## **Adult Universal Respiratory Distress**

Consider pulmonary & non-pulmonary causes:

pulmonary embolism, pneumothorax, pulmonary edema ("cardiac asthma"), MI, pneumonia, sepsis, metabolic acidosis (DKA, AKA), anxiety

Multiple causes can occur together and be contributing to a patient's symptoms.

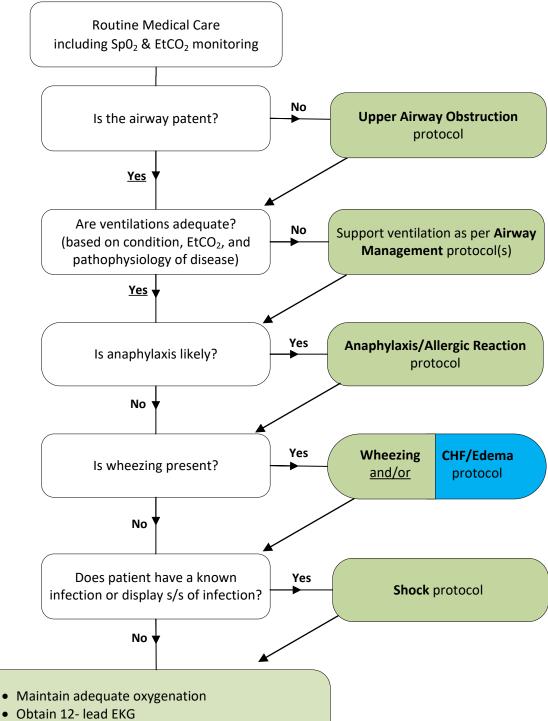
Consider management of more than one condition and use more than one protocol when needed

## **Signs of Respiratory Distress**

- SpO<sub>2</sub> <90%</li>
- Nasal flaring
- Unable to speak sentences
- Supraclavicular/intercostal/ subcostal retractions
- Absence of wheezing with obvious SOB
- Apprehension, combativeness, anxiety
- Cyanosis
- Lethargy

The goal should be to maximize oxygenation and ventilation regardless of the cause

Consider CPAP early and anticipate possible deterioration needing advanced airway management



- Continue to monitor for patient deterioration

Contact Medical Control for additional orders or consultation

