

## HISTORY

- SOB
- **Productive cough:** White / Yellow-Green sputum
- **Fevers:** Infective v Non-infective
- **PMH:**
  - Known COPD
  - Previous NIV or ICU
  - Frequency of exacerbations or hospital admissions
  - Home nebulisers
  - Home O<sub>2</sub>

## EXAMINATION

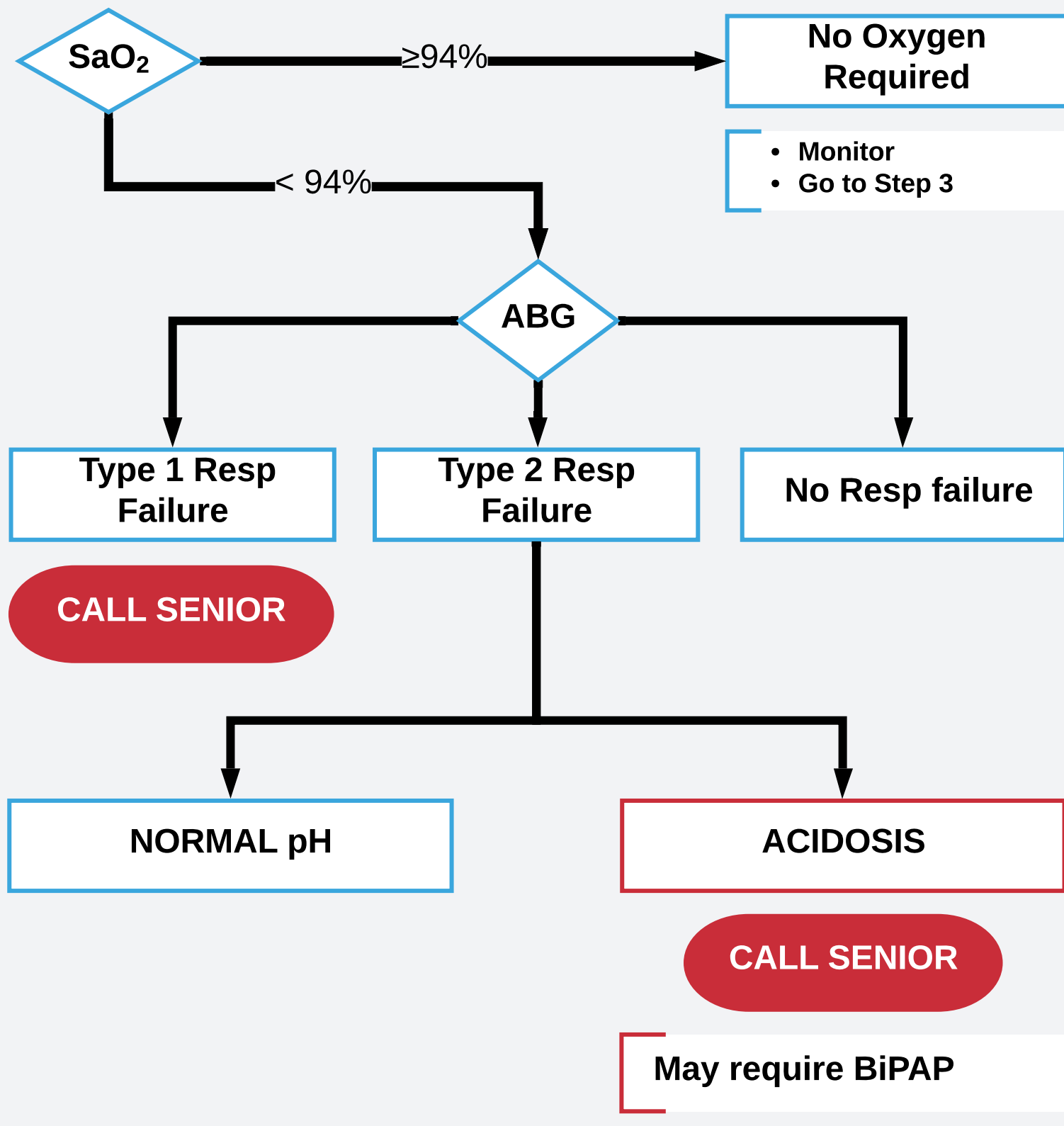
- **Physical observation:** WOB / Cyanosis / High RR / reduced SaO<sub>2</sub>
- **Temperture:** Infective v Non-infective
- **Auscultation:** Wheeze / Crackles / Decreased air entry
- **Sputum:** White / Yellow-Green

