



Respiratory Thinking Points

Asthma/COPD

Correct management of respiratory distress is dependent on identifying the etiology and degree of distress.

Signs and symptoms of respiratory distress include:

- Shortness of breath
- Difficulty speaking
- Altered mental status
- Diaphoresis
- Use of accessory muscles
- Retractions
- Respiratory rate <8 or >24

- Patients may also present with inspiratory & expiratory wheezing and/or “tight” lung sounds with decreased air movement.
- **If the etiology is questionable or your assessment does not provide a clear etiology, consult Medical Control for directions in patient care.**

- Constant reassessment of the respiratory distress patient is imperative to assure that the patient has adequate ventilation and oxygenation. Closely monitor the patient’s response to treatment rendered.
- Patients in respiratory distress should be transported in an upright position to assist their respiratory effort.

CHF

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- If the etiology is questionable or your assessment does not provide a clear etiology, **consult Medical Control** for directions in patient care.
- **In addition to general signs/symptoms of respiratory distress, patient may present with crackles, pedal edema, distended neck veins (JVD), orthopnea and tripod positioning.**

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