Abnormal Work of Breathing - Paediatric 4/5/6.13.7 **EMT** Version 4, 03/2021 Respiratory Airway CPG patent & difficulty protected Consider Raised ETCO₂ + reduced SpO₂: Check SpO₂ ETCO₂ Consider assisted ventilation Raised ETCO₂ + normal SpO₂: 100% O₂ initially Encourage deep breaths Titrate O₂ to standard as clinical condition improves Patient assessment consider positive pressure ventilations (12 to 20 per minute) via BVM Brain insult Respiratory failure Substance intake Other If suspected narcotic OD Consider Go to Respiratory assessment Consider pain, posture & Naloxone 10mcg/kg IV/IO Head neuromuscular disorders Naloxone 10mcg/kg IM/SC Naloxone 20mcg/kg IN Bronchospasm/ Asymmetrical Crepitations Other known asthma breath sounds Consider shock, cardiac/ Go to Go to Go to neurological/ systemic Asthma Sepsis CPG Anaphylaxis CPG illness, pain or CPG psychological upset Consider collapse, consolidation & fluid Tension Pneumothorax suspected AP Needle decompression Repeat Naloxone prn to Max 100mcg/kg or 2mg

