

	Department Name Address	ALS	Paramedic
		Revision #	
		Implementation Date	
Protocol	2.1.10 COPD	Last Reviewed/Update Date	
Author / Owner		Medical Director	

Treatment goals of the patient with shortness of breath possibly due to COPD in the pre-hospital environment includes: ensuring adequate oxygenation, delivery of medications to relieve shortness of breath, and safe timely transport to the appropriate care facility.

1. Baseline care standards.
2. Place patient in position of comfort and reassure.
3. Monitor O₂ saturation and capnometry. Administer oxygen to keep sats at >92%.
4. Assist patient with prescribed medications as directed by private physician.
5. Start CPAP/BiPAP therapy, if appropriate, and available.
6. Start an IV of Normal Saline at TKO/KVO rate.
7. For wheezing in suspected asthma or COPD, administer:
 - *Albuterol 2.5mg in 3cc Normal Saline*- by nebulizer.
 - Patient may receive continuous *Albuterol nebulizer* treatments until breath sounds are clear.
8. If patient is in respiratory distress, administer:
 - *Solu-Medrol® 125mg IV* over 1 minute.
9. If respiratory rates are < 10 or > 30 per minute and patient has a decreased level of consciousness, assist respirations using a bag-valve-mask, and:
 - Consider tension pneumothorax if patient is hard to ventilate with poor compliance, hypotensive, and has narrowing pulse pressures or subcutaneous air.
10. Continue airway management per protocol.
11. Transport with lights and sirens.

Medical Director's Signature

Date

Disclaimer:

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