

# Respiratory Distress/Bronchospasm

For COPD/asthma exacerbations and any bronchospasms/wheezing not from pulmonary edema

### History

- Asthma
- COPD – chronic bronchitis, emphysema
- Home treatment (e.g., oxygen or nebulizer)
- Medications (e.g., Theophylline, steroids, inhalers)
- Frequency of inhaler use

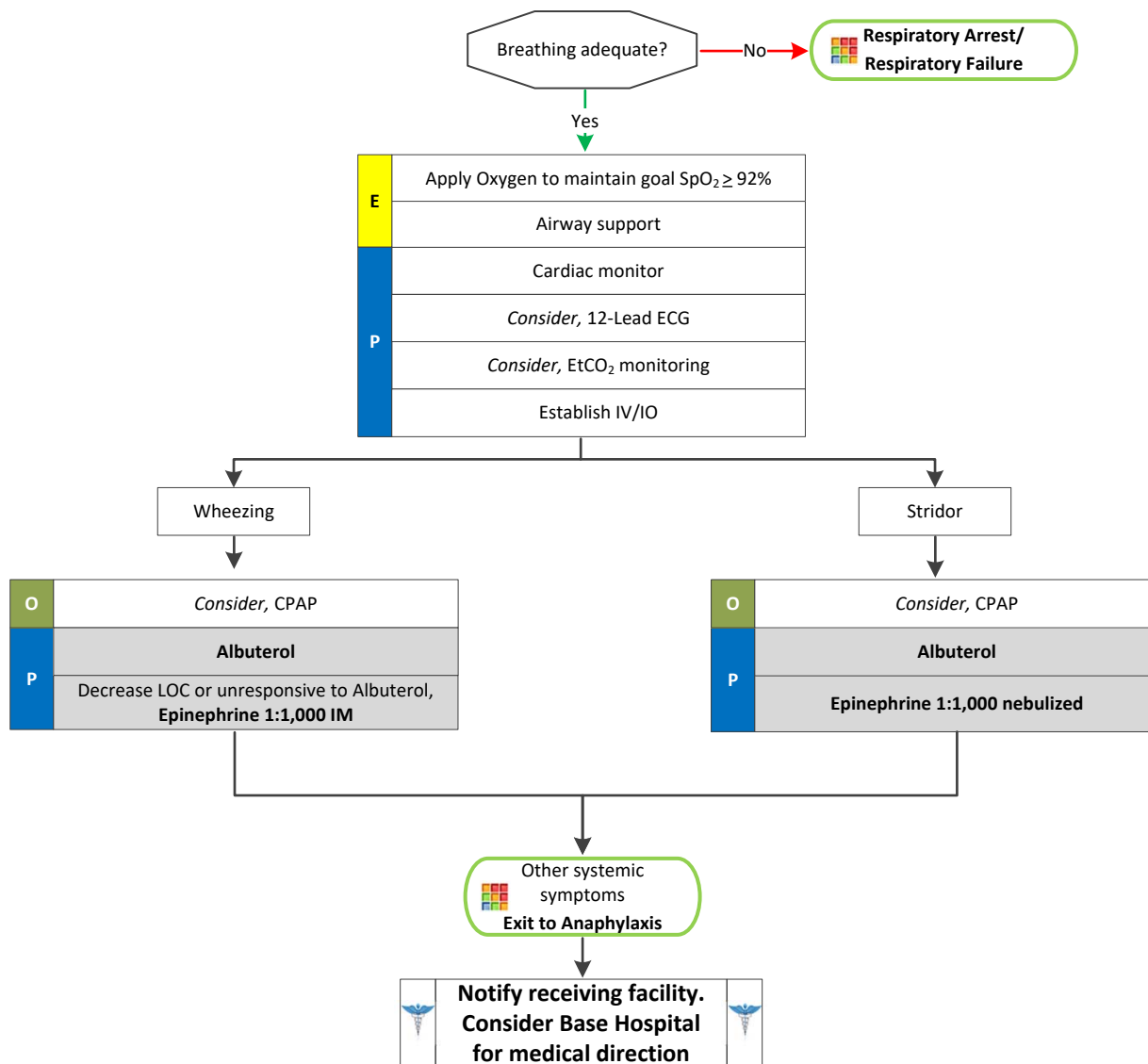
### Signs and Symptoms

- Shortness of breath
- Pursed lip breathing
- Decreased ability to speak
- Increased respiratory rate and effort
- Wheezing or rhonchi/diminished breath sounds
- Use of accessory muscles
- Cough
- Tachycardia

### Differential

- Asthma
- Anaphylaxis
- Aspiration
- COPD (emphysema or bronchitis)
- Pleural effusion
- Pneumonia
- Pulmonary embolus
- Pneumothorax
- Cardiac (MI or CHF)
- Pericardial tamponade
- Hyperventilation
- Inhaled toxin (e.g., carbon monoxide, etc.)

Adult Respiratory Distress Treatment Protocols



# Respiratory Distress/Bronchospasm

For COPD/asthma exacerbations and any bronchospasms/wheezing not from pulmonary edema

## Bronchospasm ("Shark-fin" appearance)

- Asthma
- COPD



### Pearls

- A silent chest in respiratory distress is a pre-respiratory arrest sign.
- Patients receiving epinephrine should receive a 12-Lead ECG at some point in their care in the prehospital setting, but this should NOT delay the administration of Epinephrine.
- Pulse oximetry monitoring is required for all respiratory patients.

