

ADULT RESPIRATORY DISTRESS

UNIVERSAL ALGORITHM

- Identify and treat reversible causes
- Establish vascular access

Consider CPAP

ASTHMA

Dyspnea/Wheezing/Shock:

- **Albuterol** 2.5-5 mg via CPAP/HHN/mask/BVM with adjunct over 5-10 min, repeat as needed
- **Epinephrine 1:1,000** 0.01 mg/kg **IM**, not to exceed 0.5 mg, may repeat every 5 min, not to exceed 3 doses

Severe Shock/Extremis:

If the patient is in extremis and no IV access, administer:
Epinephrine 1:1,000 0.01 mg/kg **SL** injection, not to exceed 0.5 mg, may repeat every 5 min, not to exceed 3 doses

PULMONARY EDEMA

- **Nitroglycerin** 0.4 mg SL tablets or spray, may repeat every 5 min—titrated to symptoms and VS

- **With CPAP** - Administer first dose(s) of Nitroglycerine SL and apply 2% topical Nitroglycerin patch - 1 Gm pre-packaged single dose: apply to chest area once mask is applied

If no base contact or no significant change in patient condition (and BP > 100):

- **Morphine** 1-3 mg slow IVP

COPD

- **Albuterol** 2.5-5 mg via CPAP/HHN/mask/BVM with adjunct over 5-10 minutes, repeat as needed

BASE PHYSICIAN ORDER ONLY:

- **Furosemide** 0.5-1 mg/kg slow IVP
- **Epinephrine 1:10,000** 0.01 mg/kg slow IVP titrated, not to exceed 0.5 mg without base physician order