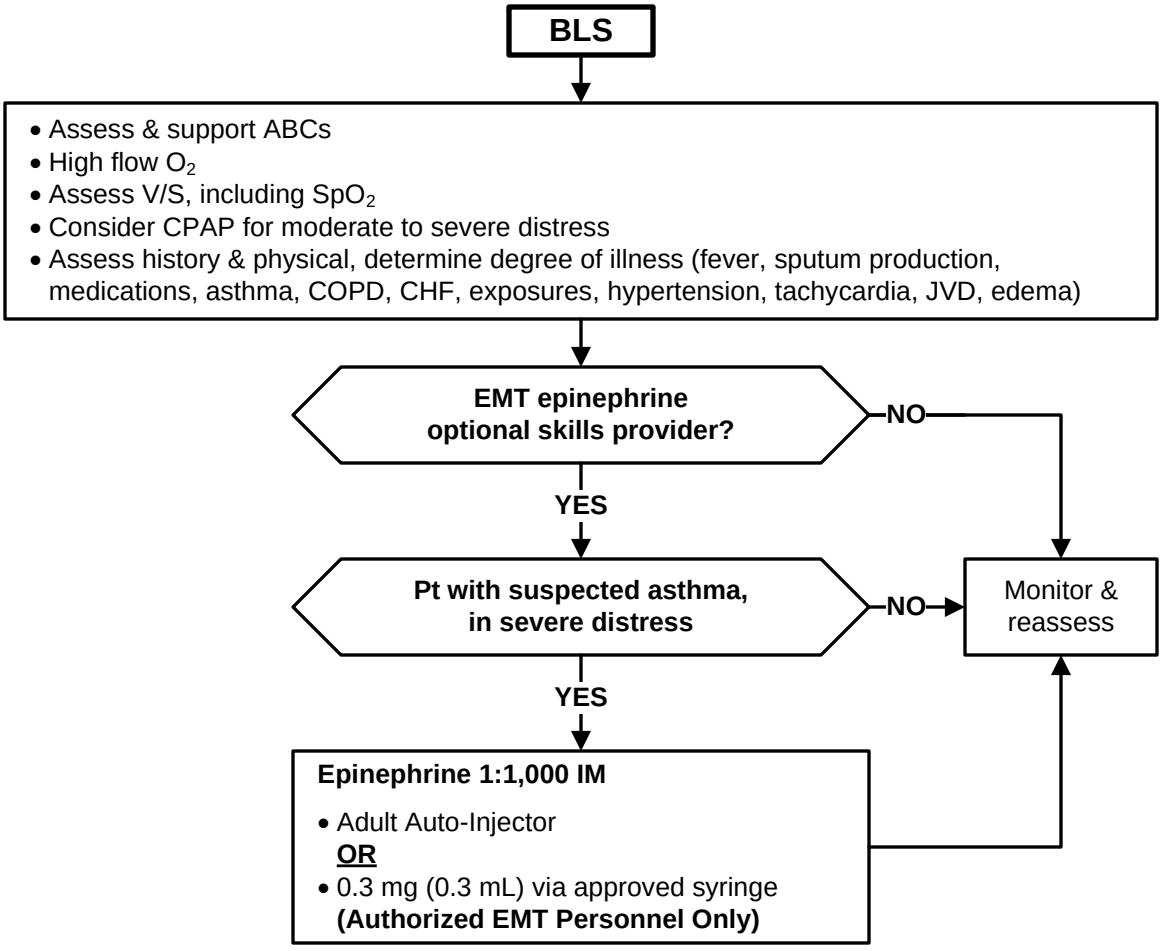
Sierra – Sacramento Valley EMS Agency Treatment Protocol	R-3 (LALS)
Acute Respiratory Distress	
Approval: Troy M. Falck, MD – Medical Director	Effective: 10/01/2025
Approval: John Poland – Executive Director	Next Review: 04/2028

Continuous Positive Airway Pressure (CPAP) Utilization

- **Indications:**
  - CHF with pulmonary edema
  - Moderate to severe respiratory distress
  - Near drowning
- **Contraindications:**
  - <8 years of age
  - Respiratory or cardiac arrest
  - Severe decreased LOC
  - Agonal respirations
  - Inability to maintain airway
  - Suspected pneumothorax
  - SBP <90
  - Major trauma, especially head injury or significant chest trauma
- **Complications:**
  - Hypotension
  - Pneumothorax
  - Corneal drying

Epinephrine Administration

- Epinephrine is only indicated for pts with suspected asthma who are in severe distress.
- **Use epinephrine cautiously in pts >35yo, or with a history of coronary artery disease or hypertension.**
- Administer Auto-Injector/IM epinephrine into the lateral thigh, midway between waist & knee.



SEE PAGE 2 FOR LALS TREATMENT

Acute Respiratory Distress

Asthma/COPD

LALS

Mild Distress
- Mild wheezing
- Mild shortness of breath
- Cough

- Cardiac monitor **(AEMT II)**
- Consider IV NS (may bolus up to 1000 mL)

Albuterol 5 mg
- Nebulizer
- May repeat 2.5-5 mg for continued respiratory distress

Moderate to Severe Distress
- Cyanosis
- Accessory muscle use
- Inability to speak >3 words
- Severe wheezing/shortness of breath
- Decreased or absent air movement

- Cardiac monitor **(AEMT II)**
- IV NS (may bolus up to 1000 mL)

Albuterol 5 mg
- Nebulizer/CPAP/BVM
- May repeat 2.5-5 mg for continued respiratory distress

History of asthma with severe distress only

Epinephrine 1:1,000
- 0.01 mg/kg IM (max: 0.5 mg)

CHF/Pulmonary Edema

LALS

Mild Signs & Symptoms

- Cardiac monitor **(AEMT II)**
- IV NS TKO

***Nitroglycerin**
- 0.4 mg SL
- May repeat every 5 mins

***Nitroglycerin Notes/Precautions**
- Do not administer if SBP <100
- Do not delay due to difficult vascular access
- Consult with base/modified base hospital prior to administration to pts taking erectile dysfunction or pulmonary HTN medication

Moderate to Severe Signs & Symptoms

- Cardiac monitor **(AEMT II)**
- Assess BP x 2 to confirm accuracy
- IV NS TKO

***Nitroglycerin: titrate dose based on SBP**
- SBP 100-150: 0.4 mg SL
- SBP 150-200: 0.8 mg SL
- SBP >200: 1.2 mg SL
- May repeat titrated doses every 5 mins based on repeat SBP