

**MOUNTAIN-VALLEY EMS AGENCY
POLICIES AND PROCEDURES**

POLICY: **554.24**
TITLE: **RESPIRATORY DISTRESS,
NOT OTHERWISE
SPECIFIED**

APPROVED: Signature On File In EMS Office
Executive Director

Signature On File In EMS Office
Medical Director

EFFECTIVE DATE 8/24/2009
SUPERSEDES:
REVISED:
REVIEW DATE: 8/2014
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RESPIRATORY DISTRESS, NOT OTHERWISE SPECIFIED (NOS)

I. AUTHORITY

Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9

II. PURPOSE

To serve as the treatment standard for EMT-Is and EMT-Ps in treating patients.

III. DEFINITIONS

- A. Mild Respiratory Distress describes a patient who is typically able to speak full sentences; whose blood pressure and pulse may be elevated; might be weak and diaphoretic; have a normal mental status; no cyanosis.
- B. Moderate Respiratory Distress describes a patient who is generally able to speak just a few words; whose blood pressure and pulse are likely elevated; who might be weak and diaphoretic; have a normal mental status; circumoral and digital cyanosis may be present.
- C. Severe Respiratory Distress describes a patient who is unable to speak; whose blood pressure and pulse will be elevated or depressed; whose mental status typically altered; central cyanosis likely.

Note: Sometimes patients do not fall clearly into a specific treatment protocol, especially for respiratory distress. Examples might include patients suffering from pneumonia. For those patients where a specific treatment protocol does not fit the patient's presentation, this protocol may be utilized.

IV. PROTOCOL

MILD DISTRESS	
STANDING ORDERS	
OXYGEN	
POSITION	Sitting (as tolerated.)
MONITOR	Treat rhythm as appropriate.
PULSE OXIMETRY	
ALBUTEROL	2.5mg (3ml unit dose) via hand held nebulizer, if the patient is wheezing. Reassess after first treatment and repeat as needed up to three total treatments.

MODERATE DISTRESS	
STANDING ORDERS	
OXYGEN	
POSITION	Sitting (as tolerated.)
MONITOR	Treat rhythm as appropriate.
PULSE OXIMETRY	
ALBUTEROL	2.5mg (3ml unit dose) via hand held nebulizer, if the patient is wheezing.
REASSESS	
ALBUTEROL	5mg (6ml unit dose) via hand held nebulizer/in line nebulization continuously if still wheezing
CONSIDER CPAP	If available , start at 5 cm H2O, titrate up as patient tolerates and as patient condition warrants, to a max of 10 cm H2O
IV ACCESS	

SEVERE DISTRESS	
STANDING ORDERS	
OXYGEN	
POSITION	Sitting (as tolerated.)
MONITOR	Treat rhythm as appropriate.
PULSE OXIMETRY	
APPLY CPAP	If available , start at 5 cm H2O, titrate up as patient tolerates and as patient condition warrants, to a max of 10 cm H2O
ALBUTEROL	5mg (6ml unit dose) via hand held nebulizer/in line nebulization continuously, if the patient is wheezing
IV ACCESS	