesium sulfate 2gms slow IVP in refractory Status Asthmaticus.

Michigan
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Date: May 31, 2012

Page 3 of 3



Medication Options

Prednisone
50 mg tablet PO

YES NO

Methylprednisolone
125 mg IV

YES NO