## INVESTIGATIONS

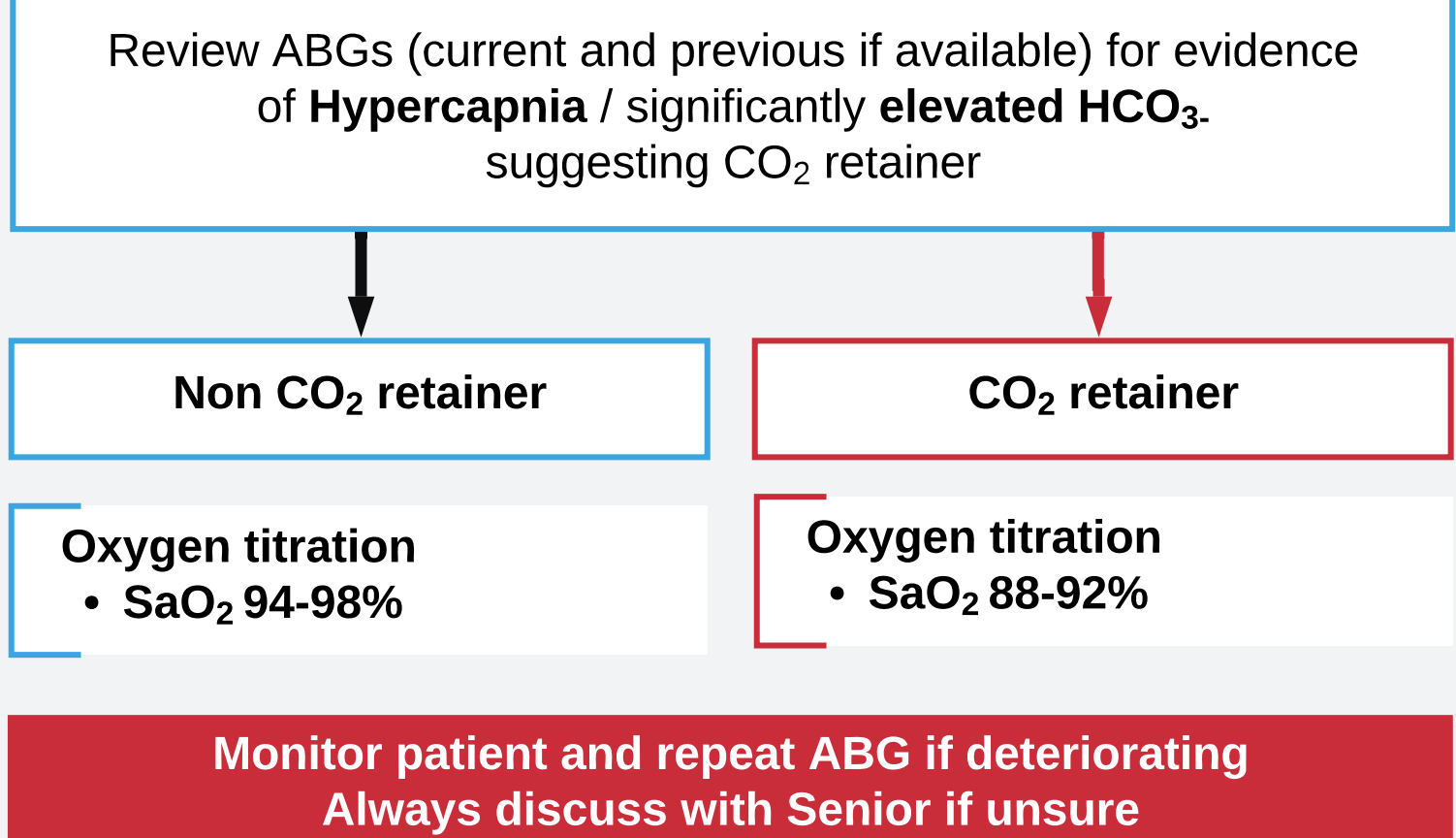
- **Bloods:** Raised CRP / WBC
- **ABG:** Hypoxia / Raised CO<sub>2</sub> / Raised HCO<sub>3</sub>
- **CXR:** Hyperinflation / Clear / Consolidation

