Adult Respiratory Distress Treatment Protocols

Respiratory Distress/CHF/Pulmonary Edema

History

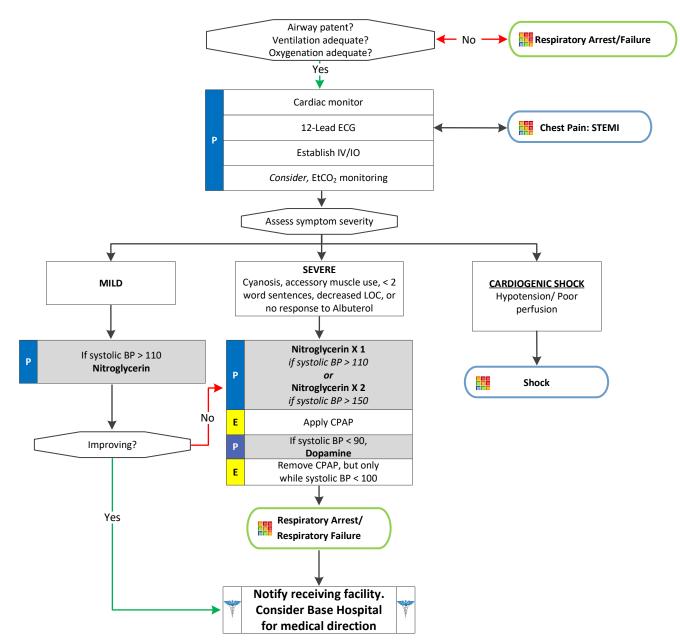
- · Congestive heart failure
- · Past medical history
- Medications (e.g., Digoxin, Lasix, erectile dysfunction medications)
- · Cardiac history including past MI

Signs and Symptoms

- · Hypotension/shock
- Bilateral rales/ crackles
- Anxiety
- Orthopnea
- Jugular vein distension
- Pink, frothy sputum
- Peripheral edema
- Diaphoresis
- · Chest pain
- Hypertensive Wheezing

Differential

- Myocardial infarction
- Congestive heart failure
- Asthma
- Anaphylaxis
- Aspiration
- COPD
- Pleural effusion
- Pneumonia
- · Pulmonary embolus
- · Pericardial tamponade
- · Toxic exposure



Respiratory Distress/CHF/Pulmonary Edema

For congestive heart failure exacerbation

Pearls

- Opioids have NOT been shown to improve the outcomes of EMS patients with pulmonary edema. Even though this has historically been a mainstay of EMS treatment, it is no longer recommended.
- Avoid Nitroglycerin in any patient who has used Erectile Dysfunction Medications Viagra/Revatio (Sildenafil) or Levitra (Vardenafil) in the past 24 hours or Cialis (Tadalafil) in the past 36 hours due to potential for severe hypotension.
- Carefully monitor the patient's level of consciousness, chest pain, and respiratory status with the above interventions.
- Consider MI in all of these patients.
- A trial of Albuterol can be considered in the undifferentiated patient.



Treatment Protocol R04

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