PEDIATRIC RESPIRATORY DISTRESS

### Indications

- Patient exhibits any of the following:
  - Wheezing
  - Stridor
  - Grunting
  - Nasal flaring
  - Apnea

### Upper Airway/Stridor

- **Mild-moderate distress:** NS 3ml HHN
- **Moderate to severe distress:**
  - **Epinephrine** (1mg/1ml concentration) 5ml HHN

### Lower Airway/Wheezing

- **Albuterol** 2.5mg in 3ml NS HHN, mask, or BVM
  - MR x1
- **Consider Atrovent** 500mcg in 2.5ml NS HHN, mask or BVM
- If response inadequate, **Epinephrine** (1mg/1ml concentration) 0.01mg/kg IM
  - MR in 5 min
  - Max total dose: 0.6mg

### Foreign Body Obstruction

- Attempt to clear airway
- <1 year: 5 back blows and 5 chest thrusts
- >1 year: 5 abdominal thrusts
- For FBO refractory to above attempts, utilize laryngoscopy to visualize and remove foreign body with Magill forceps

### Respiratory failure/apnea/complete obstruction

- Attempt positive pressure ventilation with BVM 1 breath every 2-3 seconds
- Advanced airway approved for patients whose height is greater than the length of the color-coded resuscitation tape **and** unable to ventilate with BVM

### Position of comfort

- Allow parent to administer O2 if possible

### SPECIAL CONSIDERATION

- Assess key history factors: recent hospitalizations, asthma, allergies, croup, and medication usage