## MANAGEMENT

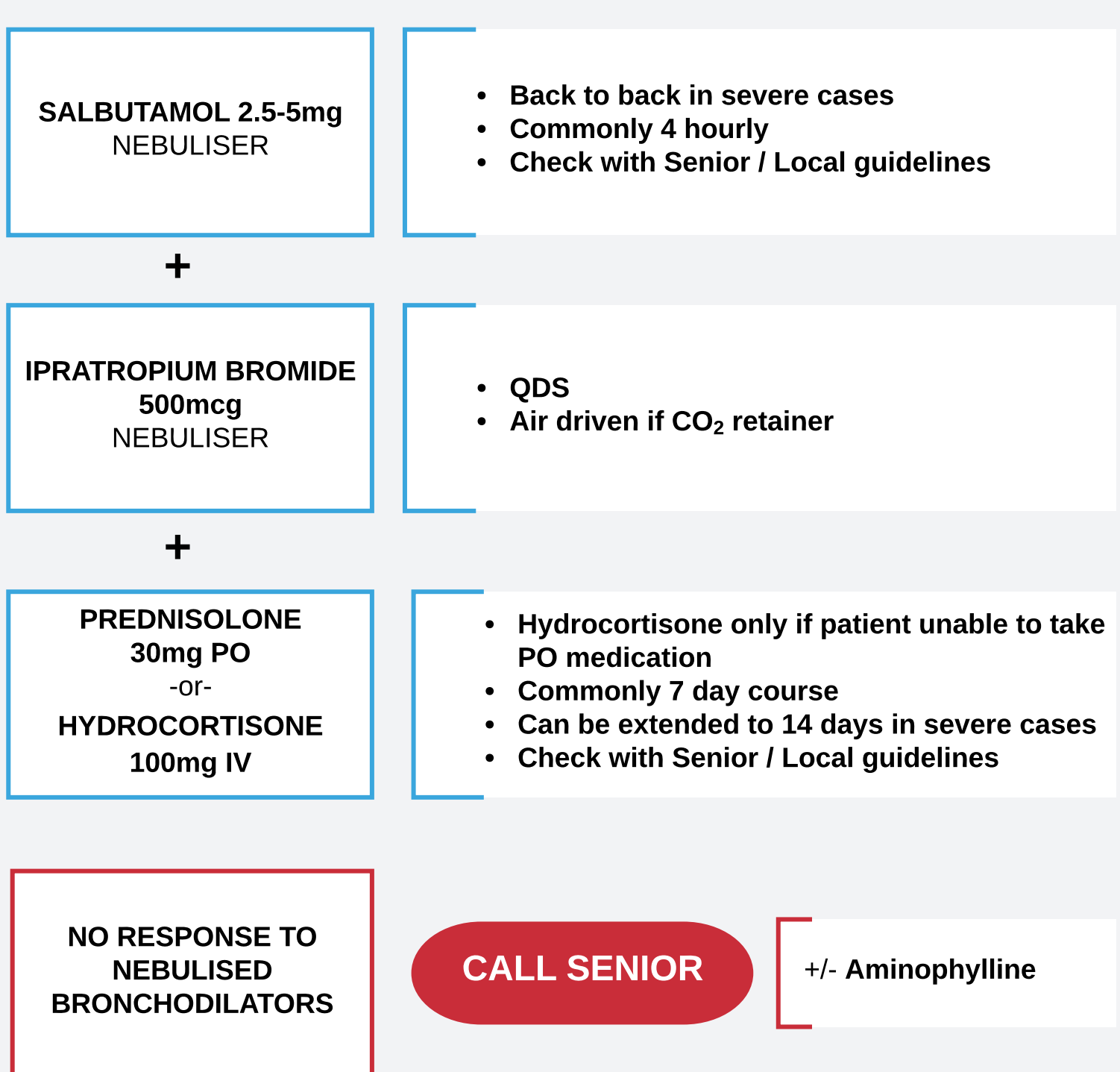
### STEP 1 -ABG ASSESSMENT-



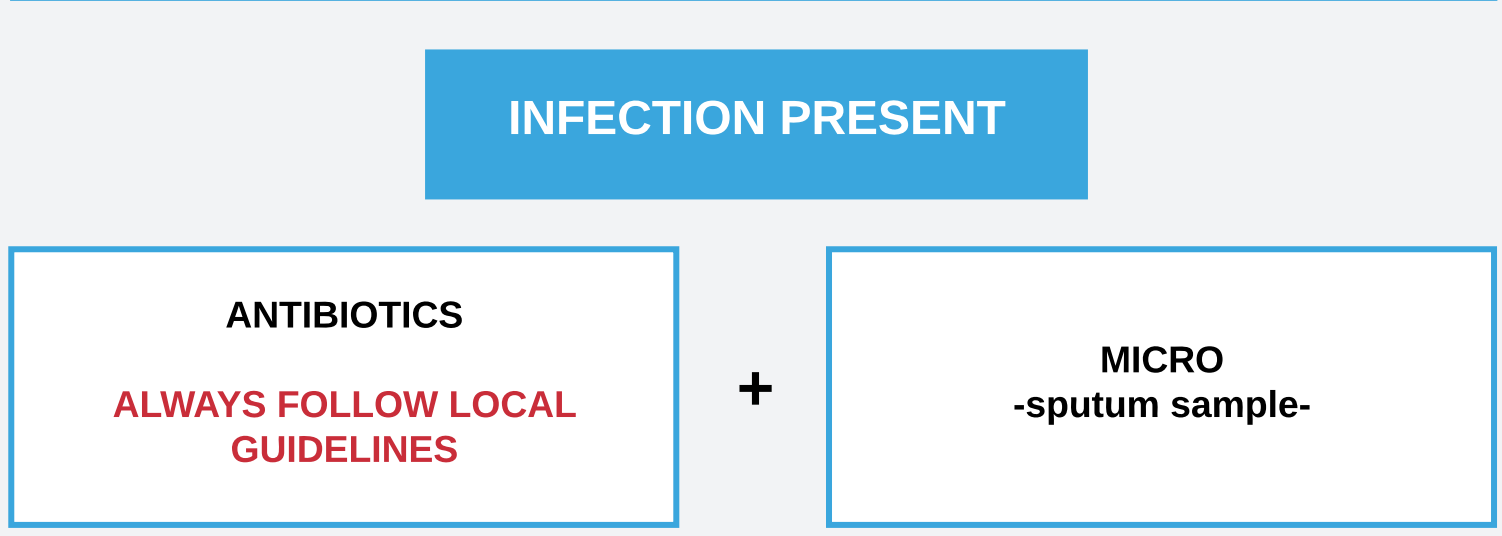
### STEP 2 -OXYGEN THERAPY-



