County of San Luis Obispo Public Health Department Division: Emergency Medical Services Agency

RESPIRATORY – BRONCHOSPASM ASTHMA/COPD/CROUP PEDIATRIC (≤34 KG) **ADULT BLS** • Universal Protocol #601 Pulse Oximetry O₂ administration per Airway Management Protocol #602 May assist with patient's prescribed medication, inhaler, etc. **BLS Elective Skills** • **CPAP** per Airway Management Protocol #602 • None **ALS Standing Orders ASTHMA BRONCHOSPASM/ASTHMA** Stable Stable Albuterol 2.5-5 mg via HHN/Mask/CPAP/BVM **Albuterol** 2.5-5 mg via HHN/Mask/BVM with with adjunct over 5-10 min adjunct over 5-10 min o repeat as needed o repeat as needed Unstable Unstable **Epinephrine 1:1,000** 0.01 mg/kg IM – not to **Epinephrine 1:1,000** 0.01 mg/kg IM – not to exceed 0.5 mg exceed 0.3 mg o may repeat every 5 min, max 3 doses o may repeat every 5 min, max 3 doses **Extremis Extremis Epinephrine 1:1,000** 0.01 mg/kg SL – not to **Epinephrine 1:1,000** 0.01 mg/kg SL - not to exceed 0.5 mg exceed 0.3 mg o may repeat every 5 min, max 3 doses o may repeat every 5 min, max 3 doses COPD/BRONCHOSPASM **CROUP** Stable Stable Albuterol 2.5-5 mg via HHN/Mask/CPAP/BVM **Humidified oxygen** via HHN/Mask or blow-by with adjunct over 5-10 min repeat as needed **Base Hospital Orders Only** Unresponsive to previous therapy Unresponsive to previous therapy **Epinephrine 1:10,000** 0.01 mg/kg (0.1 mL/kg) **Epinephrine 1:10,000** 0.01 mg/kg (0.1 mL/kg) slow IV titrated – not to exceed 0.5 mg slow IV titrated – not to exceed 0.3 mg As needed **CROUP** Albuterol 2.5-5 mg via HHN/Mask/BVM over 5-10 min o repeat per base order

Protocol #616

Effective Date: 08/01/2019

Notes

BRONCHOSPASM – narrowing of lower airways, may be associated with: wheezes, cough, and chest tightness

• Can be caused by: respiratory infections, exposures (toxins, allergens, fire/smoke), exercise, stress, cold dry air

As needed

 Evaluate history of: chronic lung disease, prescribed medications, allergies, chronic infections (TB, Coccidioidomycosis)