# What Will Happen In The Study?

You will be “randomized” into one of the study groups described below. Randomization means that you are put into a group by chance. It is like flipping a coin. A computer will decide which group you are in.

Group 1 will receive 2.5 mg albuterol with standard 0.9% saline Group 2 will receive 2.5 mg albuterol with nebulized 3% saline

# How long will i be in the study?

You will be in the study until you are discharged from the hospital.

# What Are The Risks Of The Study?

### Risks and side effects related to nebulized saline include:

Common:

* Cough, wheeze, shortness of breath due to muscle tightening in the lungs (bronchospasm)
* Sore throat

Uncommon, but serious:

* Fluid in the lungs (pulmonary edema)
* Chest pain

### Risks and side effects related to albuterol include:

Common:

* + Fast heart rate (tachyarrhythmia)
  + Low potassium levels
  + Sore throat/irritation
  + Shaking (tremors)

Uncommon, but serious:

* + Upper respiratory tract infection
  + Sinus infection (rhinitis)
  + Abnormal heart rhythm (atrial fibrillation)
  + Heart attack
  + Water in the lungs (pulmonary edema)

Rare:

* + Rapid heart rhythm (supraventricular tachycardia)
  + Itching
  + Swelling of the mouth, face, lips, and throat (angioedema)
  + Rash
  + Muscle tightening in the lungs (bronchospasm)
  + Dizziness
  + Nervousness
  + Headache
  + Sleeplessness
  + Nausea, stomach upset
  + Nasal congestion
  + Throat irritation (pharyngitis)
  + High blood pressure
  + Cough

# What Are The Costs?

Taking part in this study will not lead to added costs to you or your insurance company.

While you are in this study, you may receive tests, procedures, and exams that are standard medical care. This standard medical care may or may not be covered by your medical insurance.

If your medical insurance does not pay for this standard medical care, you will be responsible for the cost of medical care related to your condition, including but not limited to tests, deductibles, co-payments, study doctor and clinic fees, hospitalization and procedures.

# Compensation?

You will receive no payment for taking part in this study.

# Do I Have the Right to Decline Authorization?

You have the right to decline to sign this authorization to use/disclose your medical information. If you decline, you will not be able to take part in this research study. Except as described herein, if you decline to sign this authorization, your rights concerning treatment, payment for services, enrollment in a health plan or eligibility for benefits will not be affected.

# What Are My Rights as a Participant?

Taking part in this study is voluntary. You may choose not to take part or you may leave the study at any time. Leaving the study will not result in any penalty or loss of benefits to which you are entitled.

# Whom Do I Call if I Have Questions or Problems?

For questions about the study or a research-related injury, contact the study doctor, Kruti Patel, DO, at 614-857-7735*.*