

## ASTHMA-BRONCHOSPASM



#### Escambia County, Florida - ALS/BLS Medical Protocol

This protocol is used for patients who are complaining of dypsnea and having wheezing.

A patient with a history of CHF that has wheezing on auscultation of lung sounds should <u>not</u> be automatically classified as an "asthma patient".

If the CHF patient does not have a history of asthma or allergic reaction, the more prudent assessment would be that of CHF (cardiac asthma).

### **Supportive Care**

1. <u>Medical Supportive Care Protocol</u>, including pulse <u>oximeter</u> and capnography.

#### ALS Level 1

- 1. Albuterol 1 nebulizer treatment containing 0.5 ml (2.5 mg) of <u>Albuterol</u> mixed with 2.5 ml normal saline.
- 2. If bronchospasm continues, repeat Albuterol 1 nebulizer treatment containing 0.5 ml (2.5 mg) of Albuterol mixed with 2.5 ml normal saline
- 3. If bronchospasm continues, repeat Albuterol 1 nebulizer treatment containing 0.5 ml (2.5 mg) of Albuterol mixed with 2.5 ml normal saline
- 4. Consider need for CPAP.
- 5. Consider need for intubation.
- 6. For severe dyspnea consider Epinephrine (1:1,000) 0.3 mg SQ (a).

#### **ALS Level 2** (Physician Authorization Required)

1. Repeat Epinephrine (1:1,000) 0.3 mg SQ (a) (b).

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#### Note

- (a) <u>Caution should be used when the patient is older than 40 years of age or has a history of hypertension or heart disease.</u>
- (b) If hypotensive with delay in capillary refill, SQ may be ineffective, consider Epinephrine (1:10,000), 0.5 mg **VERY SLOW IV** (over 3-4 minutes)



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