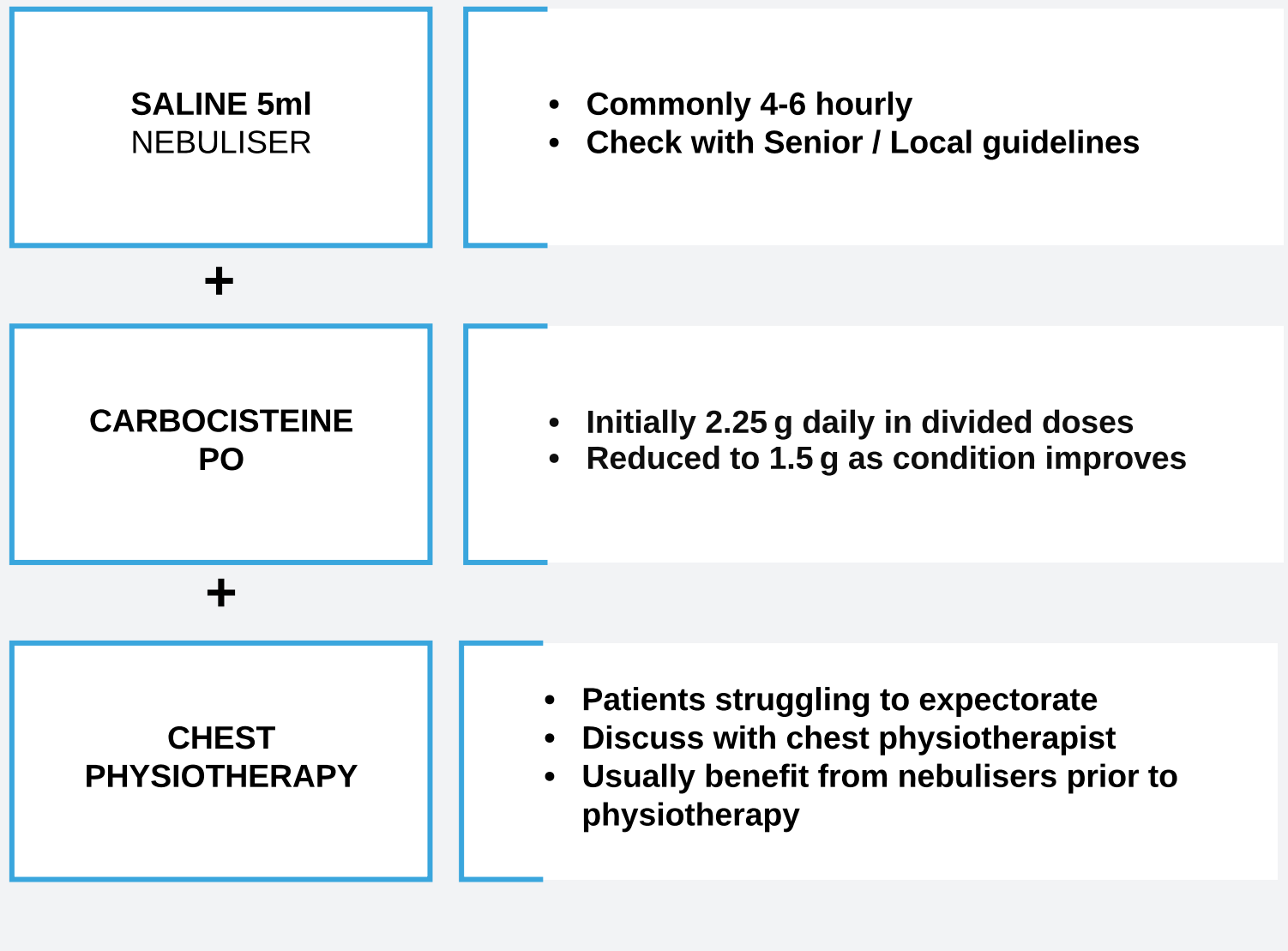
### STEP 3 -MEDICAL THERAPY: WHEEZE-



### STEP 4 -MEDICAL THERAPY: INFECTION-



### STEP 5 -ADDITIONAL THERAPY: EXPECTORANTS-



## CONTACT SENIOR

- **Acidosis:** May require BiPAP
- **Respiratory failure:** Type 1 or 2
- **Failure to respond to nebulised bronchodilators:**
  - May require Aminophylline

