



County of Santa Cruz

HEALTH SERVICES AGENCY

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EMERGENCY MEDICAL
SERVICES PROGRAM

Protocol No. R2-P
Updated April 15, 2014

Emergency Medical Services Program

Approved

Medical Director

Subject: **RESPIRATORY DISTRESS WITH WHEEZES**

I. BLS Treatment Protocol:

- A. Treat life threats. (See Policy 4000).
- B. Consider CPAP. (See Policy 5800).
- C. Keep patient upright or in position of comfort.
- D. Keep patient and family calm.
- E. Prepare for transport / transfer of care.

II. ALS Treatment Protocol:

MILD DISTRESS (no accessory muscle use, able to speak without difficulty, skin pink, warm, dry)

- A. Treat life threats. (See Policy 4000)
- B. Transport.
- C. Consider CPAP.
- D. Contact Base Station.

MODERATE DISTRESS (tachypneic, able to speak 4-5 words, no retractions)

- A. Treat life threats. (See Policy 4000)
- B. Transport.
- C. Albuterol 2.5 mg via nebulizer, may repeat x3 q 10 minutes.
If heart rate > 180 BPM, withhold treatment and contact Base Station
- D. Consider CPAP.
- E. Contact Base Station.

SEVERE DISTRESS (status 4 or 5, accessory muscle use, retractions, able to speak only 1-2 words, tachypneic, cyanotic)

- A. Treat life threats. (See Policy 4000)
- B. Transport.
- C. Albuterol 2.5 mg via nebulizer, may repeat x3 q 10 minutes.
If heart rate > 180 BPM, withhold treatment and contact Base Station
- D. Epinephrine 0.01 mg/kg of 1:1000 IM. May repeat dose x2, to a maximum of 0.3ml total.
- E. Consider CPAP
- F. **Contact Base if severe distress continues.**

Notes: CPAP is authorized for use only in patients that are 8 years and older.